CITY OF LEADVILLE, COLORADO RESOLUTION NO. 29 SERIES 2018

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF LEADVILLE, COLORADO, SUPPORTING THE LEADVILLE/LAKE COUNTY SENIOR MASTER PLAN

WHEREAS, the City of Leadville ("City") has the authority to provide for the health, safety and welfare of the public pursuant to C.R.S. § 31-15-401 and its general police powers; and

WHEREAS, the Lake County with the involvement of the city have coordinated to develop a plan to better understand and address the needs of our aging population, titled the Lake County Senior Master Plan dated 2017; and

WHEREAS, the City and Lake County will also coordinate with Lake County Public Health Agency to support the plan and its implementation as appropriate;

NOW, THEREFORE, BE IT RESOLVED by the City Council of the City of Leadville, Colorado as follows:

- <u>Section 1.</u> <u>Recitals Incorporated.</u> The above recitals are hereby incorporated into this Resolution as if fully set forth below.
- <u>Section 2.</u> <u>Approval of the Senior Master Plan</u>. The City Council hereby: (1) approves the Senior Master Plan in substantially the form attached hereto as **Exhibit A**
- Section 3. Effective Date. This Resolution shall take effect upon its adoption by the City Council.

ADOPTED by a vote of 5 in favor and 0 against, and 0 abstaining, this 13th day of November, 2018.

CITY OF LEADVILLE, COLORADO

Greg Labbe, Mayor

ATTEST:

Deputy City Clerk, Bethany Maher

EXHIBIT A SENIOR MASTER PLAN

[see attached document]

	*	

2017

Lake County Senior Master Plan

Living and Aging Well







This report was prepared by Lake County Build a Generation and Lake County Public Health Agency, whose vision is to empower our Lake County Community in making healthy choices where we live, work, learn and play.

Letter of Welcome

Welcome to the Senior Master Plan.

This plan reflects the commitment of Lake County and its Board of County Commissioners to better understand and address the needs of our aging population. Because this project aligned with the mission and goals of the Lake County Public Health Agency and Lake County Build a Generation, these two agencies were tasked with this undertaking. We thank the Board for their vision and for providing us the opportunity to do this exciting and important work.

Beginning in 2017, we set out to learn about Lake County's senior population. We conducted a review of federal, state, and local planning documents about senior health, held over 100 hours of interviews

with local seniors, conducted interviews with coordinators in nearby communities who work on senior issues, met with staff at local agencies to identify opportunities to address seniors' needs, and held several community meetings. In this process, we worked to define what "Aging Well" meant to Lake County community members—and identified eight key issues of importance to local seniors. This document provides a summary of these eight key issues, including the steps already being taken in Lake County and the gaps that continue to provide challenges and opportunities.

Fundamentally, however, we learned that, for our community members, "Aging Well" means that they have the supports to continue their daily activities, and age in place, for as long as possible. Providing this opportunity

Key Senior Indicators

- Access to Care
- Home Health Care and Services
- Transportation
- Support for Caregivers
- Social and Community Engagement
- Housing
- Preventive Care
- Information and Education

requires looking across all these eight indicators and working to improve the supports that local seniors have available to them. Fortunately, Lake County is not alone in this work. Across the region, the state and the nation, there is a growing energy in communities to develop the systems and supports for "Aging Well," and we look forward to joining this movement.

Moreover, while Lake County's senior population has unique challenges, so much of what is good for seniors is good for the general population. Ultimately, we believe this plan will support all of our community members in achieving their greatest health. We are excited to work with partners within and outside this community to begin implementation—and to continue to ensure that Lake County is a healthy place to be born, grow up, have a family, and grow old.

C. Jule, RN

Colleen Nielsen, RN
Director, Lake County Public Health Agency

Katie Baldassar

Director, Build a Generation

Contributors

Senior Master Plan
Colorado Trust
Lake County Public Health Agency
Lake County Build a Generation
Lake County Board of County Commissioners
City of Leadville
Lake County Senior Advisory Board
Senior Community Connectors

Capacity Assessment	
St. Vincent Hospital – Leadville Medical Clinic	
Rocky Mountain Family Practice	
Solvista Health	:
Lake County Department of Human Services	
Lake County Recreation Department	
Lake County Public Library	
Lake County Department of Motor Vehicles	
Leadville Lake County Economic Development Corporation	
Lake County School District	V - 4
Colorado Mountain College	F-2000-4-2-194-10-10-4-2-10-10-4-4-10-10-4-4-10-10-10-10-10-10-10-10-10-10-10-10-10-
Cloud City Conservation Center	
Chaffee County Public Health	parameter year the control of the co
Chaffee County Department of Human Services	
Area Agency on Aging – Upper Arkansas Area Council of Governments	

Best Practices
Northeastern Colorado Area Agency on Aging
Weld County Area Agency on Aging
Maine Associations of Area Agencies on Aging
Eagle County Public Health – Healthy Aging
Summit County Human Services – Community and Senior Center
Garfield County Human Services - Seniors
Dolores County Senior Services
Sage Generation, Salida
Innovations in Aging, Colorado Springs
Mt. Carmel Health and Wellness, Trinidad

Lake County Senior Master Plan

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Executive Summary

In 2017, Lake County Public Health Agency and Lake County Build a Generation conducted a year-long, comprehensive assessment of the health issues concerning Lake County seniors. The needs and recommendations outlined in the 2017 Lake County Public Health Senior Master Plan were informed by more than 100 hours of interviews with local seniors as well as

extensive research on best practices for supporting senior well-being.

The Vision

The Senior Master Plan aims to ensure that all seniors in Lake County have the opportunity to "age well in place" including being:

- Surrounded by people they value
- Able to stay in a community where they belong
- Given opportunities to make meaningful contributions
- In optimal physical, mental, and cognitive health
- Free of injury or chronic conditions



Needs include increased local access to medical and specialist services, assisted living and/or nursing home facilities, and case management.

What we hope to see by 2020

- More specialists serving Lake County seniors either locally or regionally.
- The introduction of a caseworker model in Lake County to assist seniors in identifying services to help them stay in their homes longer and/or transition to assisted living or nursing care.
- A clear plan for developing assisted living and/or long-term care opportunities in Lake County.
- At least one informational session annually to inform seniors and caregivers about available resources.



Issue No. 2: Home Health Care and Services

Needs include more reliable free or low-cost home care service providers, such as meal deliveries, companion services, home health care, and home maintenance.

What we hope to see by 2020

- More home care services provided (either paid, voluntary or government supported).
- The development of local certification programs for either Certified Nurse Assistants or Personal Care Assistants.
- A comprehensive list of home health care services provided in the community (including information about how to access them).

Issue No. 3: Transportation

Needs include more reliable, safe, and wheelchair accessible transportation and infrastructural improvements (sidewalks, lighting, snow removal) that improve wheelchair accessibility and pedestrian safety.

What we hope to see by 2020

- An improved transportation program at the Senior Center.
- The passage of Complete Streets policies in Leadville and Lake County.
- An increase in the transportation supports provided for seniors in Lake County.

<u>Issue No. 4: Support for Caregivers</u>

Needs include caregiver support groups and respite services, as well as more information on available resources and services, including more culturally relevant outreach for Latino caregivers.

What we hope to see by 2020

The development of a caregiver information series.

Issue No. 5: Social and Community Engagement

Needs include increased diversity of activities, updated or new facilities for senior activities, and improved processes to inform seniors about senior events and activities.

What we hope to see by 2020

- Improvements made to the Senior Center and a long-term plan developed for the Senior Center's eventual remodel and/or replacement.
- An increase in the number of activities available to seniors.

Issue No. 6: Housing

Needs include increased awareness of the Senior Homestead Exemption; innovative and affordable housing options for seniors, including low-cost or subsidized home modifications or

Lake County Senior Master Plan

renovations; infrastructure and community improvements to make all Lake County neighborhoods "age-friendly."

What we hope to see by 2020

- The inclusion of senior housing needs in the Housing Needs Assessment.
- The development and/or expansion of local programs that support seniors in ensuring their homes are efficient and healthy.

Issue No. 7: Preventive Care

Needs include increased access to preventive screenings and vaccines, as well as support for seniors to participate in behaviors that enhance quality and length of life, such as tobacco cessation, healthy eating and active living.

What we hope to see by 2020

- An increase in preventive care services offered in town and marketed to seniors.
- An increase in seniors' access to healthy, affordable food and/or programming that encourages seniors to eat more healthy food.

Issue No. 8: Information and Education

Needs include connecting seniors to resident "experts" on topics like taxes, navigating insurance programs, using technology, etc.; increased number of entities that have a "senior advocate" on staff.

What we hope to see by 2020

 Increased outreach to seniors using tools such as classes, fairs, Lunch n' Learns, social media, websites, newsletters, individual meetings, etc.

How we plan to get there - Current Priorities

Priority 1: Establish an Aging Well project under the Lake County Public Health Agency

The City of Leadville and Lake County Government are supporting the creation of an Aging Well project under LCPHA. An Aging Well Coordinator will supervise staff and carry out strategic initiatives to address the eight key health issues outlined in the Senior Master Plan.

Priority 2: Enhance Community Collaboration and Senior Support

The Aging Well Coordinator will work closely with local and statewide entities to increase support services for Lake County seniors. Potential support agencies include Lake County Board of County Commissioners, City of Leadville, Lake County Build a Generation, Lake County Public Health Agency, St. Vincent Hospital, Rocky Mountain Family Practice, Solvista Health, Lake County Department of Human Services, Lake County Recreation Department, Lake County Public Library, Lake County Department of Motor Vehicles, Leadville Lake County Economic Development Corporation, Lake County School District, Colorado Mountain College,

Lake County Senior Master Plan

Cloud City Conservation Center / Cloud City Farm, Chaffee County Public Health, Chaffee County Department of Human Services, and Upper Arkansas Area Council of Governments -- Area Agency on Aging.



Senior Community Connector Photovoice Project Planning



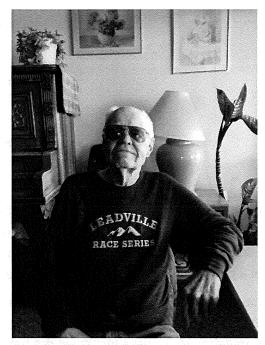
Senior Center "Meals on Wheels" Recipient

Introduction

Colorado's aging population is expected to see its biggest surge between the years 2010 to 2040, with "the number of persons over age 65 in 2040 {being} nearly three times as many as today, growing twice as fast as the total population." In Lake County, for example, the 65 and older demographic increased by almost 3% from 8.9% (2010 Census) to 11.8% (2016

estimates). As populations age, communities experience a wide array of challenges ranging in economic, infrastructure and social impact. In 2011, sixteen Area Agencies on Aging across Colorado assessed the needs of older adults in their communities and found significant gaps across seven different areas, including access to health care, transportation and information (that is, "lack of information or knowledge" of services, public insurance programs and options, and legal-financial issues).

The Youth Master Plan guiding Lake County Build a Generation's work has significantly increased youth outcomes in the community through increased collaboration, guided programming, and secured funding for infrastructure improvements since its



publication in 2013. Likewise, local government and key community agencies realized a need for a similar planning process to understand barriers, prioritize needs, and identify strategies to optimize the health and quality of life of Lake County seniors. This process occurred from 2016-2017 and some of the key things learned from this work were:

- Most seniors want to age in place rather than move to "easier" climates or to areas with long-term care facilities;
- > To improve life expectancy and life quality, we must reduce chronic disease (the number one cause of death in Lake County) by promoting preventative care in three areas (healthy eating, active living, tobacco cessation) in youth and early adulthood;
- > To create an age-friendly community, we need to promote multi-sector collaboration across government, nonprofits, business, faith communities, the medical community and service clubs;
- Programs are important, but policy and infrastructure are also key tools;
- > We need to create local-level staff positions to better utilize the state and federal resources available to us.

VISION

The Lake County Senior Master Plan will ensure that all seniors in Lake County have the opportunity to "age well in place," which includes being:

~Surrounded by people they value
 ~Able to stay in a community where they belong
 ~Given opportunities to make meaningful contributions
 ~In optimal physical, mental, and cognitive health
 ~Free of injury or chronic conditions

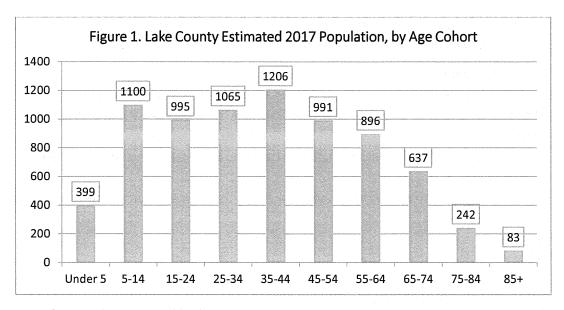
Lake County at a Glance

Lake County is a rural county located in Colorado's high country with an estimated <u>total</u> <u>population of 7,618</u> in 2016. The county seat and only municipality in the county is Leadville, estimated at 2,602 people at the last 2010 census. At 10,152 feet, it is an extreme place to live – in a typical year, winter arrives in October and lasts until May.

Lake County experienced a large drop in population in 1990, corresponding with the closing of the Climax Molybdenum mines that employed a large number of people. Since then, population levels have increased but have not returned to 1980 levels (N=8,830). Starting in the U.S. Census reporting year 2000 to current day, Lake County population numbers have stabilized in the 7,000+ range.

For 2016 population estimates, 37% of the population is Latino/Hispanic and over 60% White (remaining percentage classified as *Other*). Of the total Lake County population estimated in 2016 (7,618), 11.8% or about 890 residents are 65 years and older. The <u>U.S. Census</u> estimates that around 544 of those are Veterans.

Figure 1 portrays Lake County's 2017 population estimate by age cohort (forecasts can be obtained through the <u>State Demography Office</u>). The current largest age group cohort is between 35-44yo, which by 2050, will be over 65 years old and in increasing need of senior resources and services (<u>this "aged" population assumes mortality and migration rates</u> in and out of the area, the latter of which is lower for older adults than the younger population).



Because of its rural nature and high mountain elevation, Lake County experiences a number of challenges for the population as a whole. Jobs, amenities, and specialty medical services are often "over the hill" (in Summit County) and over a steep mountainous pass. For example, the mean travel time to work for Lake County residents 16+ years old between 2012-2016 was 25.7 minutes, putting many residents well outside the county for employment. Leadville has one major grocery store on the North end of town and reliable, safe transportation for groceries is still often an issue for many impaired residents or those without a vehicle.

Lastly, recent work in the county around assessing housing needs has indicated that home values are increasing faster than comparable areas around the state, as compared to Lake County median income levels (2015: \$45,913) and in lieu of a low housing stock. Some senior housing is available at Mount Massive Manor Apartments, but currently no long-term care or nursing home facilities exist in Lake County. Low-income households, which many seniors may be considered, bear the greatest housing burden -- "For individuals over 65 years of age, 49% of renters and 26% of home owners are spending more than 30% or more of their income on housing."

Background and Processes

The Senior Board is an advisory council to the Board of County Commissioners and meets monthly to review senior services offered by the County and make recommendations to the BOCC. This Board is made up of five local senior citizens and representatives from the Senior Center and local government departments and agencies. In late 2016, in response to long-standing Senior Board recommendations for more support, the Lake County Board of County Commissioners was poised to hire a Senior Director position to better coordinate senior programs and resources. Lake County Public Health Agency approached the BOCC with the idea of working with the LCPHA and Lake County Build a Generation (a project of LCPHA that

specializes in facilitation, research, and planning around public health issues) to first develop a Lake County Senior Master Plan. This plan entailed:

- 1. Engaging stakeholders;
- 2. Conducting an extensive review of existing national, state and local senior-related data;
- 3. Hiring and training a set of "Community Connectors" to conduct over 100 interviews with a diverse set of local seniors and create a Photovoice Project;
- 4. Summarizing qualitative and quantitative data to identify priority issues for Lake County seniors;
- 5. Interviewing state and national-level agencies to determine senior programming "Best Practices";
- 6. Surveying local agencies to determine what senior needs they could assist with and what resources they could use;
- 7. Developing and presenting a final Implementation, Marketing and Evaluation Plan for moving those priorities forward.

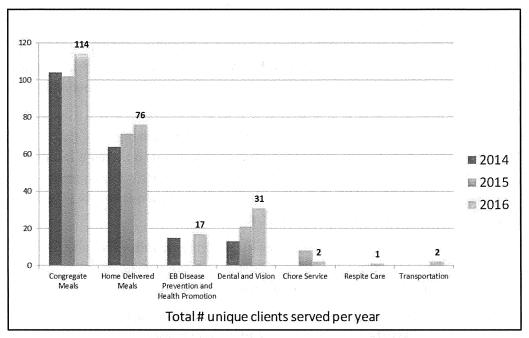
With approval from the Board of County Commissioners, the agencies initiated data collection and the Community Connector process in March 2017. Over the next nine months, LCBAG-LCPHA would implement the remaining plan goals and present final recommendations for approval to the BOCC in November 2017.

Reviewing national, state and local data and engaging stakeholders

Lake County Build a Generation reviewed existing national, state and local level data on senior needs and issues – given that Colorado has one of the fastest growing aging populations in the United States and our 65 and over population is projected to increase by 76% by 2030, many national and state efforts are focused on planning for that population's needs. Several key reports-resources were utilized (see Appendix A for all referenced resources):

- Northwest Colorado Council of Governments Rural Resort Region: Gap Analysis of Services for an Aging Population (2011) (*includes Leadville), http://nwccog.org/wp-content/uploads/2015/03/RRR SeniorsGapAnalysis Jan2011.pdf
- 2. CDC, State of Aging and Health in America (2013), https://www.cdc.gov/aging/pdf/state-aging-health-in-america-2013.pdf
- 3. In 2015, Colorado passed HB 15-1033, which created the **Strategic Action Planning Group on Aging (SAPGA)**, to serve as a model for planning for an aging population in our state. https://www.colorado.gov/pacific/sites/default/files/SAPGA-Nov-2016-Strategic-Plan.pdf
- Colorado Aging Framework: A Guide for Policymakers, Providers, and Others for Aging Well in Colorado (2015),
 - $\frac{https://www.colorado.gov/pacific/sites/default/files/Colorado\%2oAging\%2oFramework\%2oFINAL\%2o-\%2oJuly\%2o2o15.pdf$

5. The Area Agency on Aging -- <u>Upper Arkansas Area Council of Governments</u> (UAACOG) is a nonprofit organization that provides senior services (60 and older) and resources at no cost to a 4-county region: Custer, Chaffee, Fremont and <u>Lake</u>.



Lake County Seniors are increasingly accessing UAACOG services, as well as accessing new ones (e.g., respite care and transportation)

Data obtained from UAACOG

In early March 2017, Lake County Build a Generation and Lake County Public Health Agency held a community Senior Master Plan meeting to review this data and facilitate a discussion around how to make Lake County the healthiest place to grow old. Thirty-five local agency-organizational representatives and community residents participated in brainstorming local senior gaps and opportunities around a variety of identified "buckets" or topics, including housing, employment, home care services and transportation. As part of this initial conversation, participants were invited to continue bringing their skills and interest to the process and ensure a diverse stakeholder group.

Utilizing "Senior Community Connectors"

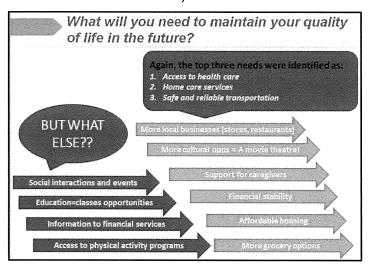
Following the March 2017 meeting, LCBAG-LCPHA developed key research questions and hired eleven *Senior Community Connectors to* conduct over 100 interviews with a diverse set of local seniors, providing a comprehensive view of senior needs in Lake County. Interview questions probed topics of existing community opportunities and resources, barriers to accessing them, and what things would be needed to maintain a quality of life in the future.

Despite living in the highest elevation incorporated city in the United States and the challenges that come with living through long winters in a rural area, many Lake County seniors surveyed in 2017 indicated they maintain a good quality of life (with over 55% of those respondents having lived in the Leadville-Lake County area for more than 30 years). Seniors in Lake County like the safety and comfort of living in a small town. For those seniors that are retired, there are a myriad of opportunities for volunteering and serving on local boards. Many seniors use this time in their life to help neighbors and family with chores and babysitting and participate in church and charitable activities. As several senior respondents noted, "Recreationally – you can do anything you want up here."

The biggest resource for Lake County senior services and activities is the <u>Lake County Senior Center</u>. Services include congregate meals 3 days a week and Meals on Wheels deliveries, bimonthly potlucks, a food bank, and transportation to and from doctor's appointments and some errands two days a week (by appointment). There are several onsite activities and amenities and scheduled trips to the Blackhawk Casinos.

Additionally, Lake County seniors identified those community opportunities and resources that were lacking or locally unavailable. Responses spanned eight "bucket" issues, but three top key issues were repeatedly identified (**underlined**):

- 1. <u>Access to Care</u> (medical providers, medical specialists, mental health and dental care, cost of insurance, assisted living facilities and nursing homes)
- 2. <u>Home Health Care and Services</u> (meal deliveries, companion services, home health care, home and yard maintenance assistance)
- 3. <u>Transportation</u> (safe and reliable transportation to errands, services, appointments and activities)
- 4. **Support for Caregivers** (adult daycare, home respite, employer and financial support)
- 5. **Preventive Care** (healthy food options and nutrition education, access to physical activity programs and recreational opportunities)
- 6. **Affordable and Safe Housing** (affordable rent/mortgage, modifications and repair, "age-friendly neighborhoods)
- 7. **Social and Community Engagement** (accessible and current information of events, a variety of event venues, volunteer opportunities, reliable transportation)
- 8. *Information and Education* (legal, financial, technologies, insurance programs and services information)



Community Connectors presented their findings to the stakeholder group at the end of May 2017. Meeting participants then held a Roundtable Visioning session that addressed What is our Vision for Senior Living in our community?,

Lake County Senior Master Plan

capturing existing and desired resources and determining next steps for how to reach that vision (see Appendix B). In an ideal world, participants imagined that in:

6mo...Better communication, newspaper, newsletter, telephone assurance program 1yr... Transportation with 2 new people carriers 5-6yrs... New Senior Center 8-10yrs... Assisted living and nursing home

In addition to collecting and presenting a wealth of information about local senior needs, Senior Community Connectors completed a *Photovoice Project*, which uses photos and narrative descriptions to highlight a social issue. Their collective exhibit was displayed around the county, including the local library and City Hall.

The final part of this process included hiring a contractor to conduct phone interviews with agencies and organizations across Colorado and the United States to identify senior program Best Practices and funding opportunities. Agency contacts were asked what programs, activities, and possible funding streams existed at their organization for each identified "Bucket" indicator from the community connector interviews. The results are detailed in the "Best Practices" section of this plan.



Community
Connectors
selecting their
"final photo"
for the
Photovoice
Project

Conducting a Capacity Assessment

Interviews were conducted with Lake County agencies and departments to determine capacity for increasing senior health outcomes for a given indicator = "bucket issue." Several key partner activities to support seniors were identified and the new Aging Well Coordinator will work with Lake County Build a Generation to help track activity progress.

Developing an Implementation Plan

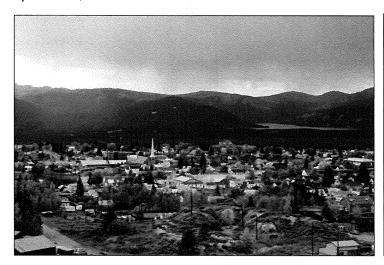
Lake County Build a Generation and Lake County Public Health Agency compiled a list of 5 successful models of senior supports and service structures from across the state, listing mission/overview, staffing structure, and all available services (*Appendix C*). The list included models from Eagle, Chaffee, Summit, Garfield and Dolores counties and was presented to the

Board of County Commissioners in late November 2017. At that time, the BOCC approved the hire of an *Aging Well Coordinator* (AWC) that will be housed under Lake County Public Health Agency. To date, that hire has been completed and the new Aging Well Coordinator will follow the Lake County Public Health Department Aging Well Three-Year Action Plan that is outlined in *Appendix D*.

The activities in the Aging Well Coordinator Action Plan are included in the broader **Senior Master Implementation Plan** (SMIP) presented in this document (the SMIP also includes activities that other agencies have committed to). For each of the eight identified health indicators, 2018-2020 Activities are provided, along with 2020 Target Outcomes. It is important to remember that while activities have been identified for all eight indicators, the majority of efforts will focus on the top three identified priorities (*Access to Care, Home Health Care and Services, Transportation*).

We've heard the phrase most often applied to raising children, but "It takes a village" can and often should be applied as well to caring for people at the opposite end of the age spectrum. In either case, the "village" emphasizes the importance of family and community as key elements necessary for promoting a healthy person.

--Jefferson Center for Mental Health





Next Steps

The implementation of this plan will succeed through continuing strong partnerships, leveraging the assets in our community, and listening to the voices of the population we are trying to support. We sincerely thank all of the stakeholders and community members that committed their time and talent to the development of this plan.

The Aging Well Coordinator and Lake County Public Health Agency Director will continually navigate the senior areas of greatest need and opportunities in which to work over the three-year action plan. This scope of work will be ambitious enough to bring about change and small enough in scope to be effectively accomplished. Goals and activities have been determined for all eight identified health indicators (=focus areas) and much of this work will be accomplished through new part-time positions and partner commitments. Because of the likelihood that adaptations will need to be made to the plan as opportunities and challenges emerge in the implementation process, the plan will be kept as an editable Google Doc that will be updated at least once per year to reflect the current reality.

To understand the impact this work has on increasing Lake County senior supports and services, the LCPHA Aging Well Coordinator will work with Lake County Build a Generation to:

- Regularly survey seniors for feedback on current senior programs
- Regularly collect other data that provides informal feedback about programming (i.e., user numbers, etc.)
- Regularly report feedback and proposed agency response to the Senior Advisory Board
- Summarize updates for activities and outcomes under each strategic priority and update the plan accordingly every 6 months
- Conduct an annual community meeting to discuss progress in implementing the Senior
 Master Plan and solicit input appropriately

Lake County Build a Generation will also seek resources to be able to conduct research for developing a case management program and long-term care facility for Lake County.



Senior Community Connector Photovoice Project, photo by Cornelia Patti

Needs Assessment

ACCESS TO CARE

"Access to health care" means that individuals have the physical, financial and informational channels to obtain health care and related services. This includes having a sufficient number of medical providers and appointment availability within the community, reliable transportation to doctor visits, and relevant knowledge of public insurance programs.

However, large disparities exist in the United States in access to health care services based on a complex array of factors, including race, ethnicity, socioeconomic status, sexual orientation and <u>education</u>. Older adults experience these disparities even more because of chronic illnesses, more frequent visits to medical facilities, and living in <u>poverty</u>. In 2013, 90.5% of all Coloradans ages 65+ had at least one chronic health condition, which "can cause years of pain, disability, and loss of function and independence before resulting in <u>death</u>."

Seniors in the Northwest Council of Governments Rural Resort Region (NWCOG RRR) identified key health care gaps in in their communities related to access to assisted living and nursing home facilities and mental health services. Older adults may experience additional challenges to mental health stability based on decreased mobility, chronic disease, grief following the increased loss of family members and friends, and

Barriers to Healthcare for Lake County Seniors

Physical

"I am very concerned with winter driving road conditions for seniors to safely get to health care providers."

Financial

"Senior incomes did not keep up with inflation, nor do their social security stipends or pensions cover enough of their bills."

Informational

"I believe seniors need help understanding the insurance and Medicaid and health benefits they can receive, with each option presented to them so they can make a wise and rational decision."

caregiving or challenging living <u>situations</u>. If appropriate mental health services are available for referral, health care and other service providers interacting with older adults can help monitor and identify any stress, depression, or problems with "feelings of aging."

If individuals do not have access to caregiving services, and start consistently experiencing what has been termed "unmet needs" -- that is, not being able to shop for or prepare meals, lacking the ability to go outside, and/or not being able to keep track of finances or medications, assisted living or nursing home facilities increasingly become a necessity. But long-term care facilities carry a high price tag, with the median monthly cost to live in an assisted living one bedroom apartment in Colorado reported as \$4,063 in 2016. Additionally, the Genworth Cost of Care Survey estimates the following at home and in-facility costs in 2017 for Colorado elders:

Care Service	Monthly Median Cost
Homemaker Services	\$4,572
Home Health Aide	\$4,576
Adult Day Health Care	\$1,495
Assisted Living Facility Private 1-bedroom	\$3,850
Nursing Home Care Semi-private Room	\$7,663
Nursing Home Care Private Room	\$8,547

Mount Massive Manor in Leadville is a 24-unit affordable "assisted living senior" residence that is often at full rental capacity. The next closest assisted living facilities would be an hour in either direction in Salida (<u>Columbine Manor</u>) or Aspen (<u>Whitcomb Terrace Assisted Living</u>). Lake County currently has no identified long-term or nursing home facilities. As one senior interviewee noted, "We need a nursing home. [People have] lived here their whole life and then are separated from family at the most critical time."

Lake County senior interviewees repeatedly identified *Access to Health Care* as their top priority. The definition of *Access to Health Care* varied across respondents and included the following observations:

- Seniors and the community at-large needs (and we are in the process of getting) a good rural hospital. Especially for seniors, we need the new hospital to have the ability to treat patients right here in town whenever possible. If they must be sent elsewhere, Summit County should be the priority. People won't and often can't travel to Denver for treatment or to visit a hospital in-patient. Also, a limited or short term Elderly Care Unit (ECU) like we had at St. Vincent up until a few years ago.
- [I will need] prevention care, especially access to physical activity programs or rehab opportunities after cardiac surgeries.
- We need specialty doctors to come to Leadville, it is hard to find people to take you out of town for appointments.
- We need an assisted living facility.
- I hope I will not lose social security and medical benefits.
- We need knowledge about how to take care of ourselves.

Gaps	Opportunities
There are no traditional assisted living or nursing home facilities in Lake County.	We could apply for a planning grant to research a long- term care facility in Lake County.
There are no case management services in Lake County for those who don't qualify for adult protection.	We could partner with agencies that provide caseworkers to seniors (such as Catholic charities), hire our own caseworkers, or train Lake County Senior Center staff to

	refer seniors to state hotlines with caseworkers.
Many Lake County seniors find it challenging to pay for needed medical services.	 We could provide counselors to help seniors apply for Medicaid. We could provide information about the financial support available from our Area Agency on Aging for medical expenses. We could provide education programs for seniors and younger community members about developing the financial security to pay for increasing medical costs.
There is a lack of access to medical specialists in Lake County.	 We could continue to provide transportation to medical care both in and out of county, using paid staff, volunteers, or both. We could continue to pursue funding to support van purchases and transportation costs. We could work with local health care providers to bring high-demand specialists and services (such as cataract surgery and colonoscopies) to town on a rotating basis.

Case Management

Case Management Agencies "help seniors who need assistance managing activities of daily living access the services and resources they need."

Services can include:

- A visit to the home to assess needs and develop a care plan.
- Arranging for a senior to receive services such as home-delivered meals and/or home care.
- Referral to community-based services.
- Evaluation of benefit/ entitlement needs.
- Advocacy with landlords, utility companies, and benefit programs.
- Counseling on long-term issues.
- Regular contact to ensure that the services being received continue to meet a senior's needs.

What do Home Care Services look like for Lake County Seniors?

- Delivery of necessities such as groceries, meals, and medications
- House maintenance windows, insulation, weatherization, construction
- Yard and <u>snow removal</u> maintenance
- Continued financial support for caregivers
- Companionship
- Licensed, insured and affordable service folks for plumbing, heating, roofing, etc.

HOME HEALTH CARE AND SERVICES

Home health care allows a person that is chronically ill, disabled, injured, or aging with special needs to remain in their home. Home health care needs range from certified professional services (such as physical therapy or RN visits), to helping older adults with the activities of daily living (bathing, dressing, eating), to assistance with activities like yard maintenance and cleaning.

"It is important to understand the difference between home health care and home care services. Although home health care may include some home care services, it is medical in nature. Home care services include chores and housecleaning, whereas home health care usually involves helping someone to recover from an illness or injury. Home health care professionals are often licensed practical nurses, therapists, or home health aides. Most of them work for home health agencies, hospitals, or public health departments licensed by the state."

When Lake County interviewees were asked what "being retired looks like in Leadville," eight individuals identified that they provide caregiving and home care services, including for family members, a disabled Vietnam Vet, and for a nonagenarian couple in their home (only one individual identified they were a registered RN). In terms of home health care and services for their own needs, Lake County

seniors consistently ranked the availability of home care services as their second highest concern among the issues suggested. However, they also often identified them as "a future need," with one respondent indicating "Maybe when [I am] in my 90's I'll be more interested in home care...presently have no idea what's available." Another respondent identified their needs as more salient, stating, "[My husband and I] have good health now but...husband broke hip a while ago and it was a wake-up call regarding what services we might need in the future. Home care—both in-home healthcare and home maintenance/assistance-snow removal and repairs (no one seems to call back). [We] may need hospice care at some point and when I inquired at another out-of-county agency I was told that Leadville doesn't have the basic required services/infrastructure/support to be able to have hospice."

Services that extend aging capacity in the home are vital for Lake County seniors, since more long-term care services such as adult day care centers, assisted living and nursing homes, and hospice services do not exist in or are offered through Lake County agencies (hospice services or "end-of-life care services," for example, can be obtained from Premier Home Care in Buena

Vista). One promising resource to help seniors manage their care remotely is the use of *Telehealth*.

Also referred to as "e-health," <u>Telehealth</u> is "simply using digital information and communication technologies, such as computers and mobile devices, to manage your health and well-being" through a number of health care services (online support groups, remote monitoring of vital signs and symptoms video doctor visits, and electronic health records). Most promising is the ability to do a doctor's visit online instead of in person, allowing an individual to identify a problem through a series of questions with a health care provider. These e-visits are "especially helpful for people in rural areas or those don't have easy access to transportation." Telehealth services started being offered at <u>St. Vincent Leadville Medical Clinic</u> in 2016 and office staff report that it has been utilized infrequently. Clients utilizing Telehealth services are set up through specialized neurology, pulmonary, dermatology or cardiology provider referrals.

Gaps	Opportunities
Lake County needs more home care service providers either volunteer or paid for companionship, lightweight housekeeping /cooking, yard work, and home maintenance and repair. We especially need providers who have been "vetted" and proven to be reliable and trustworthy.	 We could encourage private businesses to specifically serve older adults' needs as a business opportunity. We could offer trainings to businesses owners and staff around serving older adults. We could cultivate a volunteer programs for home care services, perhaps even those in which seniors can "bank" volunteer hours by providing services to other seniors and then "redeem" those hours as they age or experience periods of illness or injury.
Even where services exist in Lake County, many seniors are not aware of either the availability of these services or the availability of resources to pay for such services.	 We could develop and maintain a list of "trusted" home care service providers for seniors. We could better market the AAA voucher system to reimburse seniors for home care services. We could work with nearby counties to bring in a PACE program (Program for All-Inclusive Care for the Elderly) to provide comprehensive medical and social services to individuals 55 years or older who would otherwise need long-term care.
Lake County needs to find the resources to continue to provide even more free or low-cost home care services.	We could partner with food banks, schools, colleges or hospitals to cook Meals on Wheels and congregate meals with other institutional meals, in order to be able to provide the highest-quality meals at the lowest cost.

TRANSPORTATION

Transportation options and accessibility not only pose a core challenge for rural communities in general, but more so for senior residents who may have health issues, reduced driving ability (vision and hearing), and limited local options for specialized health care. Additionally, seniors often require transportation flexibility and convenience for doctors' appointments and errands to retail establishments that are only open normal business hours.

While older adults living in rural Colorado communities are more likely to drive themselves

than those living in <u>urban areas</u>, Lake County seniors experience additional barriers to driving due to high altitude and long winters. Lake County senior interviewees repeatedly referenced weather, poor road conditions, lack of accessibility to venues because of insufficient snow removal, and night travel as major barriers to accessing community events, medical services, and shopping.

There is no public bus service within Lake County and the 2015 Lake County Comprehensive Plan indicated that "people who cannot afford an automobile, the elderly, and children have no transit options to get around inside of Lake County and Leadville today." Commuter buses to the Vail, Copper and Frisco areas exist, but departures and returns are early in the morning and no later than 6:30 in the evening, respectively (and thus prevent available bussing back to Leadville for late afternoon appointments).

On mobility and transportation...

"Improve sidewalks for access and safety walking at night, walkability of neighborhoods..."

"Lack of transportation - mobility especially in Leadville winter.

Maintaining roads. Poor snow removal especially in Leadville - I don't go to Leadville in the winter because of that. [We]_should have a public van that can take seniors around, we don't want to drive in the dark."

--Lake County Senior Interviewees

Many smaller communities struggle with local specialized transportation services (vans, buses, cars). They require reliable drivers (paid or volunteer), vehicles equipped to load wheelchairs, and the gas, insurance and repair costs of maintaining transportation vehicles or <u>fleets</u>. The Senior Center in Lake County provides some transportation to seniors for local errands and to medical appointments, two days a week and by appointment.



Sidewalk in Leadville Neighborhood, photo by Community Connector, Bud Elliot

Senior mobility also requires city infrastructure that allows movement outside of a vehicle that is safe, clear, and accessible. Community survey results in the 2015 Lake County Comprehensive Plan revealed that 63% of respondents rated regional trails and pathways connecting neighborhoods/ communities as needing improvement. This speaks to the need for "continuous and adequate sidewalks along major pedestrian corridors connecting urban neighborhoods to destinations in the city and for ways for people living in the Leadville periphery to travel into the city and back safely on a bike or on foot."

Given that "walking is the third most common form of transportation for Colorado's older adults and people with disabilities," features such as well-marked intersections, adequate time to cross streets, and benches for rest are recommended to create safe pedestrian travel.

Gaps	Opportunities
Lake County needs safer, more reliable vehicles for senior transportation.	We could better utilize CDOT funding to upgrade the fleet of vehicles used to provide senior transportation.
Lake County needs a bigger volunteer pool to assist with driving seniors to appointments or shopping/social trips.	We could continue to formalize a volunteer network of drivers (and the systems for coordinating them) to provide seniors with transportation to medical care.
Lake County needs more nonprofit or for-profit transportation opportunities for seniors.	 We could continue to develop the Senior Center program that provides free transportation to medical care, shopping, and social trips. We could research opportunities to fund this transportation program through both grants and mileage reimbursements.

	 We could cultivate the development of a donation-based community shuttle service to provide in-town transportation to all. We could encourage private transportation businesses to serve seniors' transportation needs and market specifically to seniors. This could include everything from transporting seniors (including seniors with disabilities) to providing services such as home delivery.
Lake County needs improved sidewalks, pathways, and trail systems that have good wheelchair entrances/exits and traffic light timing that ensure accessibility for disabled seniors.	 We could work to improve the walkability of key existing community areas, paying special attention to sidewalks, wheelchair entrances and exits, snow removal, and the timing of lights to better allow older adults to move easily around our community. Where there is new development, we could promote community designs that make cars less necessary and incorporate design principals from New Urbanism and Smart Growth.
Lake County needs consistent snow removal of sidewalks.	 We could work with the City and County to ensure snow removal on high-use sidewalks. We could develop a volunteer pool to help seniors remove snow on the sidewalks in front of their houses.
Lake County needs to support older adults in driving safely for as long as possible.	We could partner with educational institutions or the insurance industry to offer driver safety training for older adults.



Lake County Senior Center Vans, photo by Community Connector, Bob Vigil

SUPPORT FOR CAREGIVERS

Lake County seniors repeatedly identified "support for caregivers" as a concern while aging, but did not identify what that looked like except in terms of money or general support.

A "caregiver" is an individual who is paid or unpaid to care for children, elders and the disabled. Eldercare providers can include grandchildren, older adults, other family members and even

neighbors or friends. The <u>Bureau of Labor Statistics -- American</u> <u>Time Survey</u> reported in 2014-15 that:

- 16.2% of survey respondents served as eldercare providers;
- 34% of eldercare providers who provided care on an average day were employed;
- Elder caregivers spent over half of their time providing services for leisure and sports (34.0%) and household activities (20.7%).

Because family caregivers provide daily assistance across a variety of non-medical personal care, household, and companionship needs, it is easy for individuals to feel stressed, isolated, and financially strapped. Seniors from the Northwest Colorado Rural Resort Region reported that "stress" and "not having enough time for self, family, or social activities" as their biggest needs related to caregiving. Caregivers from this survey area also commonly reported guilt -- believing they "could or should be providing more or better care for the care recipient."

The 2016 Families Caring for an Aging America Report provided "substantial evidence that family caregivers of older adults are more likely to exhibit symptoms of depression and to suffer from anxiety, stress, emotional problems and chronic disease." As well, the report concluded that "the need to recognize and support caregivers is among the least appreciated challenges facing the aging U.S. population." Those caregiver services and support of greatest interest identified by <a href="https://www.nwcoord.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.night.n

WHAT DOES A CAREGIVER DO?

Personal Care — Assistance with bathing, dressing, grooming, eating, toileting, ambulation, transfers, positioning, exercise and medication reminders and assist.

Household Tasks -- Meal preparation, light housekeeping, laundry, shopping, pet care, errands as needed. If pre-arranged your caregiver can provide transportation, companionship and assistance to meetings, appointments, or other outings.

Companionship — Provide a listening ear, cheerful conversation, and a caring heart while working around the house, escorting and driving on trips to the doctor, hairdresser, house of worship, the home of a friend, or recreational outings.

Respite — Fill in for a regular caregiver when they are unable to work due to illness, vacation, or simply need to take a break for some much needed time away.

http://careforce.com/what-does-a-caregiver-do/

Caregiver support can range from respite care (providing adult daycare relief so that a caregiver can have time and space to attend to their own physical and emotional needs), to training that can teach emotional management, increased confidence in coping with caregiving demands, and use of community resources. However, these supports often require money, time, and awareness, which many families don't have.

For consideration...

The <u>U.S. Census Bureau</u> estimated the Hispanic or Latino population in Lake County to be 37% in 2016. Caregiver roles are difficult for any family, but "Latino cultural values add layers of nuance and <u>complexity</u>." For example, 43% of Latino primary caregivers were more likely to live with the loved one they cared for, as compared to 32% of non-Latino respondents, and 84% of Latino caregivers believe that their caregiver role is an expectation of their upbringing.

Focus groups conducted in the <u>2014 Colorado Latino</u>
<u>Age Wave Caregiving Study</u> identified several unique barriers for Latino caregivers:

- Language barriers
- Lack of internet access and/or computer skills to access information online
- Service providers do not provide culturally relevant marketing and outreach strategies (e.g., most Latinos don't respond to the term "caregiver", even when professionals in the aging field define the duties they are performing as "caregiving"
- Immigration status and the threat of discovery or attention to family members that may be undocumented when seeking caregiver help

In identifying a desire for a centralized location for services and program information, focus group participants referenced the community-based promotora model to help learn about and access relevant services. A promotora model has been successfully used in Lake County initiatives to gather community feedback, as well as disseminate information and shape policy, and could prove to be a viable model for outreach and education for Lake County Latino caregivers.

Unpaid Family Caregivers

A June 2017 AARP report noted that "unpaid family caregivers provide the bulk of care for older Coloradans, in part because the cost of long-term care remains unaffordable for most middle income families. In Colorado, more than 600,000 residents help their aging parents, spouses and other loved ones stay at home by providing assistance with bathing and dressing, transportation, finances, complex medical tasks ... and more. The value of this unpaid care totals about \$8 billion."

-- AARP Colorado, "Picking Up the Pace of Change"

Lake County Senior Master Plan

Gaps	Opportunities
Lake County caregivers need more information on available resources and services, and access to support groups.	We could provide caregiver education, such as a caregiver resource fair, caregiver lunch-and-learns, or the evidence-based "Powerful Tools for Caregivers" class.
Lake County caregivers need respite support.	 We could better market caregiver respite services provided through the Area Agency on Aging so caregivers are aware of them. We could better utilize the Program for All-Inclusive Care of the Elderly or the Aging and Disability Resources for Colorado Program to provide support services that would help caregivers.
Lake County caregivers need support from their employers.	We could promote workplace policies that create "caregiver-friendly" workplaces that help employees balance the obligations of their paid work and volunteer caregiving responsibilities.
Lake County caregivers need financial support for lost income.	We could advocate at the state level for policies that would provide stipends for caregivers, including family caregivers, to help offset earnings loss.
Lake County caregivers from our Latino community may experience additional barriers in receiving help.	We could work to provide culturally relevant marketing and outreach strategies. For example, many Latinos may not see themselves as "caregivers," so different language may need to be used to help different cultural groups understand what support they may be eligible for.
Lake County caregivers need access to support groups.	We could research the need for, and potentially start, a caregiver support group in town.

SOCIAL AND COMMUNITY ENGAGEMENT

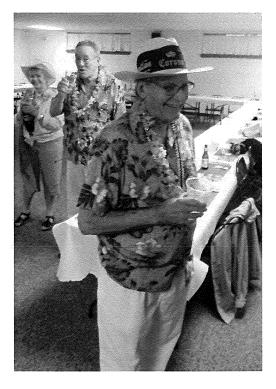
The <u>World Health Organization's model</u> for an age-friendly community includes eight components, including two that relate to "social participation" and "respect and social inclusion." Social participation can be across cultural, spiritual, recreational and civic activities, and confers a number of physical and mental health benefits: staying active, establishing supportive relationships, and maintaining self-esteem.

When Lake County seniors were asked to describe what "being retired in Lake County looked like," key social activities and engagement such as volunteering or serving on local boards, helping neighbors and family, being involved with church, and participating in local lodges and clubs were notably identified. Additionally, friends, family and neighbors can be a strong support and social system for senior needs and 83% of senior interviewees felt *Very to Somewhat Connected* to other senior members in their community, and 75% to the larger Lake County-Leadville community.

However, a variety of barriers exist to prevent senior participation in social events and activities. Logistically, these barriers can include distance and/or reliable forms of

transportation, affordability, and safety (traveling at night or navigating broken sidewalks). As populations become more rural, the variety and space available for social opportunities tends to decrease. Seniors experiencing chronic health issues or are disabled may be discouraged by both the resources and accessibility needed to participate in social events. Additionally, communities often do not adequately promote or provide information about upcoming social activities, events, and engagement opportunities through communication channels that seniors readily access.

When Lake County seniors were asked "In your opinion, what prevents seniors from taking advantage of social opportunities and resources here?", twelve indicators across a variety of financial, technical and social themes were identified (**Figure 1**).



Lion's Club Social Gathering, Leadville photo by Community Connector, Bud Elliot

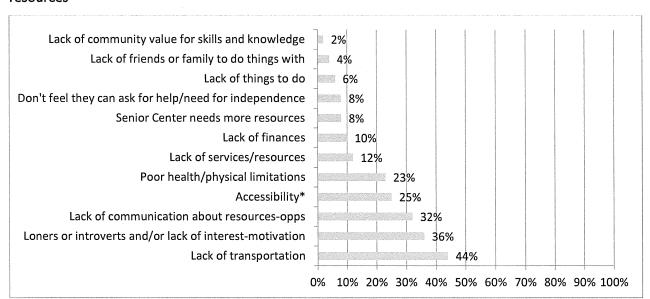


Figure 1. Barriers to Lake County seniors taking advantage of social opportunities and local resources

Accessibility* includes bad weather=poor road conditions/lack of accessibility to venues because of snow/poor sidewalks

While social isolation becomes more common as people age and friends and family move away or die, many people are simply introverts. As one Lake County senior interviewee indicated, "Socially...I'm a loner. I don't require a lot of people around me." As such, it is recommended that many seniors' decisions to not participate in social events, join clubs or recreate in a group should be equally <u>respected</u>.

Gaps	Opportunities
While many new senior activities have been launched in the last few years, Lake County still lacks a diversity of senior activities.	 We could better engage the private, government and nonprofit sectors in providing social and community opportunities to seniors. We could support older adult employment by promoting workplace policies/practices that accommodate the needs of older adults (such as providing part-time work or ensuring that job descriptions don't require heavy lifting) and provide application/interview support and training through the Workforce Center. We could develop more senior volunteer activities, including the opportunity to "bank" time by serving seniors' needs.
Lake County lacks an activities coordinator for seniors.	We could hire an activities coordinator.
Lake County lacks centralized,	We could better utilize multiple media sources (print and

senior-appropriate information dissemination for events and activities.	online) to provide seniors with information, recognizing that seniors of different ages have different relationships to technology.
Lake County seniors would benefit from an updated venue for senior activities such as bingo, movies, and dances.	 We could ensure the current infrastructure at the Lake County Senior Center creates a culture that is modern, hospitable, and welcoming to all. Long-term, we could look at constructing a new facility to serve Lake County seniors.

HOUSING

The Rural Resort Region, a collaborative group of organizations in western Colorado (including the City of Leadville), commissioned a study of seniors in their areas in 2010 as part of the *Seniors in our Mountain Communities* initiative. Seniors in this study ranked their communities high for safety and opportunities for recreation, fitness, and civic participation. However, both the variety and availability of affordable, quality housing were one of the five lowest ranked "livability" options in their given area.

The 2015 Colorado Aging Framework Report indicated that "for individuals over 65 years of age, 49% of renters and 26% of home owners are spending more than 30% or more of their income on housing." And according to the 2017 County Health Rankings & Roadmaps, 18% of Lake County households experience at least 1 of 4 severe housing problems: overcrowding, high housing cost, and lack of kitchen or plumbing. The average median Lake County owner cost with a mortgage was estimated to be \$1350, and rent estimated at \$850 for 2011-2015, which can be prohibitive for seniors on a fixed income.

The Lake County Assessor's office reported that 609 seniors 65 and older owned their homes for 10 years or more in 2017 and were eligible for tax exemptions, thus implying some senior housing stability, particularly if those mortgages have been paid off. But a 2015 Housing Feasibility Study also concluded that Lake County residents experience additional housing burdens unique to the area: a high share of renters compared to owners, with 40% of all housing units in Lake County rented; poor housing quality stock, with the median age of housing at 53 years old (18 years older than then the median Colorado home); and insufficient new construction for the demand, with the majority of new construction for custom or second-owner homes.

Lake County senior interviewees indicated that safe and affordable housing was a concern for maintaining a quality of life, but rarely identified what that entailed. One respondent indicated "I will need affordable housing if I can't climb the stairs in my current house. And I will need to move due to no bathroom on main floor." Another senior identified affordable and safe housing as one of their top two priorities because "...there is a lack of housing in this community. [I have heard that...] seniors' pay is \$1000 dollars. Rent is \$1200 - not very affordable." According to the AARP State Housing Profile for 2011, housing costs become more burdensome for older adults and "those who rent or own with mortgages are at greater risk of affordability challenges than those who own their homes debt-free."

Efforts both across the state and locally are being initiated to create safe, affordable housing for senior living. Goal #2 in the Colorado Aging Framework Plan is stated as "Encourage the development of an array of affordable housing options to address the needs of individuals as they age." Possible strategies for this include developing methods to incentivize best practices in the creation of a diverse array of housing options for older adults; improving the efficiency and effectiveness of housing information, resources and organizations; and adjusting zoning ordinances to facilitate the creation of more housing options for older adults (e.g., allowing home owners to add suites to their houses for older adults, allow unrelated older adults to live together, etc.). Locally, the 2015 Lake County Comprehensive Plan proposed Strategy C: Work with regional, state and federal housing entities and developers to prepare for an aging population with a housing supply serving age cohorts

Age-friendly Housing Checklist, WHO Global Agefriendly Cities: A Guide

- Affordability
- Essential services (gas, electricity, water)
- Design (appropriate materials, sufficient space and wheelchair access)
- Modifications
 (equipment and financial
 assistance readily
 available)
- Maintenance (services and reliable, affordable providers available)
- Aging in place (close to services and facilities)
- Community Integration (design supports continued integration of older people into community)
- Housing options (range of appropriate services and amenities)
- Living environment (not overcrowded, feel safe)

ranging from recent retirees to the elderly. To achieve this will require a series of land planning and development, infrastructure improvements, and code updates.

Gaps	Opportunities
Not all eligible Lake County seniors are aware of the Senior Homestead Exemption.	We could use multiple marketing techniques to provide information about the Senior Homestead exemption.
Many Lake County need home modifications or renovations to allow them to stay in their homes.	 We could develop volunteer brigades similar to Habitat for Humanity who can help seniors with home maintenance or renovation projects. We could adopt universal design standards (which ensure that buildings are age-friendly when initially built) in local building codes or otherwise incentivize builders to use these.
There is a lack of affordable housing for seniors in Lake County.	 We could promote and support innovative housing options such as co-housing, Accessory Dwelling Units, village concepts, and Naturally Occurring Retirement Communities. We could ensure that the Housing Assessment addresses the needs of seniors. We could consider zoning regulations that encourage affordable housing options.
Not all neighborhoods in Lake County are "age friendly."	We could adopt policies at the city and/or county level that encourage modifications to the community to better meet the AARP's "Liveable communities" goals or <u>AARP</u> <u>Age Friendly program</u> and help older adults stay in their homes.

PREVENTIVE CARE

Preventive Care for adults aged 50 and older has become a key public health strategy in response to the quickly growing senior population in the United States. The 65 and over population in Colorado alone is projected to increase by 76.7% from 2015-2030.

While <u>preventive care services</u> are in part or completely covered by most insurance plans, including Medicare and Medicaid, "only 42% of all Coloradans ages 65+ are up to date on core <u>preventive services</u>." Clinical preventive services, which can prevent or detect chronic disease early for proper treatment, include services ranging from shingles immunizations to colorectal cancer screening. The Leadville Medical clinic offers preventive services which include bone density scans for osteoporosis, and a questionnaire conducted under annual Medicare wellness exams assessing a variety of senior issues: feeling safe in one's home, incidences of falling, and security in managing money.

In 2011, the Colorado Department of Public Health and Environment, along with other health system partners, developed priority strategies for <u>Colorado's 10 Winnable Battles</u>. Two of these identified, injury prevention and oral health, have specific relevance to older adults. "For adults ages 65 and older, falls are the leading cause of nonfatal injuries, hospital admissions for trauma, and <u>injury related deaths</u>." Additionally, falls can lead to limitations in mobility, which in turn can lead to depression, decreased social interaction, chronic disease, and other injury. The ensuing strategy focuses on increasing the use of evidence-based fall prevention programs and increasing provider referrals to these programs.

Oral health is an essential part of overall health and quality of life, and most oral disease is preventable through daily and routine self-care, access to fluoridated water, and access to dental care. However, "an estimated 42% of working-age Coloradans and approximately 67% of adults over 65 years of age do not have dental benefits." According to a 2015 Whitepaper on oral health as an essential part of primary care, "Among older adults (65 years and above), 25% have lost all their teeth – putting them at risk for compromised nutrition and other complications." Dental benefits under the two most commonly utilized health plans used by seniors, Medicare and Medicaid, are critical for continued senior oral health.

The issue of "Preventive Care" was presented to Lake County interviewees in the form of those lifestyle choices that maintain and extend good health, most notably "healthy eating and physical activity". The 2017 America's Health Rankings Senior Report purports that, "as a nation, obesity, nutrition and access to healthy food remains a challenge for seniors." As a state, Colorado was one of five leading states for senior health over 34 health determinants, and which included measures of physical inactivity and food insecurity. As a county, 55% of Lake County senior interviewees identified "taking advantage of recreational opportunities/Rec department classes" as an essential opportunity to maintain a quality of life. Lake County seniors also repeatedly referenced having access to senior meals and deliveries as critical to maintaining food security.

Active Living

According to the 2013 CDC Report, <u>The State of Aging and Health in America</u>, "regular physical activity is one of the most important things older adults can do for their health. Physical

activity can prevent many of the health problems that may come with age. According to the 2008 Physical Activity Guidelines for Americans, older adults need to do two types of physical activity each week to improve health—aerobic and muscle-strengthening."

"Prevention care - because healthy eating and exercise are keys to our longevity." --Lake County Senior Interviewee

While Lake County offers a wide array of scenic beauty and recreational opportunities, seniors often can't take full advantage due to health issues, lack of connected and updated trails and pathways, and lack of reliable transportation to get to outdoor recreation opportunities. Just the simple fact of living over 10,000 feet ensures long winters and as one senior stated, "Cold weather, [I am] not able to drive, not wanting to socialize, [I suffer from] poor health (e.g., being on oxygen)." As an alternative to skipping physical activity because of a long, cold season, however, another senior offered the idea of "an indoor running track, more days when the track and gym at Lake County Intermediate School is open. Yoga classes ... and more recreation classes in general."

Healthy Eating

The biggest challenge for Lake County seniors in accessing consistent, healthy, nutritional

food is a challenge for the county as a whole. There is only one food retail store in Leadville and as one senior noted, "[It] has a captive market. No competition. I hear this often from my peers and others. They visit grocery stores in Avon, Summit and Chaffee." (And travel outside of the county again leads to a repeatedly identified senior challenge: safe and affordable transportation.) Additionally, while seniors have clearly expressed a need and appreciation for church and Senior Center congregate meals, several interviewees expressed a desire for those meals to be healthier and health-need sensitive (low fat, cholesterol, sugar, etc.).

In 2017, Senior Center staff reported providing approximately 500-700 congregate and homedelivered meals a month for Lake County seniors.

Gaps	Opportunities
Some seniors would benefit from building new cooking skills as their abilities and family sizes change.	We could offer cooking classes on topics such as "Cooking for One," "Meal Planning and Shopping," "Microwave Cooking," or "Easy, Nutritious Meals."
Lake County has limited retail options for affordable, fresh, healthy food.	 We can provide transportation for shopping trips to allow seniors to make food purchases in other communities. We can partner with local farms to provide seniors with more opportunities to purchase locally-grown produce.
Many seniors need the meals offered at through the Senior Center or Meals on Wheels to address specific dietary concerns, such as hypertension or diabetes.	We could work to ensure that seniors are supported in their attempts to prevent or manage chronic disease through diet.
Many seniors are	The Lake County Recreation Dept. offers both classes and

challenged to exercise or eat well because they are unable to travel to exercise classes/facilities or healthy food retail outlets.	facilities to help seniors increase/maintain their physical activity and agility, but we may need to consider offering transportation to help seniors attend these classes/make use of these facilities. • We could continue to improve our infrastructure in order to create environments that encourage older adults to use walking as a means of transportation.
Many seniors may lack information about how tobacco cessation, healthy eating and active living can improve the quantity and quality of their life.	 According to the 2008 Physical Activity Guidelines for Americans, older adults need to do two types of physical activity each week to improve health—aerobic and musclestrengthening. Older adults at risk of falling should do exercises that maintain or improve their balance at least 3 days a week from a program shown to reduce falls. We may need to better advertise this information to older adults. We could provide lunch and learn opportunities on health prevention topics at the Senior Center. We may need to better provide information to older adults about the importance of eating a diet high in fruits and vegetables, which has been linked to reduced rates of chronic disease.
Improving seniors' rates of preventative screenings	We could promote tobacco cessation
and vaccines could improve	o flu, pneumonia, and shingles vaccines
the quantity and quality of	preventative screenings, including mammograms and
their life.	colorectal cancer screenings

Although the risk of developing chronic diseases increases as a person ages, the root causes...often begin early in life... People who do not use tobacco, who get regular physical activity, and who eat a healthy diet significantly decrease their risk of developing heart disease, cancer, diabetes, and other chronic conditions.

--CDC State of Aging and Health in America, 2013

INFORMATION AND EDUCATION

"Access to information is one of my top concerns while aging...

For example, I learned about dehydration from the Senior Newsletter."

--Lake County Senior Interviewee

Older community residents often face the problem of "insufficient up-to-date information on important matters, such as health, legal rights, benefit entitlements, services and community events." Seniors in the Northwest Council of Governments Rural Resort Region, for example, ranked low the availability of information about resources and services for older adults in their given area. Specifically, seniors identified a lack of information for health care services, how to provide the best support for caregivers, and public insurance programs and options as key gaps in their communities. Additionally, *key actors* (providers, government staff and elected officials) in this <u>study</u> identified that..."information counseling related to public health plans and other services related to information and referral should be given the greatest priority in these counties/cities."

In interviews, Lake County seniors identified a variety of "information and education" gaps in response to the question "What is needed to maintain a quality of life in Lake County?" (see below):

Workshops on how to use the internet/your computer, smartphone or email.

Education on healthcare and tax exemptions for seniors, since so many are unfamiliar with understanding many aspects.

I would like a guest speaker during lunch once a month to help seniors have their questions answered about their Medicaid and health care programs, as well as drug and health plans.

CMC... more recreation and educational opportunities, bring back the senior discount especially for non-credit courses {a 20% senior discount is available for credited courses at CMC, 2017}.

Lost TV of Commissioners and City Council meetings - need back! Public needs to be informed through media... [we need] a communication system to keep community upto-date of what is happening. Limited access and old news is not keeping our community informed properly.

Education for seniors including topics like Medicare, Social Security, healthy aging/radical aging'.

Seniors don't know about [resources and opportunities]... availability of resources should be at Senior Center, or [through] Meals on Wheels people. [It should be] delivered on a sheet of paper with all information on one form, e.g. library, yoga, other activities in county.

It is important to recognize there are two distinct issues here: what kind of information is needed (ranging from local events to healthcare services), and how is it best communicated to the senior community?

That is, how do we reach older people in their daily lives and activities?

What kind of information is needed

Lake County seniors want information to be coordinated in one easy-to access service that is widely known throughout the community, across a range of services and activities. In interviews, they cited a need for information on topics such as the following:

- Local services from medical to UAACOG to meals on wheels
- Health care costs, exemptions, Medicare and Medicaid programs, drug plans
- Prevention care options (how to prepare healthier food, low-impact exercise programs)
- Recreational opportunities
- Events, social and club activities
- Local government and city activities
- Technology use (phone, computer, internet)
- Legal services related to health, car and house insurance

How is information communicated to the senior community

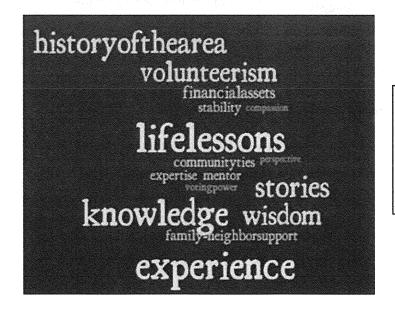
Up-to-date Information needs to be disseminated to the senior population in a manner that is relevant and appropriate. And it might be worth noting that "not all seniors are the same." For example, a 65 year old probably uses email, while a 90 year old probably does not. Information is rapidly evolving in today's world and communication technologies such as computers, IPads, cell phones and the internet can serve as useful tools, but can also be expensive to purchase and technologically hard to navigate.

While not truly centralized, more appropriate means of information distribution to seniors have been suggested throughout the <u>literature</u>:

- Direct personal delivery
- Telephone
- Word of mouth
- Community centers
- Bulletin boards
- Public services
- Libraries
- Stores
- Doctor's offices, health clinics, case management

"[There is a] lack of an overarching way to communicate resources and activities, and awareness of events, activities, and services are limited to particular groups." --Lake County Senior Interviewee

Gaps	Opportunities
We lack a dedicated staff person who can gather and disseminate up-to-date information about social events, activities, health, resources, etc. — and the infrastructure to do that.	 Develop and mail monthly print newsletters. Provide Public Service Announcements on radio or public access cable. Write editorials or letters to the newspaper. Develop websites and Facebook pages that cater to younger senior citizens. Attend existing local gatherings of seniors to listen and provide information. Develop lunch-and-learns. Provide brochures and information at meal sites. Provide information on (and possibly the opportunity to purchase or buy) assistive technology that supports older adults in staying in their homes.
We lack "experts" or case managers that seniors can tap for advice, including legal and financial experts, experts on resources, etc.	 Market hotlines and services that older adults can use to identify services OR develop a local information and assistance hotline. We could partner with agencies who provide caseworkers to seniors (such as Catholic Charities), hire our own caseworkers, or train Lake County Senior Center staff to refer seniors to state hotlines with caseworkers. Bring in "experts" for lunch-and-learns or other events.
Not all local agencies may have someone who identifies themselves as a senior advocate on staff.	We could work with local agencies to ensure that most or all have someone who identifies as a "senior advocate" on staff—and that person has the necessary training to support seniors' needs.



Lake County Senior Interviewees were asked in 2017 What do seniors bring to a

community?

Best Practices

ACCESS TO CARE

Seniors face three big obstacles to seeing a doctor for preventive care or treatment: finding a provider, getting to appointments, and paying for care.

In 2011, the Northwest Council of Governments (NWCOG) completed a study of senior needs in the region and included the City of Leadville in the study. A key theme in their research was the reported lack of medical facilities, specialists, mental health providers, dental providers, and home health care providers in the region.

Throughout Colorado, many communities also cite transportation as a key obstacle to health care. "A lack of transportation can be hazardous to a person's health," stated the Colorado Health Institute in its 2015 publication, Driving to the Doctor: Transportation as a Barrier to Health. The report encapsulates the struggle. Some seniors live far from the nearest doctor or health clinic and some pass up care because they don't have rides.

Seniors in isolated towns, sometimes called frontier communities, may spend hours on Area Agency for Aging (AAA)-provided buses or in vans to get to medical appointments. In northeastern Colorado, Area Agency on Aging Director Bob Held said seniors travel to Denver or Greeley to see specialists. Six clients at a time are transported round trip. The bus leaves at 6 a.m. and returns at 6 pm.

Rural Health Care Providers

The Denver Post reported in April 2017 that the Colorado Health Services Corps began accepting applications for \$5 million that "could be available to repay loans for as many as 60 physicians and other providers."

The Colorado Department of Public Health and Environment designates Health Professional Shortage areas. The grant is primarily funded by the Colorado Health Foundation.

"They may get to their appointment four to six hours early and just have to wait," Held said. Others wait hours after appointments.

Nita Purkat, Dolores County's senior services director, said the nearest medical specialists are 80 miles away, in Durango. It's not unusual for some to travel to Cortez, or cross state lines to Farmington, N.M., or Moab, Utah.

In Greeley, the public transit system will supply a person to ride along with a senior and train him/her to use the bus system. But the system serves only Greeley and Evans. People elsewhere in the county rely on vouchers for drivers, or friends and relatives.

Many AAAs said the need often outpaces the resources. Seniors can opt for taxis or Uber, but both are expensive. Nonprofits such as Amblicab can cover some of the gap, but not all of it, leaving some seniors stranded.

In Region 13, which includes Custer, Chaffee, Lake and Fremont Counties, transportation costs can be covered through the AAA, which has allocated set amounts. "If a person needs transportation, he/she finds the driver and UAAAA pays," explains Denise Micciche, deputy director of the Upper Arkansas AAA. "If someone wants to go to a medical appointment to Denver, we allot \$150. Typically, we give them the money ahead of time."

Then there is the challenge of paying for increased medical services as one ages. Weld County has contracts with <u>Colorado Legal Services</u> and Catholic Charities to remedy insurance coverage issues.

"Another program we fund under (the Older Americans Act) is we contract with Colorado Legal Services in Greeley. We pay them to provide services to our clients, aged 60 and above." said Gonzales, Weld's Aging and Disability Resources Center director. "If they're denied Medicaid, Legal Services will set up income trusts, advise them on income and assets, and how to qualify. CLS is community partner."

Catholic Charities, another of Weld's partners, provides case managers who help with money management. The caseworkers will also help seniors fill out forms and applications for services.

In Region 13, the AAA can also help reimburse for specific dental and vision costs.

Key Best Practices

- Identify the local "Single Entry Point" for seniors to apply for Medicaid and receive counseling on how to use Medicaid to fill gaps in their Medicare coverage. Ensure this office is experienced in advising seniors in these matters. (<u>Colorado Aging Framework</u>, p 16)
- Develop a relationship with Colorado Legal Services to help seniors who should qualify for Medicaid but are struggling to prove eligibility.
- Provide resources (advisors, forums, etc.) to seniors and younger community members about how to develop and maintain the financial security in retirement that will enable them to pay for increasing medical costs.

- Develop a relationship with Catholic Charities or a similar organization who can provide caseworkers to Lake County seniors to help seniors better identify health care resources for which they might qualify.
- Provide transportation to medical care both in and out of county, using paid staff, volunteers, or both. Identify where funding exists to reimburse for transportation costs (AAA, Medicaid, Medicare, etc.).
- Work with local health care providers to bring high-demand specialists to town on a regular basis.
- Ensure Lake County seniors are aware that they can receive help with dental and vision expenses.

Funding Sources

- <u>Caring for Colorado</u> -- Created in 1999 by the state legislature and formed through the sale of Blue Cross Blue Shield. "The proceeds from the sale were dedicated to benefit the health of the people of Colorado."
- Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services -- Awarded to "support the dissemination and implementation of a specified health services research project concerning the delivery of healthcare in ... rural areas, including frontier areas." The AHRQ also offers a small research grant program under which "rural and frontier areas are considered a priority population."
- <u>Colorado Rural Health Center</u> -- Offer <u>small grants</u> to "help pay for the training and/or education of a local healthcare provider," along with <u>seed grants</u> to pay for program start-up costs.

HOME HEALTH CARE AND SERVICES

Home care services include everything from housecleaning and yard work to meal deliveries. The solutions for helping seniors are as varied as the communities. Tom Gonzales, the Aging and Disability Resources for Colorado director in Weld County, said most <u>Area Agencies on Aging</u> use a voucher system.

"Each program, say in home services, gets a set amount of money. We have a waiting list for people to sign up. They must be aged 60 and above, and be Weld County residents. When they call and request assistance, a caseworker will go out to their homes to determine the need for that client. She'll approve, say \$500, for this year. She leaves a list of home care agencies that provide the services a person needs."

Gonzales said it is then the client's responsibility to line up services, such as help with bathing, transferring from a bed to a wheelchair, or performing light housework.

Weld County distributes, through ADRC and area medical clinics, a directory of service providers. The client pays the provider, then turns a voucher into Weld County.

"We reimburse them," Gonzales said. "It puts a lot of ownership on the senior to manage their own care. That's just one. We have a dental, vision and hearing program, a chore program, and caregiver support. They're all run the same way." When the \$500 is spent, the client and the county repeat the process.

The Region 13 system is slightly different. "Most of our programs are run on vouchers," said Denise Micciche, deputy director of the Upper Arkansas AAA, which includes Lake, Custer, Fremont and Chaffee counties. "We do a similar thing, allotting \$300 to help with a chore, or durable medical equipment to make (a person's) house safer."

Because the Upper Arkansas is rural, a menu of contractors is difficult to amass. Instead, clients find people with whom to contract. "For in-home care, the provider bills us and we pay after the service is complete."

Most Area Agencies on Aging provide vouchers to pay for house cleaning and personal help, such as bathing and dressing. "The fastest growing population segment is age 85 and up," said Eva Veitch, community living services director in Colorado's Area Agency on Aging's Region 10. "They're going to need multiple supports. They're going to need homemaking, transportation, nutrition and personal care."

Veitch and her colleagues oversee six counties: Delta, Gunnison, Hinsdale, Montrose, Ouray and San Miguel. The city of Montrose is the hub and with a population of 20,000, is also the area's largest city. "And, because that segment is growing so fast, their adult children are over 65 themselves and can't give the caregiver support."

Many of the people on the front lines say meals are mostly covered, but there are still gaps.

In-home Services

"We're getting creative," is a statement made by nearly every person managing programs for aging adults.

In-home care — that is, taking medical care to people aging in their houses, condos or apartments — poses challenges. Among them: getting health care workers to remote areas, and paying workers or paying mileage for skilled volunteers.

In Maine, community-based nurses pick up some of the slack. They're not state-employed public health nurses. Instead, they are often volunteers, or are paid by their churches, cities or special districts.

The <u>nurses</u> visit seniors in their homes. The 97-year-old <u>Camden Area District</u> <u>Nursing Association</u> nurses visit elderly people who don't have insurance. Private and municipal donations fund the district.

The community based nurses also hold clinics in churches and libraries to check blood pressure, discuss medications, and provide diabetes foot care.

And, <u>medical</u> and <u>housing</u> professionals are exploring ways -- including the use of <u>technology</u> to provide remote assisted living -- to keep elderly residents out of nursing homes.

In Weld County, 22 sites provide noon meals at designated sites for seniors. Some sites serve lunch -- also known as congregate meals -- once a week, said Eva Jewell, director of Weld County's Area Agency on Aging. Others serve three. "We can't do five days a week, nor could the sites handle that".

Weld contracts with the University of Northern Colorado to buy and prepare food, then Weld transports it to the sites, such as senior centers. The county also has a Meals on Wheels contract, but funds are limited and the program doesn't reach everyone. "We rely on volunteers," Jewell said. "No volunteers? No home-delivered meals."

Veitch said the meals program in her region is struggling because of funding. "It's rapidly becoming cost prohibitive" to provide meals. Under consideration: talks with schools and jails about meal preparation contracts. If Region 10 opts for contracting, volunteers may package and deliver the meals. At this point, though, nothing is certain.

In remote regions -- including Veitch's and Region 1 in northeastern Colorado -- the AAA delivers frozen meals to clients.

"We're trying to do creative things," said Bob Held, the AAA director for Logan, Morgan, Phillips, Sedgwick, Washington and Yuma counties. When <u>Meals on Wheels</u> can't deliver daily, volunteers take a batch of frozen meals clients can thaw and reheat.

It's not ideal, said Veitch, but providing frozen meals is better than allowing seniors to go hungry.

"Our mantra is we're stronger together," she said. "We get people at every level involved. Not only seniors, but churches, nonprofits, and the private sector. You have to get everyone together. We're getting more creative by the day."

Key Best Practices

- Work to develop a list of "trusted" home care service providers for seniors, including:
 - o Home and yard maintenance
 - o Heavy housework
 - o Home health care
 - o Companion services
- Market the UAACOG's voucher system to pay for home care services.
- Promote senior home safety assessments. The National Center for Supportive Housing and Home Modification <u>Website</u> provides a number of assessment tools. (<u>NWCOG</u> <u>Rural Resort Region Senior Gaps Analysis</u>, p 56)
- Encourage private businesses to specifically serve seniors' needs as a business opportunity. (NWCOG Rural Resort Region Senior Gaps Analysis, p 52)

- Consider offering trainings for businesses and workers to build their ability to better serve seniors' needs.
- Develop a "caseworker" model in which caseworkers could help seniors identify their needs and match them with appropriate services.
- Cultivate a strong a volunteer program for home care services, including Meals on Wheels.
- Examine opportunities to provide the highest-quality meals for the lowest cost, including partnering with other "anchor" agencies such as schools or hospitals.
- Examine opportunities to partner with nonprofit and religious agencies who are also providing community meals and commodities.
- Consider working with other counties in our region to attract or develop a PACE provider (<u>Program of All-Inclusive Care for the Elderly</u>). This program, operated by <u>Health First Colorado</u> (Colorado's Medicaid Program) and Medicare, provides comprehensive medical and social services to certain frail individuals 55 years of age and older. The goal of PACE is to help individuals live and stay in their homes and communities through comprehensive care coordination.

Funding Sources

- The federal <u>Older Americans Act</u> and the state <u>Older Coloradans Act</u> provide the bulk of funding for senior services, including housing, home care and transportation.
- Essentially, the federal and state lawmakers budget a certain amount of money annually. The federal money is distributed to states according to a formula. In Colorado, the state budgets money using the U.S. government's formula. The state allocates money to <u>Area Agencies on Aging</u>.

TRANSPORTATION

Transportation is a lynchpin for seniors, especially with regard to housing, access to <u>medical</u> <u>care</u>, community engagement, and services.

Seniors who do not own and/or are not able to operate a vehicle face obstacles to everyday activities -- grocery shopping, social interaction, medical appointments -- and isolation from the community.

The Colorado Health Institute's 2016 study, "Expanding Transportation Options for Older Adults," notes that 25% of Coloradans over age 55 – or one in four – "say it is at least somewhat problematic to find safe and affordable transportation options." The rate jumps to 42% for people over age 85.

Colorado Area Agencies on Aging and communities are devising innovative ways to address the issue. Almost all say they cobble together nonemergency medical transportation funds

from Health First Colorado, the state's Medicaid program; volunteer drivers; public transit; and ridesharing to get people where they need to go.

In Dolores County, where 20% of the population is composed of seniors, the public transit system and the Area Agency on Aging provide more than 600 rides per month, traveling over 7,000 miles.

Dolores County cultivated the 11-year-old program, growing it from one van that transported people to the senior center to a county-wide public transit system in 2011. The Dolores system includes buses, vans and paratransit. Transportation is now 40% of what Dolores County Senior Services does.

But in most other places, a shortage of transportation leads to an array of solutions.

"Small communities like Ouray and Lake City really band together and take care of one another. Community members and other seniors provide transportation and reassurance calls."

> -- Eva Veitch, Community Living Services Director, AAA-Region 10

Northeast Colorado's Area Agency on Aging uses

senior volunteers as drivers. Volunteers use personal vehicles to take other seniors to shopping centers, grocery stores and appointments. The AAA pays the volunteers' mileage.

Weld County has a similar system, paying volunteer drivers for mileage and gasoline. Most of the drivers are seniors driving to help out and pick up a little extra income.

The <u>Upper Arkansas Area Council of Governments</u> provides up to \$150 per visit for transportation. Provided by the Area Agency on Aging, the services cost nothing for individuals aged 60 or older who meet the guidelines. Drivers must supply a copy of their driver's license, insurance and a W-9.

In five Front Range and eastern plains communities, there's <u>Via</u>, a low-cost paratransit. The ondemand program provides door-to-door service for everything from Medical appointments to social events to volunteer sites, for as little as \$2 each way.

In the Pikes Peak region, <u>Silver Key Senior Services</u>, a nonprofit founded in 1971, is the main transportation provider. Silver Key's fleet includes cars, minivans and buses. But, says Innovations in Aging's Claire Anderson, "There's a large demand and Silver Key can't fill the whole gap."

In at least two areas -- Northeast Colorado's Area Agency on Aging and Chaffee County -- Uber stepped away from its metropolitan model to offer an alternative for seniors and tourists. In Greeley, two local couples established <u>Smart Rides</u>, a taxi and courier service, in part to fill the same need.

In Henderson, North Carolina, leaders created a pilot program called <u>Walk Wise, Drive Smart</u>. Officials assessed walking conditions in 10 neighborhoods through environmental audits and

community meetings. The data suggested a need for walking programs for people of all ages, as well as improved pedestrian facilities to remove walking hazards for older adults. To publicize the program, officials did the following:

- Developed pedestrian safety plans.
- Established neighborhood walking routes.
- Upgraded pedestrian facilities on walking routes in selected neighborhoods.
- Developed walking maps and materials on how to walk and drive safely.
- Installed outdoor benches at strategic locations.

Henderson city officials credit the program with building public will to develop pedestrian improvements to make the city a friendlier place for seniors to walk.

Key Best Practices

- Provide transportation for medical care, shopping, and social trips using a combination of paid staff and volunteers.
- Market existing transportation options to seniors so they are aware of their options.
- Encourage private business to serve seniors' transportation needs and market specifically to seniors. This may include transporting seniors or providing services such as home delivery.
- Consider offering trainings for businesses and workers who wish to serve seniors to build their ability to better serve seniors' needs.
- Improve the walkability of key community areas, paying special attention to sidewalks, wheelchair entrances and exits, snow removal, and the timing of lights to better allow older adults to move easily around their community.
- Partner with non-profits and the insurance industry to expand and promote driver safety training for older adults.
- Wherever there is new development, consider community designs that make cars far less necessary and incorporate design concepts from New Urbanism and Smart
 Growth. (NWCOG Rural Resort Region Senior Gaps Analysis, p 58)

Funding Sources

- The Federal Transportation Administration, a part of the U.S. Department of Transportation, provides money to buy <u>accessible vans and buses</u>.
- FTA Section 5310, Enhanced Mobility for Seniors and Individuals with Disabilities is a competitive grant program to buy vans or minibuses to transport seniors or the disabled. Nonprofit agencies and public entities are eligible. To apply, contact regional planning agency and CDOT. Grants up to \$30,000 for purchase (80 percent federal money, 20 percent state). Operating funds are not included.

Senior centers may also apply to AAA for <u>Section 5311 Formula Grants for Rural Areas</u>. The grants which provide federal money under the Older Americans Act and can be used to buy and operate vehicles.

SUPPORT FOR CAREGIVERS

In the United States overall, <u>family</u> members "provide 80-90% of the medical and personal care required by our frail elderly," according to Michigan's Caregiver Resource Network, and most are unpaid.

In July 2017, Hawaii enacted the Kupuna Caregivers Act, the first of its kind in the United States. <u>Kupuna</u> is the Hawaiian word for elder, grandparent or older person.

The <u>new law</u> "provides qualified caregivers with a voucher of up to \$70 per day that can be used toward services that they would otherwise perform themselves, including adult day care and assisted transportation." The AARP estimates Hawaii has about 154,000 unpaid caregivers.

The <u>Hawaiian law</u> states that the average caregiver is "a 62-year-old married woman who cares for an elderly parent or husband while still working," and that providing the care "may result in chronic stress." The situation is not specific to Hawaii.

In Colorado, Area Agencies on Aging use a combination of the <u>Aging and Disability Resource Center</u> and the <u>Program for All-inclusive Care for the Elderly</u>, known as ADRC and PACE, respectively, to meet the needs of caregivers.

<u>PACE</u> is a program offered nationwide through the Centers for Medicare and Medicaid (or CMS) and delivered by regional nonprofits or public agencies. CMS defines PACE as a comprehensive system of medical and social services delivered to frail elderly in order to help keep them in their homes. These services are typically delivered through an adult day health center that is supplemented by in-home services or other services provided by referral, according to participants' needs

There are 14 Aging and Disability Resources Centers (ADRC) across Colorado.

The ARDC for Boulder County, for example, "[has] an extensive network of community partners giving us the ability to answer questions and make referrals that are appropriate for you or your loved one to live with dignity and enjoy the best quality of life possible."

Information and assistance accessing community resources are available for:

- Medicaid
- Medicare
- Nutrition programs
- Family caregiver programs
- Respite
- Home care
- Legal assistance
- Mental health support
- Transportation
- And many more

CMS determines, on the basis of population and demographics, where to offer the service. CMS contracts with a not-for-profit or public entity to provide medical and social services. PACE is available in Lake County through the Lake County Department of Human Services.

One aspect of the PACE program is caregiver support.

"PACE has day programming," explained Joan Perkins, enrollment development specialist at InnovAge in Loveland. <u>InnovAge</u> is the PACE provider in Larimer and Weld counties. In addition to the cities of Fort Collins, Loveland and Greeley, InnovAge serves smaller areas, such as Eaton.

InnovAge's day program provides a safe place for people whose caregivers need a break or still work outside the home. InnovAge offers everything from showers to meals to activities to day program clients. The team will also contract with an assisted living or skilled nursing facility so caregivers can go on vacation. InnovAge's goal is to provide an all-inclusive model to keep the

Area Agencies on Aging

The AAAs operate in 16
Colorado regions and
administer the Older
Coloradans Cash Fund, which
provides money for <u>caregiver</u>
training and classes,
transportation, meals and
other services that help frail
people remain in their homes
longer.

-- AARP Colorado, "Support for Caregivers"

area's senior population out of a high cost setting. There is no out-of-pocket expense for the caregiver or the client for services.

In the Upper Arkansas, AAA Deputy Director Denise Micciche said respite care is one of Region 13's busiest programs. Clients choose who they want -- whether it is someone to sit with them while their regular caregivers take a break or run errands -- and AAA pays the respite caregivers.

Region 13 receives <u>Older Americans Act</u> (OAA) funds for respite care, and the four counties also get state monies. "OAA wouldn't get us through a year," explained Micciche. "The senior population is close to 25 percent in <u>Chaffee County</u>. The respite program increases every year. It includes homemaker services (cleaning, yard work), and home health agencies."

In the southwestern corner of the state, Nita Purkat has pioneered a range of services for the seniors aging in place in Dolores County.

For the eighth year in a row, Purkat will partner with colleagues in the nearest big city --Cortez, population 8,500 -- to host an annual caregiver forum. After senior services directors in the area identified the physical, mental-emotional and cost of taking care of an aging person, they learned that Garfield County hosted an event to aid caregivers.

"We saw how they did it and crafted our own," Purkat said. "Hospice, area nursing homes and hospitals sponsor the event. It's an all-day support, education and provider fair. The speakers talk about the needs of caregivers. All the expertise is local."

Purkat and her team don't stop there. They follow up periodically -- with phone calls and personal visits -- to ensure the caregivers have access to resources.

Dolores County also hosts quarterly caregiver lunch-and-learns, paid for with federal money from Older Americans Act. Speakers include financial planners, Medicaid billers, and lawyers.

And on the day-to-day front, Purkat says, "We bring in people who can help with bathing, managing medication, transferring them (from beds to wheelchairs and vice versa) – all the things it takes physically to provide care."

Dolores County also offers a six-week class, "Powerful Tools for Caregivers," to train, support and educate caregivers on how to care for themselves, talk to doctors and "deal with family." The class meets for 2.5 hours each week. Because it is <u>evidence based</u>, the county can use OAA money and provide it free for caregivers.

Dolores County also uses Area Agency on Aging funding to deliver meals to caregivers. That means when Meals on Wheels stops by with lunch, the caregiver and the person he/she is caring for both receive meals.

Key Best Practices

- Consider working with other counties in our region to attract or develop a PACE provider (<u>Program of All-Inclusive Care for the Elderly</u>). This program, operated by Health First Colorado (Colorado's Medicaid Program) and Medicare, provides comprehensive medical and social services to certain frail individuals 55 years of age and older. The goal of PACE is to help individuals live and stay in their homes and communities through comprehensive care coordination.
- Identify and market ADRC resources to our community.
- Collaborate with employers to create "caregiver-friendly" workplaces that help employees balance the obligations of their paid work and volunteer caregiving responsibilities. This can be done through employment policies that support caregiving (i.e., allowing flextime schedules, promoting teleworking, encouraging less stringent rules for use of sick or vacation time) as well as by providing benefits such as caregiver support groups.
- Market caregiver respite services provided through the UAACOG AAA to our community to ensure that Lake County residents take better advantage of them.
- Hold a caregiver resource fair, and/or caregiver lunch-and-learns, perhaps in conjunction with another county.

- Provide an evidence-based "Powerful Tools for Caregivers" class.
- Provide meals for caregivers through Meals on Wheels.
- Work at the state level to advocate for caregiver stipends for families caring for loved ones, similar to what was passed in Hawaii.
- Identify opportunities to provide "adult day care" in Lake County. (<u>NWCOG Rural</u> Resort Region Senior Gaps Analysis)
- Develop a volunteer base of homemakers and companions who are willing to help support seniors.
- Work with the private sector to develop new caregiving and/or home services businesses.
- Train caregivers about abuse, neglect, and exploitation.

Funding Sources

- The <u>Administration for Community Living</u>, part of the U.S. Department of Health and Human Services, offers a range of grants, including <u>one</u> aimed at expanding and enhancing respite care; improving statewide coordination; and providing, supplementing or improving access and quality of services.
- Social Security does not pay for caregivers, but people over age 65 who have limited incomes may qualify for <u>Supplemental Security Income</u>.
- The <u>Home Care Allowance</u> "is a financial assistance program for elderly, low income and/or disabled" Coloradans. Intended to help participants avoid nursing homes, the program pays for unskilled home care services.
- The <u>Colorado Respite Care Program</u> awards community grants to government entities, and for-profit and nonprofit agencies already providing respite care.

SOCIAL AND COMMUNITY ENGAGEMENT

The staff members who serve senior populations throughout Colorado credit the small armies of volunteers and donors with their programs' success in getting – and keeping – seniors active and informed.

"We get people at every level involved," said Eva Veitch, the Area Agency on Aging's Region 10

Our <u>ADRC</u> (Aging and Disability Resources for Colorado) is 40 members strong. We meet every month. We get together to get collective education, talk about what works, what doesn't, and do a lot of brainstorming.

--Eva Veith, AAA Region 10

community living services director in Montrose. "Not only seniors, but churches, nonprofits and the private sector. You have to get everyone together." Often, Veitch and her colleagues are the voice for seniors.

Further south, Dolores County's senior services director Nita Purkat is aware that sometimes, people show up at the senior center because they're lonely. "Hospitality is Number One. Someone greets them when they come in. We make them welcome when

they come in the door. That has to be the culture to get people to come."

Marlene Miller, of northeastern Colorado's AAA, echoes the sentiment, noting that in rural communities' cultures, the network also includes doctors, hospitals, social services and law enforcement who come together to fill needs large and small. She may get a call from law enforcement asking for help with a frail elderly person. She works with officers, and health care and social workers to supply care, solutions and personal contact.

Miller recounted when the AAA in Yuma County was cut from a staff of six to four. She knew the AAA would have to be easier to find, more inviting and "more visible."

"I went to the city," Miller said. "The city manager offered a location where old lab had been, and said I could have it if I remodeled it. The Yuma Foundation paid for the construction. A woman in town hooked me up with someone who agreed to pay for paint. And I was going to scavenge for furniture. This benefactor (who paid for paint) found out and bought all the furniture. We went to Denver twice, had everything delivered. My husband put it together. The Lions Club, the local churches, everyone -- it's an amazing setup. My agency has put no money into this."

Besides local efforts, national organizations such as <u>Grantmakers in Action</u> has a list of ways to involve seniors in a variety of levels in the community. Some examples include:

- Open Culture -- More than a thousand free online courses from universities around the world. Some of the courses: Italian Renaissance; digital photography; global poverty; car design; the Holocaust in film and literature; Arabic for beginners; literary history of the Beats; and geopolitics.
- <u>Create the Good</u> -- Tips, information and ways to connect with volunteer opportunities are included in this AARP program.
- <u>Senior Planet</u> -- A tech themed site based in New York state, it includes information about political activists known as <u>Raging Grannies</u>; <u>The Freebird Club</u>, an Airbnbs for seniors; and features on <u>health myths</u>, <u>meditation</u> and more.

The 2010 Rural Resort Region Senior Gaps Analysis also suggests that communities should consider seniors, especially younger seniors, as resources. "Traditionally," states the report, "older adults have been viewed as service recipients, populations that absorb care and community resources like dry towels that soak up water. Older adults who are healthier and with resources that permit them more time now are challenging this idea by proving that communities can leverage the power of older folks by engaging them in community service and caregiving." The report notes that by activating younger seniors to assist older seniors, a "symbiotic relationship" can be created that serves the needs of both populations.

Key Best Practices

- Engage the private, government and nonprofit sectors in providing social and community opportunities to seniors.
- Ensure the culture at senior centers is welcoming and hospitable to all.
- Ensure local service providers have relationships with seniors.
- Support transportation programs that promote social engagement.
- Support older adult employment in the community by collaborating with businesses and job placement agencies such as the Colorado Workforce Center (<u>NWCOG Rural</u> <u>Resort Region Senior Gaps Analysis</u>):
- Encourage employers to offer part-time and flexible jobs.
- Alter policies regarding retirement benefits to allow employees to phase out rather than quit completely.
- Offer retraining for jobs "after retirement."
- Review employee policies to ensure they don't reflect any unintended ageism.
- Support development of workforce readiness skills for older adults (such as how to find work, how to write a resume, and how to interview).
- Promote senior volunteerism (NWCOG Rural Resort Region Senior Gaps Analysis):
- Encourage nonprofits and other agencies to recruit senior volunteers (<u>The Corporation for National and Community Service lists tips</u> for recruiting senior volunteers).
- Support infrastructure that encourages senior volunteerism (including volunteer coordinators, volunteer websites, etc.).
- Develop programs such as "time-banking" in which seniors can provide volunteer services while they are able in return for such services when they are needed.

Funding Sources

- The <u>Administration for Community Living</u> has an array of grants available. Among them:
 - o <u>National Center for Elder Abuse</u> -- awarded to nonprofits that do not have a 501(c)(3) status with the IRS, city, town, state or county governments.
 - o <u>Engagement and Older Adults Resource Center</u> -- grants to provide tools and resources for organizations to assist older adults to remain "socially engaged and active."

HOUSING

Aging in place requires an array of factors, most importantly housing.

Some of Colorado's cities and towns are turning to collaborations to provide retirement communities. Others, such as <u>Northeastern Colorado</u>, are working to keep people out of

nursing homes, or to move them out of nursing homes and back into the community. In many cases, lack of adequate, accessible housing has slowed the process.

In Colorado Springs, for instance, Innovations in Aging's Claire Anderson notes that affordable, accessible housing is hard to find. Developers, she explained, "continue to build single-family homes. There's a huge shortage of one- and two-bedroom apartments that are affordable." The area of Colorado Springs' Innovation in Aging is 8,000 units short.

<u>Colorado Springs</u> recently opened a 70-unit low-income housing complex, but only two or three are handicapped accessible. The city's housing association and AARP are working on modifications. As part of its <u>Age Friendly</u> designation, the city also passed infill regulations, requiring revitalization ahead of new construction.

In Chaffee County, <u>Sage Generation</u> is using a Colorado Health Foundation grant to fund a 12-month process to produce an implementation plan for affordable senior housing and assisted living.

In Otero County, a group of churches banded together in 1989 to purchase land and build a retirement community, <u>Casa Del Sol</u>. The independent living facility includes duplexes, apartments, a meeting room and dining space. Casa Del Sol also offers some transportation to appointments. Other services available for residents include housekeeping, home health care and Meals on Wheels.

In Greeley and Weld County, where long-term care is an option, <u>Aging and Disability Resource</u> for Colorado Director Tom Gonzales said his agency utilizes home care, chore services and skilled nursing to keep seniors out of nursing homes.

Home care may include medication management, showering or bathing, help with dressing, light housekeeping, and meal preparation.

Northeast Colorado's Held said currently, the federal government, under the Older Americans Act, "provides us an average of \$77 per week per person" for the AAA. That's about \$4000 a year to be allocated for vouchers or direct payment for home care services.

On the eastern plains, Northeastern Colorado AAA Ombudsman Marlene Miller and Director Bob Held say senior centers in the planning phases are adding affordable housing to their proposals.

"Right now," Held says, "my organization spends \$20,000 a year on vouchers to pay in-home care people to help seniors in their homes. We have no senior housing and no assisted living. We don't have enough housing. Seniors don't have the money or family support. We (dispense) vouchers to pay for neighbors to check on them. There are rent and energy supplements to keep them in their homes."

Held compared that to nursing home care yearly costs of around \$52,000 per person. If AAA received even half of that, he said, he and his team could keep more people in their homes.

In Atlanta, Georgia, the <u>Atlanta Regional Commission and Area Agency on Aging</u> partnered on an initiative to transform neighborhoods, cities, and counties into places that people could live in, regardless of age. The <u>Lifelong Communities Initiative</u> focuses on three goals proven to be essential components of age-friendly communities: promote housing and transportation options, encourage healthy lifestyles, and expand access to services.

Key Best Practices

- Incentivize developers to build senior-friendly housing/add it to their proposals.
- Consider adopting policies recommended by the <u>AARP Age Friendly program.</u>
- Seek funding for a community feasibility study/planning process to consider developing long-term care and/or assisted living.
- Better utilize PACE and ADRC resources to help seniors stay in their homes longer.
- Promote universal design standards in building codes, educate the public on the benefits of universal design, and create incentives for contractors and developers to use universal design. (2016 Strategic Plan on Aging, p 14)
- Encourage innovative options such as co-housing, Accessory Dwelling Units, village concepts, and Naturally Occurring Retirement Communities. (2016 Strategic Plan on Aging, p14)
- Consider zoning regulations that encourage affordable housing options. (<u>NWCOG Rural</u> <u>Resort Region Senior Gaps Analysis</u>, p 55)

Funding Sources

- Community Development Block Grants -- Awarded through the Colorado Department
 of Local Affairs (DOLA), the grants can be used to acquire, design, engineer, build or
 rehabilitate. They may also be used to "address community development needs that
 have a particular urgency."
- Energy/Mineral Impact Assistance Fund -- Aimed at promoting sustainable community development, and increasing "livability and resilience of communities." The program's purpose is to assist areas affected by "the development, processing, or energy conversion of minerals and mineral fuels." The money comes from the state's "severance tax on energy and mineral production and from a portion of the state's share of royalties paid to the federal government for mining and drilling" on federallyowned land.

PREVENTIVE CARE

Mt. Carmel Health and Wellness takes an integrated approach to senior health in Trinidad and Las Animas County. In the last 10 years, Mt. Carmel went from a crumbling old church to an updated, full-service center offering programs for physical and mental health.

Mt. Carmel Church, once a cornerstone for the area's Italian immigrant coal miners and their families, was closed in the 1990s. The church and adjoining rectory were in disrepair when Colorado Springs businessman Jay Cimino bought them in 2007 with the idea of turning the site into a clinic and community center.

COO Felix Lopez said the center offers primary care and mental health services in one place. For instance, Mt. Carmel offers tai chi for seniors to improve strength and balance and prevent falls. Its array of other wellness programs includes weight loss and healthy eating. The Colorado Health Foundation recently awarded a wellness grant to Mt. Carmel and the area hospital, Mt. San Rafael.

Tai chi and better balance classes are also offered in the Upper Arkansas. Classes are available in Leadville, and at the Salida and Canon City hospitals.

"There's very little funding," said Denise Micciche, deputy director of the Upper Arkansas' Area Agency on Aging. The Older Americans Act's Part D -- for <u>disease prevention and health promotion</u> -- allots \$6,000 annually for the classes in Region 13. "We help offset costs for instructors and space, and we also use it to help offset a class for disease prevention."

In southern Colorado, Lopez said some programs are only for seniors, while others are open to all ages. Naturopath and mental health practitioners do outreach in the community. And the center offers lunch-and-learn workshops about a variety of health issues.

"We continue to enhance primary care and services for the elderly – two top priorities," said Lopez. "The seniors here are very active."

In Atlanta, Georgia, a community initiative works to support older adults' efforts to eat healthy food, maintain a healthy lifestyle and participate in preventative screenings. Ultimately, the goal is to keep seniors mobile longer. Mobility in older adults is linked to improved health, as well as improved health-related quality of life.

Key Best Practices

(All recommendations below from the report <u>CDC</u>, <u>The State of Aging and Health in America</u>, page numbers provided)

Provide opportunities for older adults to be physically active. "Regular physical activity is one of the most important things older adults can do for their health." Physical activity can prevent many of the health problems that may come with age. According to the 2008 Physical Activity Guidelines for Americans, older adults need to do two types of physical activity each week to improve health—aerobic and musclestrengthening. Strong evidence shows that regular physical activity is safe and reduces the risk of falls among older adults. Older adults at risk of falling should do exercises that maintain or improve their balance. For best results, they should do these exercises at least 3 days a week from a program shown to reduce falls. (p 19)

- Support older adults in their efforts to eat a diet high in fruits and vegetables, which has been linked to reduced rates of chronic disease. (p 20)
- Promote the importance of walkable environments that encourage older adults to use walking as a means of transportation. (p 20)
- Promote tobacco cessation. According to the CDC's 2013 State of Aging and Health in America report, "Tobacco use remains the single largest preventable cause of disease, disability, and death in the United States (p 20)
- Promote flu, pneumonia, and shingles vaccines (p 23)
- Promote use of preventative screenings, including mammograms and colorectal cancer screenings. (p 24)
- Provide lunch and learn opportunities on health prevention topics.

Funding Sources

- Older Americans Act -- Title III Parts B and D covers supportive services and preventive health. Parts B and D received \$367.6 million, about 20 percent of the overall OAA budget, in the federal 2014 budget.
- According to the <u>AARP Policy Institute</u>, "OAA federal funding was \$1.88 billion (in 2014). Funding has been relatively flat over the past decade, failing to keep up with inflation and demand from a rapidly expanding older population." More than 43 percent of the budget, \$814.7 million, goes toward meals and nutrition. States leverage the federal money with their own funds and private money.
- Colorado Health Foundation -- The foundation offers grants to "help activate existing infrastructure in public places that contributes to a community's overall health." The grand money supports "costs associated with project/program planning and/or implementation for up to one year." Also available: money for "technical assistance for community engagement, communications and marketing."
- The Administration for Community Living -- Established in 2012, the ACL awards more than \$1 billion in grants to "state and local governments, nonprofit organizations, institutions of higher education and small businesses. Some are awarded in accordance with formulas established in legislation, while others are awarded in a competitive process."

INFORMATION AND EDUCATION

Senior services providers use all available resources to push information: hotlines, newsletters, public affairs announcements, phone calls and more.

The state and county agencies that offer services -- from transportation to healthcare to Meals on Wheels -- are all interconnected, and complicated, said Rachel Kobelt, an options counselor with Denver Regional Council of Governments, or <u>DRCOG</u>.

"One of the main ways we get information to the community is an information and assistance line," Kobelt said. "You can actually call the state aging and disability <u>hotline</u>, put your zip code in and get connected with someone in your community." Seniors across the state can call the state aging and disability hotline, 1-844-265-2372.

At DRCOG, Kobelt said, "The main portal is through the information and assistance line. We get calls about anything and everything. Either folks with disability, or people 60 or older, asking for general services, or whether an in-house or contracting agencies could provide service."

Kobelt said the information and assistance staff tries to answer live calls, but if someone leaves a voicemail message, a staff member returns the call as soon as possible. To ensure people don't run out of patience and energy trying to resolve an issue, Kobelt said she and her colleagues conference in other agencies and entities while they have a person on the phone.

In the Upper Arkansas, which includes Chaffee and Lake counties, Denise Micciche utilizes senior centers and congregate meal sites to push information out to seniors.

"At all of our meal sites, there are brochures, publications, anything that pertains to them in the community," said Micciche, deputy director of the Upper Arkansas AAA. They also contact with each senior center's board to discuss needs and alert seniors.

While Micciche says UA keeps its Facebook and website up to date, "In our rural areas, a lot of stuff is word of mouth in social settings."

Nita Purkat, Dolores County's senior services director, searches for information to help keep seniors active. "We survey clients (by mail) every six months," said Purkat. "It gives [us] quite a bit of input."

Dolores County doesn't stop with surveys. "Any gathering place where seniors gather, even if it is once a month, it's useful to attend," Purkat said. "This is not limited to elderly. We talk to inhome service people, organizations, VFW auxiliary, the VFW and churches. We talk with agency partners, doctors, and even the dialysis clinic."

Nita Purkat also answers a lot of local phone calls. For Medicare, people in Dolores County are referred to trained <u>SHIP</u> – or Senior Health Insurance Program – counselors. In Dolores County, as a form of outreach, Purkat's team checks eligible recipients' registration annually. Dolores County also prints and mails a monthly newsletter to the 300 seniors it serves.

"Most people are between 75-95yo and they're not, for the most part, on the computer," she said. "Most everything we do is in print: information on scams; doctors to talk to about flu shots; lawyers to talk about living wills and powers of attorney. We send information in the newsletter."

Purkat uses public service announcements on local television station, DCTV, and writes a monthly article for the local newspaper. She's not ignoring electronic communications.

Dolores County recently received a grant to fund a website "for folks who are turning 65 now, who will plug into the Internet."

Key Best Practices

- Market hotlines and services that older adults can use to identify services.
- Develop and mail monthly print newsletters.
- Provide Public Service Announcements on radio or public access cable.
- Develop a local information and assistance hotline.
- Write editorials or letters to the newspaper.
- Develop websites and Facebook pages that cater to younger senior citizens.
- Attend local gatherings of seniors to listen and provide information.
- Develop lunch-and-learns.
- Provide brochures and information at meal sites.
- Collect and share national and local best practices on information, technology, and other supports that enable older adults to remain in their own homes and communities as long as possible. (Colorado Aging Framework, p 27)
- Consider ADRCs as the one-stop-shop for older adults to gain access to information (also in Spanish) and the resources/benefits available to them. (<u>Colorado Aging</u> <u>Framework</u>, p 27)
- Provide information on (and possibly the opportunity to purchase or buy) assistive technology that supports older adults in staying in their homes. (<u>Colorado Aging</u> <u>Framework</u>, p 27)

Additional grants for seniors from the Community Resource Center include:

Anschutz Family Foundation

AV Hunter Trust

Boettcher Foundation

Colorado Health Foundation

The Colorado Trust -- includes the Colorado Health Institute

Daniels Fund

<u>Department of Local Affairs</u> Division of Housing

El Pomar

<u>Jared Polis Foundation</u> -- technology

<u>U.S. Department of Agriculture</u> -- rural community development initiatives

<u>U.S. Department of Agriculture</u> -- distance learning and telemedicine

Western Colorado Community Foundation -- Western Colorado Community Fund

Western Colorado Community Foundation -- Western Colorado Health Fund

Capacity Assessment

Stakeholders from Lake County Build a Generation, Lake County Public Health Agency and St. Vincent Hospital conducted individual interviews with contacts from several local agencies and institutions to gauge capacity for increasing senior supports and services. The following table provides lead contacts at each agency and current work to support seniors (Column 3), as well as possible efforts in 2018 and beyond (Column 4).

Agency	Staff Contact/Title/email	Current Work Serving Seniors	Future Areas of Possibility
Board of County Commissioners (BOCC)	Mark Glenn, Commissioner, mglem@co.lake.co.us Dolores Semsack, Commissioner, dsemsack@co.lake.co.us Sarah Mudge, Commissioner, smudge@co.lake.co.us Whittney Smythe-Smith, Human Resource Director /Administrative Assistant to BOCC, wsmith@co.lake.co.us	BOCC supported the creation of the Senior Master Plan (SMP). BOCC supported the creation of an "Aging Well" project under Lake County Public Health agency and provided \$55,000 in funding in 2018. BOCC provided matching funds for an application to purchase a new van for the Senior Center.	BOCC will continue to keep the Aging Well project under the Lake County Public Health Department as long as this structure continues to work for all parties.
City of Leadville (COL)	Greg Labbe, Mayor, vmayor@leadville-co.gov		 City Council is interested in holding one council meeting a year at the Senior Center. City Council is interested in developing a program to have the City of Leadville Street Department provide help with clearing snow for high-risk elderly residents. Pilot will run in 2018. City Council will be providing \$ 5,000 to help with staffing costs in 2018.
Lake County Build a Generation (LCBAG)	Katie Baldassar, Director, Katie (a)lcbag.org	LCBAG helped coordinate the Senior Master Plan (SMP) and will support implementation.	LCBAG is willing to seek funding to research the possibility of a long-term care facility in Lake County. LCBAG is willing to seek funding to research

			caseworker models and identify one that would be a good fit for Lake County (as well as identify an agency in which to house such a project). • LCBAG will work with the Aging Well Coordinator to track progress on the plan by doing the following: • Regularly survey seniors for feedback on current senior programs • Regularly collect other data that provides informal feedback about programming (i.e., user numbers, etc.) • Regularly report feedback and proposed agency response to the Senior Advisory Board • Summarize updates for activities and outcomes under each strategic priority and update the plan accordingly every 6 months • Conduct an annual community meeting to discuss progress in implementing the Senior Master Plan and solicit input appropriately.
Lake County Public Health Agency (LCPHA)	Colleen Nielsen, Director, cnielsen@co.lake.co.us	LCPHA hired an Aging Well Coordinator to oversee the transportation, meals and services for the aging population of Lake County and provide support for Senior Master Plan Implementation.	LCPHA can coordinate a Caregivers Education Series, including Lunch n' Learn sessions. LCPHA will oversee the "Aging Well" position and associated staff and programming (See the 3-year Aging Well Action Plan for more information).
St. Vincent Hospital (SVH)	Karen Onderdonk, Director of Outreach and Development, konderdonk@svghd org Gary Campbell, Hospital Administrator, gcampbelk@svghd.org		 SVH is working to bring specialists in from eye surgeons to Gastroenterologist (provide scopes). SVH is interested in providing respite beds so caregivers can take a break while their loved ones are being taken care of in the hospital. SVH is starting a diabetes education program in 2018, which could serve seniors (along with

			other community members). SVH is willing to partner on an education series for caregivers or other topics as needed. SVH is interested in starting a community paramedic program to provide labs in home/basic services in home.
Rocky Mountain Family Practice (RMFP)	Dr. Lisa Zwerdlinger, Family Practice Physician, drlisa@leadvillermfp.com	RMFP is working with Region 13 Regional Health Connector, Mike Orrill, on cross-county transportation for Lake County residents to access hospital services. RMFP is working with Heart of the Rockies Regional Medical Center (HRRMC) to have more "spots" available for Lake County residents to see specialists (that are typically booked out for months). RMFP currently has case management in conjunction with Solvista.	RMFP is interested in working on education for appropriate patient referral to agencies such as Premier (for home health). RMFP, along with other partners in Chaffee and Lake Counties (Chaffee Shuttle, St. Vincent Hospital, Heart of the Rockies Regional Medical Center, Lake County Commissioners, City of Leadville, Lake County Public Health, et.al.) will continue working to find solutions for medical transportation between Leadville and Salida, as well as local, in-town transportation in Leadville.
Sol Vista Health	Mandy Kaisner, Deputy Chief Operating Officer, mandyk@solvistahealth.org Mandy Trollip, Supervisor, mandyt@solvistahealth.org	Solvista provides outpatient and ongoing services to seniors including emergency services. Solvista works with medical staff to understand the differences between medical causes for mental health symptoms versus psychosis (or other mental health disorders). Solvista links and shares resources and supports for families. Solvista provides case management services for individuals 55+ with behavioral health needs by coordinating care with PCP and specialty doctors, providing transportation to appointments,	

		monitoring, and follow up services to stay engaged and reduce depression.	
Lake County Department of Human Services (Adult Protection)	Patricia Gibbons, Child and Adult Protection Manager, patricia gibbons@state.co.us	DHS currently works only with seniors who qualify for adult protective services (to qualify, a senior has to designated an "at risk" category AND evidence of mistreatment). DHS works to refer seniors to any resource available in the community: e.g., Premier Home Care (a small locally owned health services organization serving the Arkansas Valley) for home health services.	DHS would be willing to share all local services information and resources with any new caseworkers brought into the County, given the high need for caseworkers for older adults. DHS can provide all information about services available to the elderly for the new Aging Well Coordinator. DHS administers informational sessions in the community five times per year and is very willing to participate in any kind of Lunch n' Learn, caregiver support, Facebook page information, or senior newsletter.
Lake County Department of Human Services (Public Assistance)	Paige Trujillo, Public Assistance Supervisor/Fraud Supervisor, paige trujilo@state.co.us Sierra Palumbo, Public Assistance Lead Tech/Lead Fraud Investigator/Colorado Works Case Manager, sierra palumbo@state.co.us	DHS provides non-MAGI (Monthly Adjusted Gross Income) programs in which qualification includes both income and total assets and liabilities. These include the Medicare Savings Program and Long-term Care Program (Home and Care-Based Services, Nursing Home care). MAGI programs provided include Supplemental Nutrition Assistance Program (SNAP); State Aid to the Needy and Disabled; and Old Age Pension.	If incoming caseworkers are going to help advise people regarding DHS programs, DHS wants to have a close, working relationship with these caseworkers. DHS is open to a variety of options here, including: O Co-supervision Having caseworkers go to the Staff Development Center and go through their trainings Having caseworkers meet with clients at DHS when they are filling out DHS applications, so that the caseworker can make sure he/she is on the same page with DHS staff when giving advice Having the caseworker meet regularly with DHS staff to ask questions and share feedback with each other HOHS would like to support, if relevant, training that is created to provide reliable

			and accessible home care services and medical services.
Lake County Recreation Department (LCRD)	Amber Magee, Director, amagee@co.lake.co.us Felicia Federico, Recreation Coordinator, ffederico@co.lake.co.us	LCRD provides free senior-specific classes, such as yoga, qigong, tai chi and aqua stretch. LCRD has been updating the Senior page on the County website. LCRD is working with the Upper Arkansas Area Agency on Aging to provide a space for staff to assist Lake County seniors with program enrollment. LRCD has a MOU in place with the AAA to receive funding to offset program costs.	LCRD would like help identifying people who could teach classes to seniors. LCRD is willing to offer facilities for group events/meetings/info sessions, etc. LCRD is willing to have the Activity/Program Coordinator be part of the Recreation Department, if that is deemed the best fit. LCRD is willing to share resources to help contribute to a comprehensive "mailing list" to distribute event and resources information to seniors in Lake County. LCRD is willing to support the Senior Center in contributing content for the senior website and newsletter.
Lake County Public Library (LCPL)	Brenα Smith, Library Director, bsmith(@co lake co υs	The library currently has large print books and audio books. It also subscribes to Overdrive, which has additional audio books.	The library is interested in developing a stronger volunteer program in order to do some of the following with seniors: Partner with the senior center to bring homebound seniors to the library Bring books to homebound seniors (i.e., through Meals on Wheels) Consider programming for seniors (i.e., reading aloud) The library is willing to provide space for programming and/or meetings.
Lake County Department of Motor Vehicles (DMV)	Grace Smith-Sodic, Gsmith-sodic@co.lake.co.us		The DMV is willing to provide education for seniors regarding getting a driver's license after 65 in the form of a class, a Lunch n' Learn, etc.
Leadville Lake Cty Economic Development Corporation (EDC)	Mike Bordogna, Executive Director, director@lakecountyedc.com		The EDC is willing to discuss how the EDC could support Senior Initiatives and increase local business awareness of how they can better support seniors on an EDC meeting Agenda.

Lake County School District (LCSD)	Kate Bartlett, Chief Financial Officer, kbartlett@lakecountyschools.net	Lake County School District serves K-12 th grades.	LCSD is willing to look into the possibility of partnering with Colorado Mountain College on a Certified Nursing Assistant (CNA) certificate program that would allow LCSD
			students to graduate from the LCSD with a CNA certificate. This would increase the number of qualified individuals in our community who could provide home care services for seniors.
			LCSD is open to discussion about whether it would be feasible to contract to provide seniors with meals and/or transportation services.
			LCSD is open to working with the Aging We Coordinator to donate transportation for seniors to a discrete number of school events, such as plays or concerts. (The Agin Well Coordinator would be responsible for organizing, and the District could provide a bus and driver).
			LCSD would be willing to donate or rent facilities as needed for social events, physici activity, learning events, etc. (For example, the Pitts gym is under-utilized and located very near the Senior Center).
			LCSD is open to conversations about how LCSD students could interact with seniors ir order to start programs that could be mutually beneficial to all.

Colorado Mountain College (CMC)	Rachel Pokrandt, Vice President and Campus Dean, CMC-Leadville and Chaffee County Campuses, rookrandt@coloradomtn.edu Marc Thomas, Assistant Dean of Instruction, CMC-Leadville, mothomas@coloradomtn.edu	 CMC envisions offering community classes that are senior-population specific and could include culinary classes (e.g., cooking for senior nutritional needs or cooking for one, meal planning and shopping, microwave cooking, or easy, nutritious meals), or a class around qualifying for the senior homestead tax exemption. CMC Staff is interested in looking for approval for a tuition break for seniors. CMC currently offers a Certified Nursing Assistant (CNA) certificate through the Buena Vista campus and might be interested into developing a similar program in Leadville, if an organization could commit to overseeing internship hours, as well as identifying a place for CMC students to complete clinical hours. CMC might also be interested in starting a Concurrent Enrollment Programs Act (CEPA) program in the Medical fields preparation space to prepare students for "Direct patient care" (and which could include a CPR class, a personal care attendant (PCA) class, an EMT introduction and an internship).
Cloud City Conservation Center (C4)/ Cloud City Farm	Kendra Kurihara, Executive Director, Kendra (a) cloudcity conservation.org	 C4 would like to be included in conversations about increasing public transportation options. C4 would like to start a "backyard gardening program" and is interested in reaching out to seniors to garner participation. C4's CARE program (income-qualified program for healthy homes) currently reaches seniors and will continue to seek senior contacts of potential clients. C4 will be teaching a community course at CMC on healthy, efficient homes and would

			like to enroll seniors. C4 would be willing to share information about its programs with seniors at any local informational sessions. C4 would like to recruit senior volunteers to its greenhouse. C4 would be interested in having the Senior Center host a plot at the community greenhouse, with seniors tending it and receiving produce. C4 would like to continue to provide produce for the Fruit & Veggie Prescription Program or any cooking classes conducted through LCPHA, as well as recruit seniors to participate in these programs. C4 will work to provide subsidized produce distribution for Lake County SNAP participants.
Chaffee County Public Health (CCPH)	Mike Orrill, Regional Health Connector –Region 13, morrill@chaffeecounty.org		Mike Orrill is working with Lake and Chaffee County partners to develop public transportation services in Lake County by expanding services already available in Chaffee County.
Chaffee County Department of Human Services (CCDHS)	Rachel Crocker, SEP Case Manager/Supervisor, Rachel.crocker@state.co.us	Lake County seniors can use Chaffee County DHS to see if they qualify for Medicaid support for assisted living or a nursing home and work with a Single-Entry Point (SEP) representative to find a placement. (The level of demand for this service dictates that it is best offered as a regional service, operating out of Chaffee County Human Services and serving several counties).	

Upper Arkansas	denise micciche@uaacog.com	The AAA-UAACOG currently comes to Leadville once a month to meet with seniors inquiring about the services they can provide. UAACOG will continue to have a presence in Lake County and promote those services.	
Area Council of			
Governments –			
Area Agency on			
Aging	According to the control of the	UAACOG provides some funding to	
(UAACOG)		support Health Promotion activities	
	Commence of the Commence of th	through Tai Chi/Moving for Better	
	The second secon	Balance classes (and will continue to	
		do so as long as HP funding is	
		received through the state).	

Lastly, we convened a meeting with the **Senior Community Connectors** involved in the original needs assessment data collection process and while they agreed that we have captured the essence of our senior needs, they want to additionally emphasize the need for:

- Provide help applying for Medicare and other services
- Increase access to Area Agency on Aging UAACOG services (they are currently coming in once a month to Lake County)
- Work with Cloud City Conservation Center and service type businesses (e.g., home repair) for senior discounts
- Facilitate classes on basic home care for a patient
 Ensure that important information like the Senior Homestead Exemption that went out from the assessors be in a different color like yellow so people will pay more attention to it
- Encourage new development to be walkable friendly and follow universal design standards
- Encourage that senior-provided meals are appropriate for chronic disease management
- Update the Senior Center website
- Develop a model for chores to be banked for when they need them
- Work with St. Vincent to bring back therapy dogs and reading volunteers

Implementation Plan

2017 Senior Master Implementation Plan

Vision: To empower our Lake County community in making healthy choices where we live, learn, work and play

Mission: Promoting healthy choices, preventing disease, and protecting our community through ongoing assessment, education and resource sharing while engaging in a holistic approach

Health Indicators	Current Reality	2018 Activities	2019 Activities	2020 Activities	2020 Target	Process Updates
Health Indicator #1: Access to Care	The Senior Master Plan process identified the following gaps to research and explore options for: 1. assisted living/nursing home facilities; 2. increasing case management services; 3. increasing support for paying for services; 4. increasing type/availability of specialist services.	1. Lake County Public Health Agency, Rocky Mountain Family Practice and St. Vincent Hospital will work with Heart of the Rockies Regional Medical Center (HORRMC, Salida) to create more appointments for Lake County residents to see specialists, especially if transportation opportunities from Lake County to Salida can be developed. 2. The Healthy Aging Coordinator at LCPHA will hold an informational session or sessions (i.e., a "Lunch and Learn" or a "Caregiver's Fair") to help provide information to seniors and caregivers	1. The Healthy Aging Coordinator at LCPHA will continue to hold an informational session or sessions (i.e., a "Lunch and Learn" or a "Caregiver's Fair") to help provide information to seniors and caregivers about available resources to improve seniors' access to care. Possible attendees from the medical/long-term care field could include health providers, the individual who oversees the Single Point of Entry Program out of Chaffee County Human Services, etc. 2. Lake County Build a	1. The Healthy Aging Coordinator at LCPHA will continue to hold an informational session or sessions (i.e., a "Lunch and Learn" or a "Caregiver's Fair") to help provide information to seniors and caregivers about available resources to improve seniors' access to care. Possible attendees from the medical/long-term care field could include health providers, the individual who oversees the Single Point of Entry Program out of Chaffee County Human Services, etc.	1. An increase in specialists serving Lake County seniors either in Lake County or in the region (i.e., Summit or Salida). 2. The introduction of at least one informational session annually to help provide information to seniors and caregivers about the available resources to improve seniors' access to care. 3. A clear plan for developing assisted living	TBD

about available resources to improve seniors' access to care. Possible attendees from the medical/long-terr care field could include health providers, the individual who oversees th Single Point of Entry Program out of Chaffee County Human Services, etc.	possibility of creating assisted living and/or long-term care	Generation will apply for funding to be able to explore the possibility of creating assisted living and/or long-term care opportunities in Leadville/Lake County. 3. LCBAG will work with any relevant identified agencies to start a caseworker model in town. 4. DHS will work with the caseworker(s) (when hired) to ensure that they are prepared to advise clients accurately about qualifying for DHS services. This might include supporting the caseworker(s) in attending DHS trainings, providing space for caseworker(s) to meet with clients at DHS (where they would have easy access to staff to ask questions), meeting regularly with caseworkers to review recent cases and identify opportunities to ensure the	and/or long-term care opportunities in Lake County.	

	u		caseworkers are providing accurate information, or even offering some supervisory support to caseworkers.		
					Process
Current Reality	2018 Activities	2019 Activities	2020 Activities	2020 Target	Updates
	St. Vincent Hospital (SVH) will explore the expansion of the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services in- home for more immobile seniors. The Aging Well Coordinator at LCPHA will compile a list of home care service providers and what services they provide.	SVH will expand the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services in-home for more immobile seniors. The Aging Well Coordinator at LCPHA will continue to update a list of home care service providers and what services they provide and make the list available to all	SVH will continue the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services in-home for more immobile seniors. The Aging Well Coordinator at LCPHA will continue to update a list of home care service providers and what services they provide and make the list available to all	1. An increase in the home care services provided (either home health care, home care services such as light housekeeping, or home care services provided by local government, such as the City of Leadville's proposed snow removal program	
The Senior Master Plan process identified the following gaps to research and explore options for: 1. more Home Care Service providers (volunteer or paid) and who have been "vetted" and proven reliable; 2. increasing outreach and awareness for availability of resources and services; 3. increasing free or low-	3. Colorado Mountain College (CMC) and Lake County School District (LCSD) will examine the possibility of starting a CNA program at CMC and opening it to dual enrollment (high school) students and/or examine the possibility of creating a dual enrollment "track" such as "Intro to the	providers and agencies for referrals. 3. If it is determined to be feasible to start such a program, CMC and LCSD will start a CNA program or "Intro to Medical Fields" track at CMC that will be open to dual enrollment (high	providers and agencies for referrals. 3. If it is determined to be feasible to start such a program, CMC and LCSD will continue a CNA program or "Intro to Medical Fields" track at CMC that will be open to dual enrollment (high	2. The development of local certification programs for either Certified Nurse Assistants or Personal Care Assistants. 3. The development of a	TBD
	The Senior Master Plan process identified the following gaps to research and explore options for: 1. more Home Care Service providers (volunteer or paid) and who have been "vetted" and proven reliable; 2. increasing outreach and awareness for availability of resources and services;	1. St. Vincent Hospital (SVH) will explore the expansion of the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services in- home for more immobile seniors. 2. The Aging Well Coordinator at LCPHA will compile a list of home care service providers and what services they provide. The Senior Master Plan process identified the following gaps to research and explore options for: 1. more Home Care Service providers (volunteer or paid) and who have been "vetted" and proven reliable; 2. increasing outreach and awareness for availability of resources and services; 3. increasing free or low-	1. St. Vincent Hospital (SVH) will explore the expansion of the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services inhome for more immobile seniors. 2. The Aging Well Coordinator at LCPHA will compile a list of home care service providers and what services they provide. The Senior Master Plan process identified the following gaps to research and explore options for: 1. more Home Care Service providers (volunteer or paid) and who have been "vetted" and proven reliable; 2. increasing outreach and awareness for availability of resources and services; 3. increasing free or low-	Current Reality 2018 Activities 1. St. Vincent Hospital (SVH) will explore the expansion of the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services inhome for more immobile seniors. 2. The Aging Well Coordinator at LCPHA will compile a list of home care service providers and what services they provide. The Senior Master Plan process identified the following gaps to research and explore options for: (LCSD) will examine the possibility of restarting and pervone reliable; 2. increasing outreach and awareness for availability of resources and services; 3. increasing free or low- 2018 Activities 2019 Activities 1. SVH will expand the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services in-home for more immobile seniors. 2. The Aging Well Coordinator at LCPHA will continue to update a list of home care service providers and what services they provide and make the list available to all providers and agencies for referrals. 3. Colorado Mountain College (CMC) and Lake County School District (LCSD) will examine the possibility of starting a CNA program or "Intro to Medical Fields" track at CMC that will be open to dual enrollment (high	Current Reality 2018 Activities 1. St. Vincent Hospital (SVH) will explore the expansion of the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services inhome for more immobile seniors. 2. The Aging Well Coordinator at LCPHA will compile a list of home care service providers and ware reproviders and what services they provide. The Senior Master Plan process identified the following gaps to research and explore options for: 2. Increasing outreach and awareness for availability of rereating and proven reliable; 2. Increasing outreach and awareness for availability of rereating a dual enrollment (high school) students and/or examine the possibility of creating a dual enrollment (high school) sincressing free or low- 3. increasing free or low- 22020 Target 1. SVH will expand the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services inhome for more immobile seniors. 1. SVH will expand the Community Paramedic Program through St. Vincent EMS to be able to do basic lab services inhome for more immobile seniors. 2. The Aging Well Coordinator at LCPHA will continue to update a list of home care service providers and wastervices they provider and make the list available to all providers and agencies for referrals. 3. Colorado Mountain College (CMC) and Lake County School District (LCSD) will examine the possibility of starting a CNA program or "linto to the development of a develop

		provide students with several certificates, including a Personal Care Assistant and CPR certificate. 4. The City of Leadville (COL) will pilot a snow removal program with the Street Department in 2018 that will support two highneeds seniors in each ward by clearing snow around their house. 5. The Leadville Lake County Economic Development Corporation (EDC) will discuss how it can support businesses to better serve seniors' needs.	4. The COL will evaluate its 2018 snow removal program with the Street Department and make any needed changes. 5. The EDC will work to support businesses to better serve seniors' needs, based on its 2018 discussions.	4. The COL will continue its snow removal program with the Street Department, expanding it if possible.	services provided in the community (that includes information about how to access them).	
Health						Process
Indicators	Current Reality	2018 Activities	2019 Activities	2020 Activities	2020 Target	Updates
Health Indicator #3: Transportation	The Senior Master Plan process identified the following gaps to research and explore options for: 1. more nonprofit and forprofit opportunities for reliable, safe, and wheelchair accessible transportation to senior services and events; 2. improving sidewalks, pathways and trail systems with wheelchair accessibility and good lighting; 3. consistent snow removal	The Aging Well Coordinator at LCPHA will continue to submit grant proposals to improve and modernize the Senior Center vehicle fleet. The Aging Well Coordinator at LCPHA will formalize the transportation program at the Senior Center to ensure that it is successfully providing both on-demand	The Aging Well Coordinator at LCPHA will continue to submit grant proposals to improve and modernize the Senior Center vehicle fleet. The Aging Well Coordinator at LCPHA will continue to develop and oversee a transportation program at the Senior	1. The Aging Well Coordinator at LCPHA will continue to submit grant proposals to improve and modernize the Senior Center vehicle fleet. 2. The Aging Well Coordinator at LCPHA will continue to develop and oversee a transportation program at the Senior	1. Improvements in the transportation program at the Senior Center, including updated vans and refined policies and procedures, that will enable seniors to get to medical appointments, community and social events, and	TBD

		r			
on sidewalks;	services and group social	Center that	Center that	go shopping.	
4. support for older adults to	and shopping trips.	successfully provides	successfully provides		
drive safely for as long as		both on-demand	both on-demand	2. The passage of	
possible.	3. Lake County Build a	services and group	services and group	Complete Streets	
	Generation (LCBAG) will	social and shopping	social and shopping	policies in	
	continue to facilitate a	trips.	trips.	Leadville and Lake	
	stakeholder group to pass a			County, the	
	"Complete Streets" policy	3. LCBAG will work	3. LCBAG will support	implementation of	
	through the City of	with its stakeholder	the implementation of	which will make	
	Leadville and Lake County	group to pass a	a "Complete Streets"	Leadville/Lake	
	that will improve the	"Complete Streets"	policy in the City of	County a more	
	walkability of our	policy through the City	Leadville and Lake	walkable	
	community for seniors (as	of Leadville and Lake	County that will	community for	
· ·	well as other stakeholders).	County that will	improve the walkability	seniors.	
		improve the walkability	of our community for		
	4. The local DMV office will	of our community for	seniors (as well as other	3. An increase in	
	work to provide regular	seniors (as well as	stakeholders).	the transportation	
	information	other stakeholders).		supports provided	
	sessions/classes to older		4. The local DMV office	for seniors in Lake	
	adults to help remove some	4. The local DMV office	will work to provide	County (which	
	of the uncertainty and fear	will work to provide	regular information	might include	
	around renewing one's	regular information	sessions/classes to	additional regional	
	license as an older adult.	sessions/classes to	older adults to help	transportation,	
		older adults to help	remove some of the	DMV classes about	
	5. The Regional Health	remove some of the	uncertainty and fear	renewing one's	
	Connector Program will	uncertainty and fear	around renewing one's	license as an older	
	examine the possibility of	around renewing one's	license as an older	adult,	
	bringing public	license as an older	adult.	transportation	
	transportation to Lake	adult.		provided by the	
	County by partnering with		5. The Regional Health	school district,	
	the existing service	5. The Regional Health	Connector Program	etc.)	
	providers in Chaffee	Connector Program	will continue to bring		
	County.	will work to bring	public transportation		
		public transportation	to Lake County by		
	6. The Cloud City	to Lake County by	partnering with the		
	Conservation Center (C4)	partnering with the	existing service		
	will provide support for any	existing service	providers in Chaffee		
	planning around increased	providers in Chaffee	County.		

		public transportation. 7. The Aging Well Coordinator at LCPHA will work with LCSD to provide transportation for seniors to specific school district events (such as a school play or concert). LCSD is also open to providing transportation for seniors to other places on a fee-for- service basis.	County. 6. C4 will provide support for any plan for increased public transportation. 7. The Aging Well Coordinator at LCPHA will work with LCSD to provide transportation for seniors to specific school district events (such as a school play or concert). LCSD is also open to providing transportation for seniors to other places on a fee-for-service	6. C4 will provide support for any plan for increased public transportation. 7. The Aging Well Coordinator at LCPHA will work with LCSD to provide transportation for seniors to specific school district events (such as a school play or concert). LCSD is also open to providing transportation for seniors to other places on a fee-for-service basis.		
			basis.			
Health Indicators	Command Darlite					Process
mulcators	Current Reality The Senior Master Plan	2018 Activities	2019 Activities 1. SVH will work to	2020 Activities	2020 Target	Updates
	process identified the	1. St. Vincent Hospital will develop a plan to provide	1. SVH will work to provide "respite beds"	 SVH will continue to provide "respite beds" 		
	following gaps to research	"respite beds" so caregivers	so caregivers can take	so caregivers can take a		
	and explore options for:	can take a break while their	a break while their	break while their loved		
	1. more information on	loved ones are receiving	loved ones are	ones are receiving		
Health	available resources and	treatment at the hospital.	receiving treatment at	treatment at the		
Indicator #4:	services;		the hospital.	hospital.		
Support for	2. access to caregiver support groups and respite	2. The Aging Well		The A - ' M/ !!		
Caregivers	services;	Coordinator at LCPHA will develop information events	2. The Aging Well Coordinator at LCPHA	2. The Aging Well Coordinator at LCPHA		
	3. more employer support;	or series (offered as a "fair"	will offer a caregiver	will continue to provide		
	4. more financial support for	or "Lunch n' Learn series,"	information series	a caregiver information		
	lost income;	etc.), with St. Vincent	(offered as a "fair" or	series (offered as a	The development	
	5. more culturally relevant	Hospital, the Department	"Lunch n' Learn series,"	"fair" or "Lunch n'	of a caregiver	
	marketing and outreach for	of Human Services, C4, and	etc.), with SVH,	Learn series," etc.),	information series.	TBD

	Latino caregivers.	the Area Agency on Aging all willing to attend and provide information.	LCDHS, C4, and the AAA all willing to attend and provide information.	with SVH, LCDHS, C4, and the AAA all willing to attend and provide information.		
Health						Process
Indicators	Current Reality	2018 Activities	2019 Activities	2020 Activities	2020 Target	Updates
Health Indicator #5: Social and Community Engagement	The Senior Master Plan process identified the following gaps to research and explore options for: 1. increasing the diversity of senior activities available in the community; 2. creating a process for centralized, seniorapropriate information dissemination for events and activities; 3. updating current facilities for obtaining a new facility for more senior activities like bingo, movies and dances.	1. The City of Leadville will hold at least one City Council meeting at the Senior Center annually (ideally one at which Council is discussing issues of interest to seniors) and work to market the event to seniors. 2. The Aging Well Coordinator at LCPHA will develop a plan to fund and hire a part-time program/ volunteer coordinator who can increase the number of activities for seniors as well as increase marketing of senior activities. 3. The Aging Well Coordinator at LCPHA will work to develop a list of small capital projects to improve the Senior Center, as well as a long-term plan to remodel or replace the facility. 4. The Aging Well	1. The COL will hold at least one City Council meeting at the Senior Center annually (ideally one at which Council is discussing issues of interest to seniors) and work to market the event to seniors. 2. The Aging Well Coordinator at LCPHA will work to hire a parttime program/ volunteer coordinator who can increase the number of activities for seniors as well as increase marketing of senior activities. 3. The Aging Well Coordinator at LCPHA will work to fundraise for a list of small capital projects to improve the Senior Center, as well as a long-term plan to remodel or replace the facility.	1. The COL will hold at least one City Council meeting at the Senior Center annually (ideally one at which Council is discussing issues of interest to seniors) and work to market the event to seniors. 2. The Aging Well Coordinator at LCPHA will oversee a part-time program/volunteer coordinator who can increase the number of activities for seniors as well as increase marketing of senior activities. 3. The Aging Well Coordinator at LCPHA will work to execute a list of small capital projects to improve the Senior Center, as well as a long-term plan to remodel or replace the facility.	1. Improvements are made to the Senior Center and a long-term plan is developed for the Senior Center's eventual remodel and/or replacement. 2. An increase in the number of activities available to seniors in Lake County.	TBD

	Coordinator will approach	4. The Aging Well	4. The Aging Well
	LCSD and the Rec	Coordinator will	Coordinator will
	Department to explore	approach LCSD and	approach LCSD and the
	providing facilities for	the Rec Department to	Rec Department to
	senior-related activities	explore providing	explore providing
	ranging from recreation	facilities for senior-	facilities for senior-
	classes to social activities to	related activities	related activities
	information sessions.	ranging from	ranging from
		recreation classes to	recreation classes to
	5. The Aging Well	social activities to	social activities to
	Coordinator will work with	information sessions.	information sessions.
	LCSD to help identify key		
	LCSD events that seniors	5. The Aging Well	5. The Aging Well
	might want to attend (such	Coordinator will work	Coordinator will work
	as LCSD plays or the LCSD	with LCSD to help	with LCSD to help
	Homecoming game) and	identify key LCSD	identify key LCSD
	work to market these	events that seniors	events that seniors
	events to seniors and	might want to attend	might want to attend
	provide transportation	(such as LCSD plays or	(such as LCSD plays or
	through the LCSD.	the Homecoming	the Homecoming
	_	game) and work to	game) and work to
	6. The Lake County Library	market these events to	market these events to
	will examine the possibility	seniors and provide	seniors and provide
	of expanding activities for	transportation through	transportation through
	seniors. Possibilities might	the LCSD.	the LCSD.
	include: (1) Partnering with		
	the senior center to bring	6. The Lake County	6. The Lake County
	homebound seniors to the	Library will examine	Library will examine
	library; (2) Bringing books	the possibility of	the possibility of
	to homebound seniors (i.e.,	expanding activities for	expanding activities for
	through Meals on Wheels);	seniors. Possibilities	seniors. Possibilities
	or (3) Considering	might include: (1)	might include: (1)
	programming for seniors	Partnering with the	Partnering with the
·	(i.e., reading aloud).	senior center to bring	senior center to bring
		homebound seniors to	homebound seniors to
	7. CMC will work to ensure	the library; (2) Bringing	the library; (2) Bringing
	reasonably priced non-	books to homebound	books to homebound
	credit continuing education	seniors (i.e., through	seniors (i.e., through
· · · · · · · · · · · · · · · · · · ·			

			r			
		courses and market its	Meals on Wheels); or	Meals on Wheels); or		
		senior discount for credit	(3) Considering	(3) Considering		
		classes (50% off for seniors	programming for	programming for		
	· ·	over 62 years old) in order	seniors (i.e., reading	seniors (i.e., reading		
		to expand the number of	aloud).	aloud).		
		seniors taking advantage of				
		the discount.	7. CMC will work to	7. CMC will work to		
			ensure reasonably	ensure reasonably		
			priced non-credit	priced non-credit		
		1.0	continuing education	continuing education		
		*	courses and market its	courses and market its		
			senior discount for	senior discount for		
	* *		credit classes (50% off	credit classes (50% off		
			for seniors over 62	for seniors over 62		
			years old) in order to	years old) in order to		•
			expand the number of	expand the number of		
			seniors taking	seniors taking		
		Later Control of the	advantage of the	advantage of the		
		51	discount.	discount.		
Health						Process
Indicators	Current Reality	2018 Activities	2019 Activities	2020 Activities	2020 Target	Updates
	The Senior Master Plan	1. The LCBAG Housing	1. The LCBAG Housing	1. The LCBAG Housing		•
	process identified the	Coalition will finalize a	Coalition will work to	Coalition will work to	1. The inclusion of	
	following gaps to research	Housing Needs Assessment	implement	implement	senior housing	
	and explore options for:	for Lake County with the	recommendations	recommendations	needs in the	
	1. increasing awareness for	consultant firm EPS, which	from the Housing	from the Housing	Housing Needs	
	the Senior Homestead	will propose tools and	Needs Assessment for	Needs Assessment for	Assessment.	
11. 10.	Exemption;	l	,		l l	
Health	LACTIPUOL	strategies for housing	Lake County with the	Lake County with the		
Indicator #6:	2. providing low-cost or	needs and challenges,	Lake County with the consultant firm EPS,	Lake County with the consultant firm EPS,	2. The	
I Haveine			,	,	2. The development	
Housing	2. providing low-cost or	needs and challenges,	consultant firm EPS,	consultant firm EPS,		
Housing	2. providing low-cost or subsidized home	needs and challenges, including for senior	consultant firm EPS, which will propose	consultant firm EPS, which will propose	development	
Housing	providing low-cost or subsidized home modifications or renovations	needs and challenges, including for senior	consultant firm EPS, which will propose tools and strategies for	consultant firm EPS, which will propose tools and strategies for	development and/or expansion	
Housing	providing low-cost or subsidized home modifications or renovations to enable seniors to stay in their homes;	needs and challenges, including for senior housing.	consultant firm EPS, which will propose tools and strategies for housing needs and	consultant firm EPS, which will propose tools and strategies for housing needs and	development and/or expansion of local programs	
Housing	providing low-cost or subsidized home modifications or renovations to enable seniors to stay in	needs and challenges, including for senior housing. 2. C4 will work with local	consultant firm EPS, which will propose tools and strategies for housing needs and challenges, including	consultant firm EPS, which will propose tools and strategies for housing needs and challenges, including	development and/or expansion of local programs that support	
Housing	providing low-cost or subsidized home modifications or renovations to enable seniors to stay in their homes; promoting and supporting	needs and challenges, including for senior housing. 2. C4 will work with local venues like CMC and the	consultant firm EPS, which will propose tools and strategies for housing needs and challenges, including	consultant firm EPS, which will propose tools and strategies for housing needs and challenges, including	development and/or expansion of local programs that support seniors in ensuring	

	and community improvements to make all Lake County neighborhoods "age-friendly".	how to have a healthy, efficient homeand work to market these classes to seniors.	and the Lake County library to host free informational workshops to teach about how to have a healthy, efficient homeand work to market these classes to seniors.	and the Lake County library to host free informational workshops to teach about how to have a healthy, efficient homeand work to market these classes to seniors.		
Health Indicators	Current Reality	2018 Activities	2019 Activities	2020 Activities	2020 Target	Process Updates
marcators	The Senior Master Plan	1. St. Vincent Hospital will	1. SVH will continue	1. SVH will continue	1. An increase in	Opuates
	process identified the	pilot a "How to Eat Healthy	"How to Eat Healthy in	"How to Eat Healthy in	preventative care	
	following gaps to research	in 16 Weeks" as part of the	16 Weeks" as part of	16 Weeks" as part of	services offered in	
	and explore options for:	Diabetes Prevention	the Diabetes	the Diabetes	town and	
	1. promoting education for	Program to support long-	Prevention Program to	Prevention Program to	marketed to	
	senior cooking skills;	lasting lifestyle changes for	support long-lasting	support long-lasting	seniors (such as	
	2. increasing local options for affordable, fresh healthy	losing weight.	lifestyle changes for	lifestyle changes for	"scopes").	
	food;	2. SVH will work to bring	losing weight.	losing weight.	2. An increase in	
	3. making meals available at	more specialists in for	2. SVH will work to	2. SVH will work to	seniors' access to	
	the Senior Center and	"scopes" (endoscopy,	bring more specialists	bring more specialists	healthy, affordable	
Health	through delivery services	colonoscopy).	in for "scopes"	in for "scopes"	food (either in	
Health Indicator #7:	more dietary specific;	.,,	(endoscopy,	(endoscopy,	their own homes	
Preventive Care	4. increasing transportation	3. C4 will work with	colonoscopy).	colonoscopy).	or through services	
Treventive care	options to food and retail	LCPHA's Aging Well			such as the	
	outlets, and exercise	Coordinator to create a	3. C4 will continue the	3. C4 will continue the	communal meal or	
	class/facilities;	"Senior Center" plot at the	"Senior Center" plot at	"Senior Center" plot at	Meals on Wheels)	
	5. increasing awareness of	community garden.	the community garden.	the community garden.	and/or	
	how tobacco cessation, healthy eating and active	4. C4 will work to engage	4. C4 will continue to	4. C4 will continue to	programming that	
	living can improve the	seniors in its new backyard	engage seniors in its	engage seniors in its	encourages seniors to eat more	
	quantity and quality of a	garden program and at its	new backyard garden	new backyard garden	healthy food, such	
	senior's life;	greenhouse.	program and at its	program and at its	as volunteer	
	6. increasing access to		greenhouse. It will also	greenhouse. It will also	opportunities at	
	preventive screenings, flu	5. C4 will continue to help	continue to help teach	continue to help teach	the C4 greenhouse	
	shots, and vaccines.	teach cooking classes (open	cooking classes (open	cooking classes (open	that are marketed	

	to seniors and others),	to seniors and others),	to seniors and others),	to seniors.	
	through the Food Health	through the Food	through the Food		
	Program at LCPHA.	Health Program at	Health Program at		
		LCPHA.	LCPHA.		
	6. The Lake County			.*	
	Recreation Department will	5. The LCRD will	5. The LCRD will	14	
	continue to offer exercise	continue to offer	continue to offer		
	classes aimed at serving	exercise classes aimed	exercise classes aimed		
	seniors (as well as to	at serving seniors (as	at serving seniors (as		
	expand these offerings	well as to expand these	well as to expand these		
	where there is	offerings where there	offerings where there is		
	interest/demand, capacity	is interest/demand,	interest/demand,		
	and specifically, community	capacity and	capacity and		
	members willing to teach).	specifically,	specifically, community		
	, , ,	community members	members willing to		
	7. CMC will examine the	willing to teach).	teach).		
	possibility of offering				
A N	senior-specific	6. CMC will begin to	6. CMC will begin to		
	nutrition/cooking classes,	offer senior-specific	offer senior-specific		
	such as "Cooking for One,"	nutrition/cooking	nutrition/cooking		
	"Senior Nutrition," or	classes, such as	classes, such as		
	"Healthy Microwave	"Cooking for One,"	"Cooking for One,"		
	Cooking."	"Senior Nutrition," or	"Senior Nutrition," or		
	255	"Healthy Microwave	"Healthy Microwave		
	8. The Aging Well	Cooking."	Cooking."		
	Coordinator at LCPHA will	Cooning.			
	work to evaluate the meals	7. The Aging Well	7. The Aging Well		
	served at the Senior Center	Coordinator at LCPHA	Coordinator at LCPHA		
	and through Meals on	will make changes to	will make changes to		
	Wheels for their ability to	the meals served at the	the meals served at the		
	respond to the dietary	Senior Center and	Senior Center and		
	needs of older adults with	through Meals on	through Meals on		
	special diets (i.e., adults	Wheels (based on the	Wheels (based on the		
	with hypertension or	2018 evaluation), in an	2018 evaluation), in an		
	diabetes).	effort to improve their	effort to improve their		
	4.0000007.	ability to respond to	ability to respond to		
		the dietary needs of	the dietary needs of		
		older adults with	older adults with		
	I	Older adoles with	oraci audits with	l	L

			special diets (i.e., adults with hypertension or diabetes).	special diets (i.e., adults with hypertension or diabetes).		
Health						Process
Indicators	Current Reality	2018 Activities	2019 Activities	2020 Activities	2020 Target	Updates
Health Indicator #8: Information and Education	The Senior Master Plan process identified the following gaps to research and explore options for: 1. Connecting seniors to resident "experts" on a variety of topics like taxes, navigating insurance programs, using technology, etc.; 2. Increasing the number of agencies, organizations, businesses and institutions that have a "senior advocate" on staff.	1. The Aging Well Coordinator at LCPHA will work to improve information dissemination to seniors through developing print newsletters (by combining the various mailing lists and working to develop a newsletter that can be distributed each month), updating the website, developing a social media plan, etc. He/she may seek support from the LCBAG Communications Team. 2. The Aging Well Coordinator at LCPHA will work to provide information sessions to seniors on relevant topics. St. Vincent Hospital, DHS, C4, AAA, and the SEP Program out of Chaffee County Human Services are all willing to present information. 3. CMC will work to have their business students	1. The Aging Well Coordinator at LCPHA will work to improve information dissemination to seniors through developing print newsletters (by combining the various mailing lists and working to develop a newsletter that can be distributed each month), updating the website, developing a social media plan, etc. He/she may seek support from the LCBAG Communications Team. 2. The Aging Well Coordinator at LCPHA will work to provide information sessions to seniors on relevant topics. St. Vincent Hospital, DHS, C4, AAA, and the SEP Program out of	1. The Aging Well Coordinator at LCPHA will work to improve information dissemination to seniors through developing print newsletters (by combining the various mailing lists and working to develop a newsletter that can be distributed each month), updating the website, developing a social media plan, etc. He/she may seek support from the LCBAG Communications Team. 2. The Aging Well Coordinator at LCPHA will work to provide information sessions to seniors on relevant topics. St. Vincent Hospital, DHS, C4, AAA, and the SEP Program out of Chaffee	1. The introduction of a caseworker or caseworkers in Lake County who can assist seniors in identifying services to help them stay in their homes longer and/or opportunities to transition to assisted living or nursing care. 2. Increased information dissemination to seniors using tools such as classes, fairs, Lunch n' Learns, social media, websites, newsletters, individual meetings, etc.	TBD

		provide community information sessions about the Homestead Exemption to seniors to help increase the number of seniors who are aware of, and taking advantage of, this program. 4. The Upper Arkansas Agency Council of Governments will send a staff member up to Leadville once a month to meet with seniors about the AAA programs. The Aging Well Coordinator at LCPHA will work to advertise these opportunities.	Chaffee County Human Services are all willing to present information. 3. CMC will work to have their business students provide community information sessions about the Homestead Exemption to seniors to help increase the number of seniors who are aware of, and taking advantage of, this program. 4. UAACOG will send a staff member up to Leadville once a month to meet with seniors about the AAA programs. The Aging Well Coordinator at LCPHA will work to advertise these opportunities.	County Human Services are all willing to present information. 3. CMC will work to have their business students provide community information sessions about the Homestead Exemption to seniors to help increase the number of seniors who are aware of, and taking advantage of, this program. 4. UAACOG will send a staff member up to Leadville once a month to meet with seniors about the AAA programs. The Aging Well Coordinator at LCPHA will work to advertise these opportunities.		
Health			орронописся.	орроновниез.		Process
Indicators	Current Reality	2018 Activities	2019 Activities	2020 Activities	2020 Target	Updates
All	Implicit in the Senior Master Plan is the need for a coordinator to help drive improved services for seniors in Lake County, as well as the need for increased resources to serve seniors.	1. The City of Leadville will provide resources for seniors and Lake County will provide \$55,000 to support the creation of an Aging Well project under LCPHA. Initially, this project will hire an Aging	The City of Leadville will continue to provide resources for seniors and Lake County will continue to support a coordinator to serve seniors. The coordinator will also	The City of Leadville will continue to provide resources for seniors and Lake County will continue to support a coordinator to serve seniors. The coordinator will also	Multiple funding sources to support this position and senior services system.	TBD

 		<u> </u>	
Well Coordinator, who will	work to seek additional	work to seek additional	
oversee current projects (as	resources to serve Lake	resources to serve Lake	
well as develop new ones)	County seniors.	County seniors.	
and supervise current staff.			
Eventually, he/she will also			
hire a part time			
project/volunteer/transport			
ation coordinator. This staff			
member will do the			
following (as well as			
identified above):			
a. Refine job descriptions			
and organizational			
structure at the Senior			
Center			
b. Document best			
practices at the Senior			
Center	, v		
c. Hire a part-time	·		
volunteer/program and/or			
transportation coordinator			
d. Develop budgets and			
identify funding sources			
e. Develop policies for			
Senior Center use			
f. Develop a short-term			
and long-term plan to			
improve the Senior Center			
and eventually remodel or			
replace the facility			
g. Formalize and continue			
to develop the volunteer			
program			
h. Refine and further			
develop the senior			
transportation program			

Appendix A

	NEEDS ASSESSMENT DATA SOURCES AND LINKS
	1ACCESS TO HEALTH CARE
1	CDPHE Healthy Aging in Colorado Infographic https://www.cohealthdata.dphe.state.co.us/chd/Age/Healthy-Aging-in-Colorado-Infographic.html
2	Helpstartshere.org — Seniors and Aging, http://www.helpstartshere.org/helpstartshere/?cat=5
3	CDPHE Healthy Aging in Colorado Infographic (see above)
4	NWCCOG 2011 Report: Northwest Colorado Council of Governments Rural Resort Region: Gap Analysis of Services for an Aging Population http://nwccog.org/wp-content/uploads/2015/03/RRR_SeniorsGapAnalysis_Jan2011.pdf
5	CDC Report: The State of Aging in America 2013 https://www.cdc.gov/aging/pdf/state-aging-health-in-america-2013.pdf
6	The New York Times (2014): Unmet Needs Continue to Pile Up https://newoldage.blogs.nytimes.com/2014/12/09/unmet-needs-for-elderly-continue-to-pile-up/
7	Genworth Cost of Care Survey by State https://www.genworth.com/about-us/industry-expertise/cost-of-care.html
8	Genworth 2017 Monthly Care Costs for Colorado https://www.genworth.com/about-us/industry-expertise/cost-of-care.html
9	Columbine Manor Care Center (Salida), http://columbinemanorcarecenter.com/
10	Whitcomb Terrace Assisted Living (Aspen) http://www.aspenvalleyhospital.org/Whitcomb-Terrace-Assisted-Living
	2HOME HEALTH CARE AND SERVICES
1	Eldercarelocator.gov – Home Health Care https://eldercare.acl.gov/Public/Resources/Factsheets/Home Health Care.aspx
2	Mayo Clinic – Telehealth https://www.mayoclinic.org/healthy-lifestyle/consumer-health/in-depth/telehealth/art- 20044878?p=1
3	St. Vincent Leadville Medical Clinic – Telehealth Services, http://www.svghd.org/telehealth
4	Program for All-Inclusive Care for the Elderly (PACE), https://www.colorado.gov/pacific/hcpf/program-all-inclusive-care-elderly
	3TRANSPORTATION
1	Transportation for America: Principles for Improving Transportation Options in Rural and Small Town Communities (2010) http://www.aarp.org/content/dam/aarp/livable-communities/act/transportation/principles-for-improving-transportation-options-in-rural-and-small-town-communities-2010-aarp.pdf
2	CHI: Improving Senior Mobility in Colorado (2016) https://www.colorado.gov/pacific/sites/default/files/SAPGA%20Transportation%20Report.pdf
3	Lake County, Colorado Comprehensive Plan (2015) http://www.lakecountyco.com/buildinglanduse/sites/lakecountyco.com.buildinglanduse/files/LakeCountyComprehensivePlanFinal2015.pdf
4	CHI: Improving Senior Mobility in Colorado (2016) (see above)
5	Lake County, Colorado Comprehensive Plan (2015) (see above)
6	CHI: Improving Senior Mobility in Colorado (2016) (see above)

	4SUPPORT FOR CAREGIVERS
	Bureau of Labor Statistics – 2014-15 American Time Use Survey
1	https://www.bls.gov/tus/charts/eldercare.htm
	NWCCOG Report: Northwest Colorado Council of Governments Rural Resort Region: Gap Analysis of
2	Services for an Aging Population (2011)
	http://nwccog.org/wp-content/uploads/2015/03/RRR SeniorsGapAnalysis Jan2011.pdf
	Forbes: New Report Finds Lack of Support for Family Caregivers (2016)
3	https://www.forbes.com/sites/nextavenue/2016/09/13/new-report-finds-lack-of-support-for-family-
	<u>caregivers/#2d5402e4641a</u>
4	NWCCOG Report (2011) (see above)
5	Powerful Tools for Caregivers, https://www.powerfultoolsforcaregivers.org/
	{Inset} AARP Colorado: Picking up the Pace of Change – A State Scorecard in Long-Term Services and
6	Support for Older Adults, People with Physical Disabilities, and Family
	https://states.aarp.org/new-scorecard-shows-colorado-needs-improvement-older-adults-disabled/
7	U.S. Census Bureau QuickFacts – Lake County,
1	https://www.census.gov/quickfacts/fact/table/lakecountycolorado/PST045216
8	Evercare® Study of Hispanic Family Caregiving in the U.S., Findings From a National Study (2008)
ŏ	http://www.caregiving.org/data/Hispanic Caregiver Study web ENG FINAL 11 04 08.pdf
9	Latino Age Wave Promising Practices Emerge in Two States: A Five-Year Look at the Field
9	https://hiponline.org/wp-content/uploads/2017/01/HIP Latino Age Wave Report-FINAL.pdf
	5SOCIAL AND COMMUNITY ENGAGEMENT
	World Health Organization: Global Age-friendly Cities: A Guide (2007)
1	http://www.who.int/ageing/publications/Global age friendly cities Guide English.pdf
2	World Health Organization: Global Age-friendly Cities: A Guide (2007) (see above)
	6HOUSING
	NWCCOG Report: Northwest Colorado Council of Governments Rural Resort Region: Gap Analysis of
1	Services for an Aging Population (2011)
_	http://nwccog.org/wp-content/uploads/2015/03/RRR_SeniorsGapAnalysis_Jan2011.pdf
	Colorado Aging Framework: A Guide for Policymakers, Providers, and Others for Aging Well in Colorado
2	https://www.colorado.gov/pacific/sites/default/files/Colorado%20Aging%20Framework%20FINAL%2
_	0-%20July%202015.pdf
	RWJF County Health Rankings & Roadmaps – Lake County,
3	http://www.countyhealthrankings.org/app/colorado/2017/rankings/lake/county/outcomes/overall/s
Ū	napshot
	U.S. Census Bureau QuickFacts – Lake County,
4	https://www.census.gov/quickfacts/fact/table/lakecountycolorado/PST045216
	Housing Feasibility Study – Lake County, CO,
5	https://docs.wixstatic.com/ugd/795c37 015d17ff964247c3a7ddb9ca91e93d2d.pdf
	AARP Report: State Housing Profiles: Housing Conditions and Affordability for the Older Population
6	(2011), https://www.aarp.org/home-garden/housing/info-09-2011/state-hp-2011.html
	Colorado Aging Framework: A Guide for Policymakers, Providers, and Others for Aging Well in Colorado
7	https://www.colorado.gov/pacific/sites/default/files/Colorado%20Aging%20Framework%20FINAL%2
′	0-%20July%202015.pdf
	Lake County, Colorado Comprehensive Plan (2015)
8	http://www.lakecountyco.com/buildinglanduse/sites/lakecountyco.com.buildinglanduse/files/LakeCo
	Treep 1/ 14 A Marie Contribution of the American

9	{Opportunities Section} AARP Network of Age-Friendly Communities: An Introduction https://www.aarp.org/livable-communities/network-age-friendly-communities/info-2014/an-
	introduction.html 7PREVENTIVE CARE
	CDPHE Healthy Aging in Colorado Infographic
1	https://www.cohealthdata.dphe.state.co.us/chd/Age/Healthy-Aging-in-Colorado-Infographic.html
2	CDC – Clinical Preventive Services, https://www.cdc.gov/aging/services/index.htm
3	CDPHE Healthy Aging in Colorado Infographic (see above)
4	CDPHE Colorado's 10 Winnable Battles,
	https://www.colorado.gov/pacific/cdphe/colorados10winnablebattles
	Colorado Aging Framework: A Guide for Policymakers, Providers, and Others for Aging Well in Colorado
5	https://www.colorado.gov/pacific/sites/default/files/Colorado%20Aging%20Framework%20FINAL%2
	<u>0-%20July%202015.pdf</u>
	White Paper: Oral Health: An Essential Component of Primary Care (2015)
6	http://www.safetynetmedicalhome.org/sites/default/files/White-Paper-Oral-Health-Primary-
	Care.pdf
7	Colorado Aging Framework Guide (see above)
8	White Paper: Oral Health: An Essential Component of Primary Care (see above)
9	CDC: The State of Aging & Health in America 2013
9	https://www.cdc.gov/aging/pdf/state-aging-health-in-america-2013.pdf
	8INFORMATION AND EDUCATION
1	World Health Organization: Global Age-friendly Cities: A Guide (2007)
	http://www.who.int/ageing/publications/Global age friendly cities Guide English.pdf
01/91	NWCCOG Report: Northwest Colorado Council of Governments Rural Resort Region: Gap Analysis of
2	Services for an Aging Population (2011)
	http://nwccog.org/wp-content/uploads/2015/03/RRR SeniorsGapAnalysis Jan2011.pdf
3	NWCCOG Report (see above)
4	World Health Organization: Global Age-friendly Cities: A Guide (see above)

	BEST PRACTICES DATA SOURCES AND LINKS
	1ACCESS TO HEALTH CARE
1	CHI: Driving to the Doctor: Transportation as a Barrier to Health https://www.coloradohealthinstitute.org/research/driving-doctor-transportation-barrier-health
2	Colorado Legal Services, http://coloradolegalservices.org/
3	{Inset} The Denver Post: <i>Grants help Colorado doctors in rural low-income areas repay student loans</i> (2017), https://www.denverpost.com/2017/02/24/grants-help-rural-doctors-pay-student-loans/
4	{Inset} CDPHE Primary Care Health Professional Shortage Areas (HPSAs) Map https://www.colorado.gov/pacific/sites/default/files/PCO HPSA-primary-care-map.pdf
5	{Inset} The Colorado Health Foundation, http://www.coloradohealth.org/
6	{Key Best Practices Section} Colorado Aging Framework: A Guide for Policymakers, Providers, and Others for Aging Well in Colorado (2015) https://www.colorado.gov/pacific/sites/default/files/Colorado%20Aging%20Framework%20FINAL%20-%20July%202015.pdf
7	{Funding Sources Section} Caring for Colorado Foundation

Ing Sources Section Department of Health and Human Services Agency for Healthcare rch and Quality, https://grants.nih.gov/grants/guide/pa-files/PA-14-290.html ing Sources Section Rural Health Information Hub AHRQ Health Services Research instration and Dissemination Grants, https://www.ruralhealthinfo.org/funding/3613 ing Sources Section Rural Health Information Hub AHRQ Small Research Grant Program (R03) //www.ruralhealthinfo.org/funding/3744 ing Sources Section Colorado Rural Health Center, http://coruralhealth.org/ing Sources Section Colorado Rural Health Center The Marva Jean Jackson Scholarship ing Sources Section Colorado Rural Health Center Seed Funds, http://coruralhealth.org/seed DME HEALTH CARE AND SERVICES of Colorado Area Agencies on Aging (AAA) Regional Map, //drive.google.com/file/d/089eaXW7 92zSNkZEOG5hcmRQRjQ/view enior Hub Rural Meals on Wheels Program (//seniorhub.org/services/rural-meals-on-wheels-program/
Instration and Dissemination Grants, https://www.ruralhealthinfo.org/funding/3613 Ing Sources Section Rural Health Information Hub — AHRQ Small Research Grant Program (R03) Ing Sources Section Colorado Rural Health Center, http://coruralhealth.org/ Ing Sources Section Colorado Rural Health Center — The Marva Jean Jackson Scholarship Ing Sources Section Colorado Rural Health Center — The Marva Jean Jackson Scholarship Ing Sources Section Colorado Rural Health Center — Seed Funds, http://coruralhealth.org/seed OME HEALTH CARE AND SERVICES In Colorado Area Agencies on Aging (AAA) Regional Map, Ind Colorado Area Agencies on Aging (AAA) Regional Map, Ind Colorado Area Agencies on Wheels Program In Colorado Area Meals on Wheels Program
Ing Sources Section Rural Health Information Hub — AHRQ Small Research Grant Program (R03) //www.ruralhealthinfo.org/funding/3744 Ing Sources Section Colorado Rural Health Center, http://coruralhealth.org/ Ing Sources Section Colorado Rural Health Center — The Marva Jean Jackson Scholarship Ing Sources Section Colorado Rural Health Center — The Marva Jean Jackson Scholarship Ing Sources Section Colorado Rural Health Center — Seed Funds, http://coruralhealth.org/seed OME HEALTH CARE AND SERVICES Inf Colorado Area Agencies on Aging (AAA) Regional Map, //drive.google.com/file/d/0B9eaXW7 92zSNkZEOG5hcmRQRjQ/view Penior Hub — Rural Meals on Wheels Program
//www.ruralhealthinfo.org/funding/3744 ing Sources Section} Colorado Rural Health Center, http://coruralhealth.org/ ing Sources Section} Colorado Rural Health Center — The Marva Jean Jackson Scholarship ing /coruralhealth.org/2012/12/marva-jean-jackson-mjj-grants-update-a-membership-value.html ing Sources Section} Colorado Rural Health Center — Seed Funds, http://coruralhealth.org/seed OME HEALTH CARE AND SERVICES of Colorado Area Agencies on Aging (AAA) Regional Map, //drive.google.com/file/d/0B9eaXW7_92zSNkZEOG5hcmRQRjQ/view enior Hub — Rural Meals on Wheels Program
Ing Sources Section} Colorado Rural Health Center — The Marva Jean Jackson Scholarship of Marva Jean Jackson Scholarship of Marva Jean Jackson Scholarship of Marva Jean Jackson Scholarship Jackson Scholarship Jackson Jacks
Im /coruralhealth.org/2012/12/marva-jean-jackson-mjj-grants-update-a-membership-value.html /ing Sources Section} Colorado Rural Health Center – Seed Funds, http://coruralhealth.org/seed DME HEALTH CARE AND SERVICES of Colorado Area Agencies on Aging (AAA) Regional Map, //drive.google.com/file/d/0B9eaXW7_92zSNkZEOG5hcmRQRjQ/view enior Hub – Rural Meals on Wheels Program
Ing Sources Section} Colorado Rural Health Center – Seed Funds, http://coruralhealth.org/seed OME HEALTH CARE AND SERVICES of Colorado Area Agencies on Aging (AAA) Regional Map, //drive.google.com/file/d/0B9eaXW7 92zSNkZEOG5hcmRQRjQ/view enior Hub – Rural Meals on Wheels Program
OME HEALTH CARE AND SERVICES of Colorado Area Agencies on Aging (AAA) Regional Map, //drive.google.com/file/d/0B9eaXW7_92zSNkZEOG5hcmRQRjQ/view enior Hub — Rural Meals on Wheels Program
of Colorado Area Agencies on Aging (AAA) Regional Map, //drive.google.com/file/d/0B9eaXW7_92zSNkZEOG5hcmRQRjQ/view enior Hub — Rural Meals on Wheels Program
//drive.google.com/file/d/0B9eaXW7_92zSNkZEOG5hcmRQRjQ/viewenior Hub — Rural Meals on Wheels Program
enior Hub – Rural Meals on Wheels Program
Bangor Daily News: How community nurses help aging Mainers stay safe in their home (2016)
/bangordailynews.com/2016/10/14/next/how-community-nurses-help-aging-mainers-stay-
n-their-homes/
The Republican Journal: Camden District Nurses Attend Forum on Community Health (2011)
//waldo.villagesoup.com/p/camden-district-nurses-attend-forum-on-community-
1/446530
Bangor Daily News: This man knows how to keep Mainers healthy and happy at home (2017)
bangordailynews.com/2017/03/07/next/this-man-knows-how-to-keep-older-mainers-health/
appy-at-home/
ElderCare Network of Lincoln County, http://www.eldercarenetwork.org/homes-and-location
Full Circle America Empowered Aging, http://www.fullcircleamerica.com/packages.htm
est Practices Section} USC Leonard Davis School of Gerontology, http://www.homemods.org/
est Practices Section} NWCCOG Report: Northwest Colorado Council of Governments Rural Resc
n: Gap Analysis of Services for an Aging Population (2011)
/nwccog.org/wp-content/uploads/2015/03/RRR SeniorsGapAnalysis Jan2011.pdf
est Practices Section} NWCCOG Report (see above)
est Practices Section} Program for All-Inclusive Care for the Elderly (PACE)
//www.colorado.gov/pacific/hcpf/program-all-inclusive-care-elderly
est Practices Section} Health First Colorado – Colorado's Medicaid Program,
//www.healthfirstcolorado.com/
ing Sources Section Congressional Research Service: Funding for the Older American Act and
Aging Services Programs (2013), https://fas.org/sgp/crs/misc/RL33880.pdf
Aging Services Programs (2013), https://fas.org/sap/crs/misc/RL33880.pdf ing Sources Section Justia: 2016 Colorado Revised Statutes for the Older Coloradan's Act
Aging Services Programs (2013), https://fas.org/sgp/crs/misc/RL33880.pdf

3TRANSPORTATION
CHI: Driving to the Doctor: Transportation as a Barrier to Health
https://www.coloradohealthinstitute.org/research/driving-doctor-transportation-barrier-health
CHI Presentation to SAPGA: Expanding Transportation Options for Older Adults (2016)
https://www.colorado.gov/pacific/sites/default/files/Transportation%20Presentation%20SAPGA dist
<u>ribution.pdf</u>
Upper Arkansas Area Agency on Aging – Transportation
http://www.uaaaa.org/regional-services/transportation/
Via Paratransit, https://viacolorado.org/service/paratransit/
Silver Key Senior Services, https://www.silverkey.org/
SMARTRIDES in Greeley, CO, http://www.smart-rides.com/
Hendersonville, North Carolina – Walk Wise Program
https://www.hendersonvillenc.gov/walk-wise-program
{Key Best Practices Section} New Urbanism – Creating Livable Sustainable Communities,
http://newurbanism.org/
{Key Best Practices Section} Smart Growth, https://smartgrowthamerica.org/
{Key Best Practices Section} NWCCOG Report: Northwest Colorado Council of Governments Rural
Resort Region: Gap Analysis of Services for an Aging Population (2011)
http://nwccog.org/wp-content/uploads/2015/03/RRR SeniorsGapAnalysis Jan2011.pdf
{Funding Sources Section} Federal Transit Administration – Enhanced Mobility of Seniors & Individuals
with Disabilities – Section 5310
https://www.transit.dot.gov/funding/grants/enhanced-mobility-seniors-individuals-disabilities-
section-5310
{Funding Sources Section} NADTC – Grants and Funding
http://www.nadtc.org/grants-funding/section-5310/
{Funding Sources Section} Federal Transit Administration – Formula Grants for Rural Areas – 5311
https://www.transit.dot.gov/rural-formula-grants-5311
4SUPPORT FOR CAREGIVERS
Family Caregiving Fact Sheet,
http://www.caregiverresource.net/pdfs/Family Caregiving Fact Sheet.pdf
Primitive Ways – Meaning of Kupuna, http://www.primitiveways.com/kupuna.html
NBC News: Hawaii Passes Law to Ease Responsibility of Elder Care (2017)
I https://www.nbcnews.com/news/asian-america/nawaii-passes-law-ease-responsibility-elder-care-
https://www.nbcnews.com/news/asian-america/hawaii-passes-law-ease-responsibility-elder-care-n781941
<u>n781941</u>
n781941 LegiScan – Hawaii House Bill 607, https://legiscan.com/HI/text/HB607/id/1605431
<u>n781941</u> LegiScan – Hawaii House Bill 607, https://legiscan.com/HI/text/HB607/id/1605431 Colorado Department of Human Services – Aging and Disability Resources for Colorado
n781941 LegiScan – Hawaii House Bill 607, https://legiscan.com/HI/text/HB607/id/1605431 Colorado Department of Human Services – Aging and Disability Resources for Colorado https://www.colorado.gov/pacific/cdhs/aging-and-disability-resources-colorado
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LegiScan – Hawaii House Bill 607, https://legiscan.com/HI/text/HB607/id/1605431 Colorado Department of Human Services – Aging and Disability Resources for Colorado https://www.colorado.gov/pacific/cdhs/aging-and-disability-resources-colorado Program for All-Inclusive Care for the Elderly (PACE) https://www.colorado.gov/pacific/hcpf/program-all-inclusive-care-elderly PACE (see above) InnovAge , https://www.myinnovage.com/home
n781941 LegiScan – Hawaii House Bill 607, https://legiscan.com/HI/text/HB607/id/1605431 Colorado Department of Human Services – Aging and Disability Resources for Colorado https://www.colorado.gov/pacific/cdhs/aging-and-disability-resources-colorado Program for All-Inclusive Care for the Elderly (PACE) https://www.colorado.gov/pacific/hcpf/program-all-inclusive-care-elderly PACE (see above) InnovAge, https://www.myinnovage.com/home Older Americans Act
I LegiScan – Hawaii House Bill 607, https://legiscan.com/HI/text/HB607/id/1605431 Colorado Department of Human Services – Aging and Disability Resources for Colorado https://www.colorado.gov/pacific/cdhs/aging-and-disability-resources-colorado Program for All-Inclusive Care for the Elderly (PACE) https://www.colorado.gov/pacific/hcpf/program-all-inclusive-care-elderly PACE (see above) InnovAge, https://www.myinnovage.com/home Older Americans Act http://www.ncpssm.org/PublicPolicy/OlderAmericans/Documents/ArticleID/1171/Older-Americans-
n781941 LegiScan – Hawaii House Bill 607, https://legiscan.com/HI/text/HB607/id/1605431 Colorado Department of Human Services – Aging and Disability Resources for Colorado https://www.colorado.gov/pacific/cdhs/aging-and-disability-resources-colorado Program for All-Inclusive Care for the Elderly (PACE) https://www.colorado.gov/pacific/hcpf/program-all-inclusive-care-elderly PACE (see above) InnovAge, https://www.myinnovage.com/home Older Americans Act

11	Community Research Center for Senior Health – Evidence-based Programs for Seniors, http://evidencetoprograms.com/
4.5	{Inset 1} Boulder County Aging and Disability Resources,
12	https://www.bouldercounty.org/families/seniors/services/adrc/
13	{Inset 2} AARP – Caregiver Life Balance, https://www.aarp.org/caregiving/life-balance/
14	{Key Best Practices Section} PACE (see above)
15	{Key Best Practices Section} NWCCOG Report: Northwest Colorado Council of Governments Rural Resort Region: Gap Analysis of Services for an Aging Population (2011) http://nwccog.org/wp-content/uploads/2015/03/RRR SeniorsGapAnalysis Jan2011.pdf
16	{Funding Sources Section} Administration for Community Living – Applying for Grants, https://www.acl.gov/grants/applying-grants
17	{Funding Sources Section} Grants.gov FY2017 Lifespan Respite Care Program: Advancing State Lifespan Respite Systems https://www.grants.gov/web/grants/view-opportunity.html?oppld=293002
18	{Funding Sources Section} Supplemental Security Income 2017 Edition, https://www.ssa.gov/ssi/
19	{Funding Sources Section} Colorado Home Care Allowance (HCA) Program: Eligibility and Benefits https://www.payingforseniorcare.com/home-care/co-home-care-allowance.html
20	{Funding Sources Section} Colorado Respite Coalition – Grant Opportunities
	http://coloradorespitecoalition.org/resources/grant-opportunities/index.php
	5SOCIAL AND COMMUNITY ENGAGEMENT
1	Grantmakers in Aging – Communities and aging https://www.giaging.org/resources/gia-toolkit/building-communities-and-aging/older-adults-as-community-assets/
2	Open Culture Free Online Courses, http://www.openculture.com/freeonlinecourses
3	Create the Good Do-It-Yourself Project Guides, http://createthegood.org/how-to-guides
4	Senior Planet – Healthy Aging, https://seniorplanet.org/
5	Raging Grannies International, http://raginggrannies.org/locate-gaggle/
6	Senior Planet – The Freebird Club https://seniorplanet.org/the-freebird-club-a-new-airbnb-just-for-seniors/
7	{Key Best Practices Section} NWCCOG Report: Northwest Colorado Council of Governments Rural Resort Region: Gap Analysis of Services for an Aging Population (2011) http://nwccog.org/wp-content/uploads/2015/03/RRR SeniorsGapAnalysis Jan2011.pdf
8	{Key Best Practices Section} Corporation for National Community Service — Outreach Strategies for Successful Senior Volunteer Recruitment https://www.nationalservice.gov/resources/senior-corps/outreach-strategies-successful-senior-
	<u>volunteer-recruitment</u>
9	{Funding Sources Section} Administration for Community Living — Applying for Grants, https://www.acl.gov/grants/applying-grants
10	{Funding Sources Section} Grants.gov National Center on Elder Abuse https://www.grants.gov/web/grants/view-opportunity.html?oppId=291744
11	{Funding Sources Section} Grants.gov — Engagement and Older Adults Resource Center https://www.grants.gov/web/grants/view-opportunity.html?oppId=291691
	6HOUSING
1	Northeast Colorado Association of Local Governments (NECALG), http://www.necalg.com/
2	Housing & Building Association of Colorado Springs, https://www.cshba.com/what-we-do.html

	AARP Network of Age-friendly Communities
3	https://www.aarp.org/livable-communities/network-age-friendly-communities/info-2014/an-
	introduction.html
4	Sage Generation, http://www.sagegeneration.org/
5	Casa Del Sol – A Caring Retirement Community, http://www.casadelsollj.org/about.htm
6	Colorado Department of Human Services – Aging and Disability Resources for Colorado
U	https://www.colorado.gov/pacific/cdhs/aging-and-disability-resources-colorado
7	DHS Division of Aging Services – Atlanta Regional Commission Aging Division,
	https://aging.georgia.gov/
8	CDC Report: The State of Aging in America 2013 https://www.cdc.gov/aging/pdf/state-aging-health-in-america-2013.pdf
	{Key Best Practices Section} AARP Network of Age-friendly Communities
9	https://www.aarp.org/livable-communities/network-age-friendly-communities/info-2014/an-
_	introduction.html
10	{Key Best Practices Section} Strategic Action Planning Group on Aging (SAPGA) (2016),
	https://www.colorado.gov/pacific/sites/default/files/SAPGA-Nov-2016-Strategic-Plan.pdf
11	{Key Best Practices Section} SAPGA (see above)
	{Key Best Practices Section} NWCCOG Report: Northwest Colorado Council of Governments Rural Resort
12	Region: Gap Analysis of Services for an Aging Population (2011)
lene en	http://nwccog.org/wp-content/uploads/2015/03/RRR SeniorsGapAnalysis Jan2011.pdf
	{Funding Sources Section} Colorado Department of Local Affairs – Community Development Block
13	Grants (CDBG)
	https://www.colorado.gov/pacific/dola/community-development-block-grant-cdbg
11	{Funding Sources Section} Colorado Department of Local Affairs – Energy/Mineral Impact Resistance
14	Fund Grant (EIAF) https://www.colorado.gov/pacific/dola/energymineral-impact-assistance-fund-eiaf
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	7PREVENTIVE CARE
1	Mt. Carmel Health, Wellness & Community Center, http://mtcarmelcenter.org/
2	Mayo Clinic – Tai Chi: A Gentle Way to Fight Stress
	https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/tai-chi/art-20045184 CDC — Important Facts About Falls,
3	https://www.cdc.gov/homeandrecreationalsafety/falls/adultfalls.html
4	The Colorado Health Foundation, http://www.coloradohealth.org/
	The Colorado Health Foundation, http://www.coloradoHealth.org/
5	http://www.coloradohealth.org/funding-opportunities
_	Mt. San Rafael Hospital – Rural Health Clinic,
6	http://www.msrhc.org/getpage.php?name=Rural Health Clinic
7	Congressional Research Service – Older Americans Act: Background and Overview,
1	https://fas.org/sgp/crs/misc/R43414.pdf
Q	{Key Best Practices Section} CDC Report: The State of Aging in America 2013
8	https://www.cdc.gov/aging/pdf/state-aging-health-in-america-2013.pdf
	{Funding Sources Section} AARP Public Policy Institute: The Older Americans Act (2014)
9	https://www.aarp.org/content/dam/aarp/research/public policy institute/health/2014/the-older-
	americans-act-AARP-ppi-health.pdf
10	[Funding Sources Section] AARP Public Policy Institute: The Older Americans Act (2014) (see above)
11	{Funding Sources Section} The Colorado Health Foundation, http://www.coloradohealth.org/

12	\{Funding Sources Section\} Administration for Community Living – Falls Prevention \[\text{https://www.acl.gov/programs/health-wellness/falls-prevention} \]
	8INFORMATION AND EDUCATION
1	Denver Regional Council of Governments, https://drcog.org/programs/area-agency-aging
2	Colorado Department of Human Services – Aging and Disability Resources for Colorado https://www.colorado.gov/pacific/cdhs/aging-and-disability-resources-colorado
3	Colorado Department of Regulatory Agencies — Senior Healthcare/Medicare https://www.colorado.gov/pacific/dora/senior-healthcare-medicare
4	{Key Best Practices Section} Colorado Aging Framework: A Guide for Policymakers, Providers, and Others for Aging Well in Colorado (2015) https://www.colorado.gov/pacific/sites/default/files/Colorado%20Aging%20Framework%20FINAL%20-%20July%202015.pdf

	ADDITIONAL GRANTS COMMUNITY RESOURCE CENTER
	Community Resource Center, http://crcamerica.org/colorado-grants-guide/log-in/
1	Anschutz Family Foundation, anschutzfamilyfoundation.org/our-grantmaking/areas-we-fund/
2	AV Hunter Trust, http://avhuntertrust.org/
3	Boettcher Foundation, http://boettcherfoundation.org/capital-grant-locations/
4	Colorado Health Foundation, http://www.coloradohealth.org/
5	The Colorado Trust, http://www.coloradotrust.org/
6	Daniels Fund, http://www.danielsfund.org/Grants/Goals-Aging.asp
7	Department of Local Affairs – Division of Housing, https://www.colorado.gov/pacific/dola/types-
8	programs-we-fund
9	El Pomar, https://www.elpomar.org/programs/regional-partnerships/high-country-regional-council/
9	Jared Polis Foundation, http://jaredpolisfoundation.org/
10	U.S. Department of Agriculture Rural Community Development Initiatives https://www.rd.usda.gov/programs-services/rural-community-development-initiative-grants
11	U.S. Department of Agriculture Distance Learning and Telemedicine
11	https://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants
12	Western Colorado Community Foundation, http://wc-cf.org/nonprofits/grantmaking/
13	Western Colorado Community Foundation Western Colorado Health Fund
13	http://wc-cf.org/nonprofits/grantmaking/

Appendix B

FINAL STAKEHOLDE	R BRAINSTORMING
What Resources Do We Have?	What Resources Do We Desire?
 Senior Center – Meals on Wheels 3 days a week, some activities Senior Center – Mon-Thurs van (many do not know about this, need more communication). Rides are by appointment, mostly for medical appointments, rides to other counties or local. People don't want to be rushed. Great volunteers Service learning in the school School district access in LCIS gym (why don't we have access outside of the school year?) "A Little Help", https://www.alittlehelp.org/ AAA-Upper Arkansas Area Council of Governments (UAACOG) Physical activities Bike Trail and lighting on Mineral Belt Trail Parks, trails and fishing in town Aquatic Center Rec department with senior programs (needs better publicity) Community members with interests and knowledge Hospital Medical and health services Check-in, we have people that care Churches (meals), religious communities Bingo at the Elks (more would go if there was 	 A Robust Senior Center Number of drivers and hours available Monthly Book Club Adult programming Friday night movies Minister for help getting to church CMC – free for seniors CMC class and more students to volunteer High school – aging issues to help seniors Engaged with C4 Farm Connect with Center kids High school volunteers help with shoveling Crew to organize maintenance help (used to have crew around town) Senior discounts for home repair List of reliable folks registered with county and city Senior mentors at Full Circle Senior-only activities with businesses Getting seniors out to see nature Volunteer at animal shelter Sewer sanitation/ water insurance Do lodges have resources to help?

transportation)

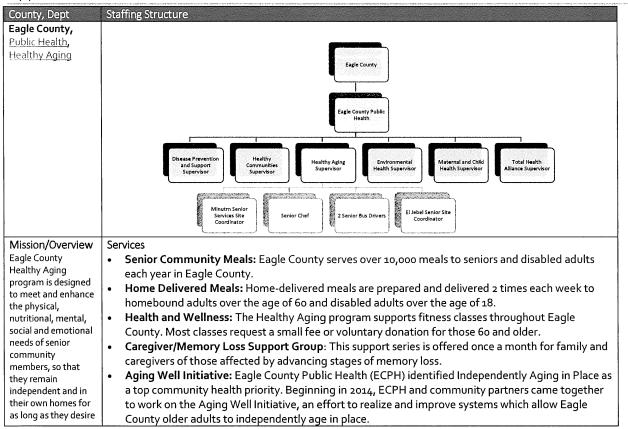
- Newspaper
- Library and CMC
- Quilt TQL Guild
- GOL! has in grant for a Youth Hub Community Center could create opportunity for senior interactions
- Summit Stage Bus (seniors might not know how to navigate) http://summitcountyco.gov/1027/Lake-County-Link
- Volunteering and serving on Boards (seniors may not know about them)
- We are a small enough community where we can have meaningful conversation

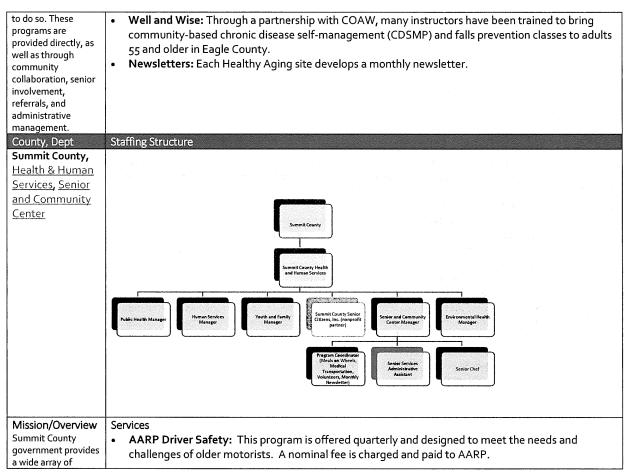
What Do We Need to Get To Our Vision?

- The AARP gave 10 best communities to live as seniors what were their criteria? What were those communities?
- Transportation: Senior Uber, local shuttle service
- Number of hours needed to drive seniors
- Senior housing and assisted living (example of Co-housing in Boulder)
- Volunteers are absolutely necessary (e.g., Americorp)
- Kids that need community service hours could shovel
- Ask the seniors what they can do for each other and community, they are big volunteers
- Inform some of the public places on How to?
- Calendar of events for seniors that is timely, bigger print, more pictures, not a lot of text
- Still debate over whether we need a Director, but possibly instead an Activities Director, Grant Writer, or Program Developer
- Director with staff to senior services, research and write grants Adopt a Golden Oldie, Seniors adopt a class
- Paid/Full-time people to work with seniors, run the SC, develop activities, initiatives, etc. senior services are underresourced, we need to expand capacity
- Social environment with radio channel (possibly hosted by CMC?), newspaper, post office posting
- Community leaders and seniors meeting with mayor, fire chief, etc.
- Foster grandparents seniors work with grandparents

- Church gathering for Friday night movies, "lock-in"
- Provide earlier times for older folks for music events
- Fire on the Mountain arts and crafts, activities other than physical
- Salida did a GoFundMe for digital projector to keep the theatre. Tabor Opera House for shows and theatres, safety and access improvements
- Ice Palace Park movies in the park
- Re: Huff n Puffers help organize an active group, increase outreach for how to join
- Space on Main St activity set up for participation, memorial benches, more seating, artistic thoughtful benches (inviting, thoughtful, provoking)
- Places to walk in the winter
- Clear the main sidewalks
- Increase awareness and classes offered at Aquatic Center
- Utilize the Climax Investment Fund
- Foundations: El Pomar, Guggenheim, Carnegie
- Partnerships for example the new effort to start nursing care in BV

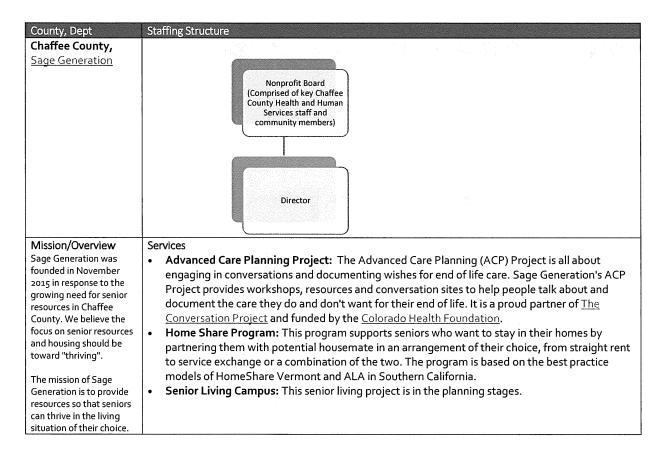
Appendix C

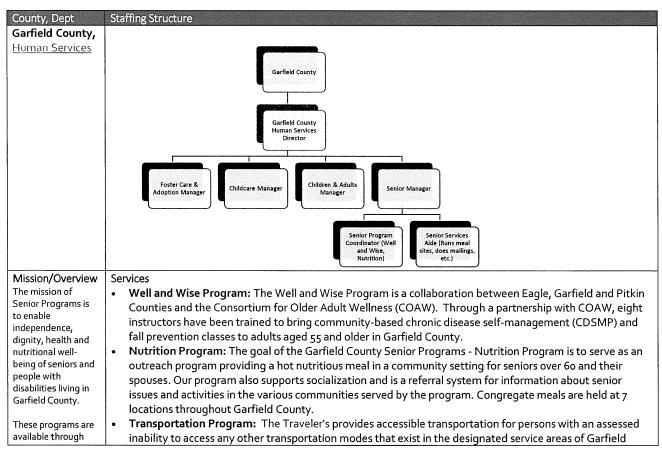


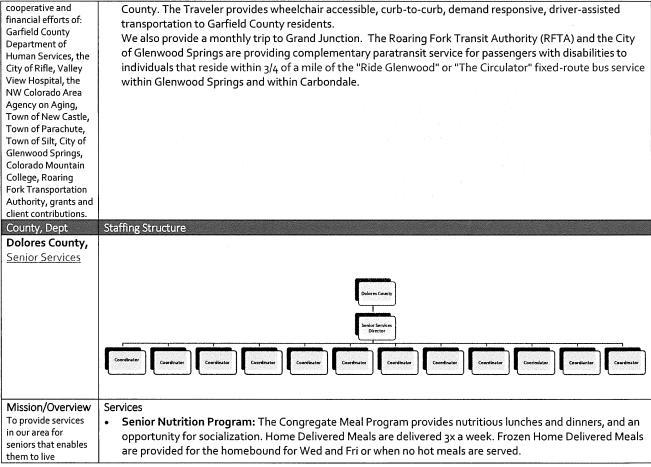


resources and services for local seniors, including assistance with health-related needs and legal services. **Summit County** Senior Citizens Inc. (SCSC) is the nonprofit partner of the Summit County Community & Senior Center. SCSC strives to improve the quality of life for its members and other senior citizens (those over 55) of SC by providing services and opportunities for residents and visitors for recreation, intellectual stimulation, physical activity, volunteering and sociability through programming and philanthropic endeavors both within the Summit County Community & Senior Center and in the greater community.

- Ask a Certified Financial Planner (CFP): A CFP is at the Center once a month to answer financial
 questions.
- Ask a Lawyer: A once-a-month, 10-minute opportunity to meet with an attorney to discuss legal
 issues.
- Care Navigation: Our one on one care navigation program provides consultation to help clients
 manage their needs, understand the resources available to them, and receive assistance with
 application processes.
- Caregiver Support Group: Meets once a month and is for those caring for a friend or family member.
- Dancing: Line Dancing and Square Dancing
- **Durable Medical Equipment:** Timberline Adult Day Services, located in the Community & Senior Center, has a selection of DME available as short-term loaners for folks recovering from surgical procedures or for rehab, including walkers, crutches, commodes, wheelchairs...
- Exercise Classes: Weekly exercise classes
- Fire and Fall Prevention: Summit County has partnered with Lake Dillon Fire Rescue to provide
 education, outreach and training to local seniors about preventing fires and falls in the home. Skilled
 trainers work with clients individually to identify fire-prevention and fall-prevention measures and
 behaviors.
- Free Balance Screenings: Screenings at the Center.
- In Home Assistance: Referrals to other organizations
- Medical Transportation: Volunteers drivers for those who need transportation to medical appts.
- Medicare Counseling: Trained volunteers available once a month to answer Medicare questions.
- Nutrition Services: In-house lunches and Monday Night Dinner as well as Meals on Wheels.
- Phone Tree: A volunteer phone tree set up for seniors who live alone and would like check in calls.
- Public Notary Services: The Senior Center can notarize important documents.
- Wellness Testing: Summit Medical Center offers lab tests (blood count, chemistry panel, lipid panel, PSA, and thyroid screening) at a significant savings.







independently, with dignity in their home as long as possible.

- Senior and Public Transportation: provides a Demand Response Transit service for area residents. A 24-hour notice is requested to schedule rides. Scheduling of rides is determined on a first call basis. In scheduling, medical access trips take precedence.
- Home Chore and Homemaker Program: Home Chore provides minor home modification and chore maintenance. Homemaker services provide light housekeeping services for the elderly in their homes.
- National Family Caregiver Program: provides information, assistance, respite care, and supplemental services to the Caregiver who is taking care of their loved ones at home.
- Health Promotion Programs: provide information, education, and support to participants to encourage small lifestyle changes to improve quality of life.
- Senior Health Insurance Programs: provides Medicare counseling for clients who need information and assistance to understand Medicare.
- Adult Resources for Care and Help: provides information and assistance, and options counseling for clients enabling them to remain independent as long as possible.
- Commodity Supplemental Food Program: provides once a month delivery of a food box to low income seniors.
- Outreach Services: includes a monthly newsletter and outreach on the Dolores County Web Site and DCTV, local TV station.

Appendix D

Lake County Public Health Department Aging Well Three-Year Action Plan

Note: Not everything in this plan may be implemented in three years; the LCPHA Director and Aging Well Coordinator will use their discretion to determine areas of greatest need and opportunity in which to work. The LCPHA Director and Aging Well Coordinator will work to determine a manageable scope of work that is both ambitious enough to bring about change and small enough in scope to be effectively accomplished.

SMP Focus Area	Goal	Tasks	Responsible Party	Possible Metrics	
All	Formalize all positions, organizational structures, and procedures	Improve job descriptions for existing employees: Ask employees to track time Use this information to more clearly identify what should be in each employee's job description Refine employee job titles as needed Clarify and communicate organizational structure and reporting structure Document current best practices at the institution in the following areas, among others: Onboarding Supervision Food Service Transportation Social Activities	LCPHA Director/Aging Well Coordinator	Job descriptions and titles refined Best practices identified	

All	Improve organization and coordination of senior services by instituting formal leadership	Develop a job description for a full-time Aging Well Coordinator; Advertise and Hire. Ensure Coordinator does the following (at minimum): Implements the LCPHA Aging Well action plan Coordinates with other local agencies to implement the Lake County Senior Master Plan Oversees all other Aging Well staff	LCPHA Director	Job Description developed; Coordinator hired
		Develop a job description for a part-time Programming/Volunteer/Transportation Coordinator; Advertise and Hire	Aging Well Coordinator	Job Description developed; Coordinator hired
All	Develop and manage a budget; raise additional	Develop a budget for Year One, as well as a three- year projected budget. Identify possible funding sources for three-year projection.	Aging Well Coordinator/ LCPHA Director	Budget and Budget Projections developed
	funding	Work to diversify funding, including researching and applying for grants, soliciting donations, etc.	Aging Well Coordinator	Additional grants applied for and received
All	Develop a plan for Senior Center use	Develop policies for Senior Center use; including hours, possible uses, rules for those attending	Aging Well Coordinator	Policies developed
	CCHIC. USC	Develop and implement a plan for improving the facility that includes the following: Cleaning and tidying the facility Developing a prioritized list of small capital	Aging Well Coordinator	Facility Improvement Plan developed and some tasks implemented

		projects to ensure maintenance and improvement of the facility Developing a long-term renovation or replacement plan		
All	Develop a marketing plan for Senior Services	 Develop a monthly written/mailed newsletter Develop a Facebook page Refine the website Develop marketing plan for other local and AAA senior services that uses multiple media platforms Develop a printed document on local senior services (possibly in conjunction with other agencies i.e., a Lake County Resource Guide printed by multiple agencies) 	Aging Well Coordinator	Marketing tools developed; # of senior citizens accessing resources increases
All	Develop a volunteer program	 Identify areas in need of volunteer support Develop policies and procedures for volunteers. Develop a marketing plan for volunteers Coordinate volunteers on a regular basis Examine the possibility of a "volunteer bank" model in which younger/healthier seniors can bank volunteer hours to be redeemed as they age or are ill or injured 	Aging Well Coordinator and Transportation/ Volunteer/ Programming Coordinator	Volunteer Program formalized
All	Work with local agencies	Check in regularly with local agencies on the projects they've committed to doing.	LCBAG/Aging Well Coordinator	Other agencies work on their

	to implement the Senior Master Plan across the community	Conduct an annual community meeting to discuss progress in implementing the Senior Master Plan		commitments to seniors; annual community meeting held
All	Develop a system to solicit feedback from local seniors about services.	 Regularly solicit feedback from seniors about current senior programs, using surveys, etc. Regularly collect other data that provides informal feedback about programming (i.e., user numbers, etc.) Regularly report feedback and proposed agency response to the Senior Advisory Board. 	Aging Well Coordinator	Surveys distributed and collected; other data collected. Data and proposed agency response reported to Senior Advisory Board regularly.
Access to Care	Ensure Lake County senior citizens have access to case management services	Identify whether we want to develop a new case management program or bring an existing one to Lake County Ensure that case management services include counseling on financing options Implement a case management strategy Market the availability of case management to senior citizens in the community	LCBAG/Aging Well Coordinator	Lake County senior citizens have access to case management services
Home Health Care and Services	Expand access to Home Care Services	 Develop and publish a list of trustworthy and vetted home care service providers Work to increase the number of home care 	LCBAG/Aging Well Coordinator	New home care service providers cultivated; list of

		service providers who serve seniors in the community		trustworthy home care service providers published
Transportation	Formalize Senior Center Transportation Program	 Refine policies and procedures originally developed by Lake County staff Clarify services provided (both on-demand and organized trips for shopping and entertainment) Develop a system/schedule for both ondemand and organized trips Develop drivers' schedules Clarify process for organizing entertainment/social trips Clarify process for requesting transportation services Continue to write grants to refresh the fleet of senior vehicles Market transportation services Formalize the driver volunteer program Work with Complete Streets Coalition to develop policies that will ensure a more walkable community for seniors 	Aging Well Coordinator, Transportation/ Volunteer/ Programming Coordinator	Development of clear system for ondemand and organized trips; updated fleet of vehicles
Caregiver Support		 Develop caregiver support education events, such as Information Fairs or Lunch n' Learns Ensure that information outreach is relevant 		At least one education event for caregivers is held

	to both Anglo and Latino cultures	
Social and Community Engagement	 Work with other agencies to formalize existing senior activities and develop new programming, including recreation, social trips and other social activities, classes, etc. Take into consideration programming that was previously offered by St. Vincent's long-term care program, such as reading volunteers and therapy dogs. Market activities for seniors Ensure that marketing is relevant to both Anglo and Latino cultures 	New programming is developed for seniors and existing programming is better organized, formalized and marketed
Preventive Care	 Evaluate meals served at the Senior Center/Meals on Wheels meals for their ability to meet the needs of seniors with restricted diets (i.e., seniors with hypertension or diabetes). Develop a plan to ensure that meals serve seniors with a variety of dietary needs. 	

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