

**Goals and Objectives for the Ten Domains**

**of an Age-Friendly DC by 2017**

*07-12-14 Draft*

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# Introduction

The Age-Friendly DC Initiative is part of an international effort launched by the World Health Organization (WHO) in 2007, to address two significant demographic trends: urbanization, and population aging. To help cities prepare for the convergence of these two trends, WHO developed the Global Age-Friendly Cities Project. WHO defined an Age-Friendly City as *an inclusive and accessible urban environment that promotes active aging.*

The WHO Age-Friendly Cities Project provides guidance for assessing local conditions and identifying improvements, in a five-year recurring cycle of planning, implementation, evaluation, and continual improvement.

WHO identified eight broad Domains – aspects of urban communities which influence the health and quality of life of older people living in cities – as tools for a city’s self-assessment. Concern about significant local issues led the District of Columbia to add two more Domains, for a total of ten.

**The Ten Domains**

1. Outdoor Spaces and Buildings - accessibility to and availability of safe recreational facilities.
2. Transportation - safe and affordable modes of private and public transportation.
3. Housing - wide range of housing options for older residents, aging in place, and other home modification programs.
4. Social Participation - access to leisure and cultural activities and opportunities for older residents to participate in social and civic engagement with their peers and younger people.
5. Respect and Social Inclusion - programs to support and promote ethnic and cultural diversity, along with programs to encourage multigenerational interaction and dialogue.
6. Civic Participation and Employment - promotion of paid work and volunteer activities for older residents and opportunities to engage in formulation of policies relevant to their lives.
7. Communication and Information - promotion of and access to the use of technology to keep older residents connected to their community and friends and family, both near and far.
8. Community Support and Health Services - access to homecare services, clinics, and programs to promote wellness and active aging.
9. Emergency Preparedness and Resilience, a DC focus - information, education and training to ensure the safety, wellness, and readiness of seniors in emergency situations. *A DC-added domain.*
10. Elder Abuse, Neglect, and Fraud, a DC focus - prevention and prosecution of financial exploitation, neglect, and physical, sexual, and emotional abuse of seniors. *A DC-added domain.*

**Assessing and Listening**

In 2012 Mayor Vincent C. Gray committed the District of Columbia to seek designation by the World Health Organization as an Age-friendly city. The Council of the District of Columbia unanimously supported proceeding and passed a resolution to that effect.

That year the DC Office on Aging (DCOA) completed a Senior Needs Assessment, the first since the 1970s, and adopted the New Community Living 2017 Strategic Plan. The first goal of the plan:

*The District of Columbia will be an “Age-Friendly City,” a community that is an inclusive and accessible urban environment that encourages active and healthy aging.*

In 2013 DCOA turned to The New York Academy of Medicine (NYAM), which serves as Collaborating Center for the World Health Organization Age-Friendly Global Project, for help organizing the DC effort. NYAM was asked to analyze and synthesize data collected for the 2012 DC Senior Needs Assessment, from participants at the May 2013 Senior Symposium, from the update by Mayor Vincent C. Gray in September 2013, from online and written surveys, and from more than 40 community consultations throughout 2013. NYAM reviewed the survey methodologies, and offered a set of recommendations covering several specific concerns: walkability, green spaces, housing renovation to accommodate elderly and disabled persons, and concern about crime and fraud.

In preparation for addressing issues surfaced through information collected from DC residents, then analyzed by NYAM, the District’s new Age-Friendly DC Task Force was appointed by the Mayor in October 2013, charged to develop a strategic plan incorporating resident-driven recommendations to improve security, increase independence, boost health outcomes, and enable more purposeful living for older adults in the District by 2017.

NYAM lauded DC for recognizing the importance of detailed data and discussion with older residents, to help inform initiatives to be taken in cooperation with city agencies and private sector partners, responding to issues identified in the Age-Friendly listening phase.

The NYAM report emphasized that, overall, DC residents are happy to live in the nation’s capital:

*In community consultations across the city, many older adults reported being largely satisfied with their lives as residents of the District of Columbia. In general, DC residents were pleased with the physical infrastructure of the city (parks, transportation, public buildings), the range of cultural and civic opportunities they have, and the care and support they receive (including social services and subsidized housing and meals). Many DC residents were proud to live in the nation’s capital and felt deep bonds with the city in which many had worked, raised families, and lived for many years… They were especially happy to have organizations like village.org, and an abundance of volunteers to help them out. Moreover, they felt that, unlike larger cities such as New York, DC is not so rushed, and “people are not so impersonal… it’s friendly.” One man emphasized that DC has more hospitals than other cities, and noted (as a caregiver for relatives) the convenience. Finally, they agreed that DC is a city where they can easily exercise, with many neighborhood pools, and with some senior centers equipped with gymnasiums.*

Within this favorable context, NYAM identified several “cross-cutting” concerns: neighborhood change squeezing out affordable housing, isolation, lack of political representation, the financial and physical burden on grandparents raising children.

**AARP Network parallel surveys**

In early 2012, the American Association of Retired People (AARP) selected seven states and the District of Columbia as initial members of a network of Age-Friendly Communities across the United States. Affiliated with the WHO program, AARP set out to encourage, educate and recognize communities seeking to improve the physical and social environments for older residents. In early 2013, the DC State Office of AARP, commissioned surveys of its members and volunteers on characteristics of an age-friendly community. Key findings include:

*Participating AARP DC members and volunteers:*

* *have lived in their neighborhoods a long time (more than half for more than 25 years) and want to remain there as they get older;*
* *want to live in neighborhoods that are safe, easy to get around and have opportunities for keeping fit;*
* *drive themselves, use public transportation or walk to get where they want to go in their neighborhood;*
* *vary in terms of their satisfaction with the safety of the streets in their neighborhood for pedestrians and bicyclists;*
* *would support a policy to ensure that their neighborhood roads are designed for all users.*

**Review of Findings by Knowledgeable DC Leaders and Academics**

In late 2013 and early 2014, groups of knowledgeable DC leaders and academics met and examined domain by domain the results of DC’s listening activities, the AARP surveys, and another smaller survey completed by The Beacon newspapers. Discussions familiarized stakeholders with reasons to prepare the city for its future with an ever-increasing number of older residents.

**Planning for Age-Friendly Changes**

The Age-Friendly DC Task Force met and discussed its planning and oversight roles. Task Force Committees were established, co-chaired by Task Force members or their designees. Using the results of the Age-Friendly DC survey and data collection, Age-Friendly DC Task Force Committees developed draft goals and objectives for each Domain. From their separate meetings, overarching issues emerged.

**Over-arching Issues from Domain Task Force Committee Reports**

***Housing***

Housing, and the rising cost of housing, emerged as one of the over-arching issues. Chief among important features were availability of a variety of housing options and services to help older and low income people with home repairs.

***Affordability***

Another overarching theme is affordability -- the cost of living. Several Domain Task Force Committees reacted to the voices of DC residents, who feel crowded out by wealthy (relatively) young professionals. Inadequate financial resources also appear in references to the need for subsidized transit, housing and other programs, and the need for expensive repairs and modifications to enable a frail senior to remain at home. The popularity of senior villages suggests that DC residents are willing to rely on one another to stay put, one strategy for muting the effects of poverty.

***Anticipating More Residents with Disabilities***

A stealth theme, found in both the NYAM report and the Domain teams' work, relates to the usually progressive weakness, frailty and vulnerability -- physically and mentally -- of most seniors. It is seldom mentioned specifically, but is implicit throughout. The consequences of this diminishing capacity appear not only in the Domain 1 Outdoor Spaces and Buildings and Domain 8 Community Support and Health Services reports, but are scattered throughout the others in references to accessibility, handicap parking, the challenge of stairs, limited knowledge of and access to social media, need for home health care, nursing homes, etc.

***Challenges for LGBTQ***

Concern for the LGBTIQ community appears in the NYAM report and several domain teams addressed it. The District of Columbia has been ahead of the curve on “marriage equality,” but many are still nervous about the social effects, and feel ignorant about what “gay-friendly” might mean. Like racism and sexism, heterosexism is still a potent cultural force.

**Next Steps**

The Age-Friendly DC Task Force is charged with developing city-wide recommendations for improvements and enhancements to transform the District of Columbia into an age-friendly city and recommend methods to chart the District’s progress. The Task Force will prepare a final set of recommendations to present to the Mayor in late September 2014.

In order to draft the recommendations, the Task Force was provided with a report of findings from community feedback gathered in 2012 and 2013. Task Force committees were formed for each of the 10 age-friendly domains. These committees invited additional public, private, and community representatives to weigh in on their domain-specific recommendations through the spring and summer of 2014. This draft document is a compilation of the community input and additional feedback and recommendations from the work of the committees.

The committees drafted their respective domain reports independent of each other and there is some variability to the content: some include vision statements, some of the recommendations appear under multiple domains, some domains include action steps and measures and some do not. Through the public comment period, we will continue to add community feedback and refine this draft document so that the Task Force can prepare the final recommendations for the Mayor.

# **Domain #1: Outdoor Spaces and Buildings** – accessibility to and availability of safe recreational facilities

**Open Spaces, Parks and Recreation**

***Value: Move – Encourage DC residents of all ages to lead active lifestyles.***

**Goal 1**: **Identify and reduce barriers to access**, improve sidewalks and increase transportation options that allow residents to connect to parks and open space.

**Goal 2**: **Ensure parks are equipped with benches**, **drinking fountains and restrooms**.

**Goal 3**: **Increase number of recreation programs** targeted toward older adults, particularly fitness and aquatics programs but also including arts and cultural programs.

Objective 3.1: By 2032, ensure all residents have access within ½ mile of their home to open spaces, natural places and free or low cost recreational opportunities through an adequate number of easily accessible and outdoor venues for physical activity.

Objective 3.2: By FY16, initiate a strategy for making opportunities for physical activity attractive to age 50+ people through welcoming, safe and fun spaces, resulting in at least 80% of residents rating their access to outdoor recreation as good or excellent.

Objective 3.3: Initiate expansion of Park Prescription programs to all ages, not just children, by FY15.

Objective 3.4: Create a city-wide parks and recreation guide for all ages, and highlight programming specifically for older adults by FY16.

***Value: Grow – Encourage personal growth, mental and social well-being across the life continuum.***

**Goal 4: Solicit input from DC residents 50+ for DC park plans**.

Objective 4.1: Within three years of adoption of this plan all residents will have had the opportunity to participate in development of a District-wide outdoor education plan.

Objective 4.2: By 2020, increase participation of DC residents 50+ in DPR surveys and outdoor opportunities to learn, nurture mental health and increase social cohesion through active programs, place-based information, creative placemaking and public art, and engaging interpretation of natural spaces, to increase satisfaction from 18 to 25%.

Objective 4.3: Encourage older residents to take advantage of opportunities by partners such as DPR, National Park Service, DC Commission of Arts and Humanities and nonprofits to produce unified information about sites, access, activities and programs.

***Value: Be Green – Increase opportunities for people to experience nature and learn about environmental stewardship.***

**Goal 5**: **Make natural spaces and healthy, outdoor environments more accessible** in the District.

Objective 5.1: By 2032, provide access to natural spaces within ½ mile of every home (pockets, slivers, pollinator pathways or other creative opportunities for natural settings).

Objective 5.2: Within 15 years increase natural features on DC properties by 40%.

Objective 5.3: Complete an inventory of active environmental stewardship programs within one year of adoption of this plan and work to increase those opportunities by 50% by 2020.

**Food Access and Security**

***Value: Nourish – Ensure aging populations have access to fresh, healthy and affordable foods on a daily basis.***

**Goal 6**: **Make healthy food more accessible** to low-income and low-mobility older adult populations by developing strategies to increase food retail, food donation, local agriculture, congregated dining, and/or meal delivery options, AND leveraging the District’s best use of federal and local nutrition programs and funds in four DC neighborhoods with the highest unmet needs (as identified in DC food deserts map).

Objective 6.1: By 2016, develop a plan to reduce food deserts in the 4 DC neighborhoods with the greatest needs.

Objective 6.2: By 2020, eliminate food deserts in DC.

**Goal 7**: **Enhance emergency food resources** and services by conducting a scan of the existing sources of food to be distributed to aging populations during emergencies; develop a strategy for reducing any existing waste, increasing supply, and/or increasing efficiency of delivery.

Objective 7.1: By 2015, develop plan for food access during emergencies.

Objective 7.2: By 2017, develop strategy to reduce food waste by 50%.

**Goal 8**: **Maximize efficiency and effectiveness of existing food resources** for low-income seniors by collaborating with nutrition services organizations, government agencies, faith-based institutions, and businesses, currently operating in DC, to identify strengths, limitations, and areas of overlap, and develop a strategy to enhance coordination and identify opportunities for synergy.

Objective 8.1: In 2015, convene meeting with stakeholders and elders to enhance coordination of food resources.

Objective 8.2: By 2016, develop city-wide resource guide for existing food resources for low-income elders and public.

**Built Environment and Resilience**

***Value: Community – Create neighborhoods with support networks, healthy buildings, and safe public spaces so that aging populations can stay in their homes and communities.***

**Goal 9: Identify, locate and reach special, vulnerable and at-risk populations in an emergency**.

Objective 9.1: By 2017, Create a Community Outreach Information Network (COIN).

**Goal 10: Ensure affordable, adequate and safe housing for all residents.**

**Goal 11: Maintain healthy homes for all residents.**

Objective 11.1: Adopt Enterprise Green Communities Universal Design criteria.

Objective 11.2: Adopt visitability standards for new buildings and retrofit older buildings to ensure buildings can be visited.

Objective 11.3: Provide adequate lighting to create safe and secure buildings.

Objective 11.4: Ensure emergency services can access elder resident's homes.

Objective 11.5: Provide adequate parking for older adults and persons with disabilities.

**Goal 12: Ensure buildings meet the seven HUD principles of healthy housing** (dry, clean, pest and contaminant-free, safe, ventilated, and maintained) to protect all residents, including children during their first 1000 vulnerable days.

Objective 12.1: By 2017, adopt the National Healthy Housing Standard to ensure that existing residential properties in DC meet minimum health and safety standards.

Objective 12.2: By 2020, develop and implement Green Building Codes for retrofitted buildings.

**Goal 13: Be Resilient - Prepare for the Consequences of Climate Change**

Objective 13.1: By 2017, require use of mold-resistant gypsum board and cement board in moisture-prone locations during new construction or substantial renovation of residential housing.

**Goal 14: Create Walkable Neighborhoods and Safe crossings**

Objective14.1**:** Ensure streets and transit stops include age-friendly, strategically placed benches.

Objective 14.2: Ensure elders are able to connect to services through sidewalk, street and transportation connectivity.

# **Domain #2: Transportation** - safe and affordable modes of private and public transportation.

**Goal 1. Transportation Safety: Travel within the District will be safe for travelers of all ages and abilities, particularly seniors, on all modes.**

Objective 1.1: Implement recommendations in the DC Strategic Highway Safety Plan to improve safety overall and get to zero deaths.

Objective 1.2: Maintain sidewalks and crosswalks in good condition, including through the use of new materials and construction techniques and working to balance historic preservation, access, and safety.

Objective 1.3: Design crosswalks and program traffic control devices for improved safety and convenience of pedestrians and cyclists. [linked to Sustainable DC]

Objective 1.4: Explore sustainable funding sources for sidewalk maintenance and construction.

Objective 1.5: Provide training and public awareness for all modes to reduce conflicts and improve traveler safety and comfort.

Objective 1.6: Enforce transportation regulations to ensure safe travel for seniors within the District.

Objective 1.7: Update signs for evacuation routes and dead ends streets.

**Goal 2. Walkability and Accessibility: Senior residents have multiple options to access goods and services in their neighborhood and across the city.**

Objective 2.1: Provide a pleasant and safe walk experience by providing sidewalks on at least one side of the street, maintaining them in good condition, and providing appropriate street furniture as part of streetscape projects.

Objective 2.2: Ensure that transit is a viable travel option for seniors in terms of service frequency, bus stop location, connectivity, accessible pathways to bus stops, and to and within transit stations, and adequate lighting in transit stations and at bus stops.

Objective 2.3: Explore payment options for making a range of modal choices convenient and available and ensure that they are affordable at all income levels.

Objective 2.4: Connect with housing and economic development efforts to ensure that land use patterns support aging in place with affordable housing near travel options and goods, services, and community institutions in neighborhoods. [cross-sector]

**Goal 3. Communications and Traveler Information: Seniors will have the information they need to make informed travel choices.**

Objective 3.1: Provide travel information via multiple channels (both low tech and high tech) and in multiple locations to ensure maximum awareness of all travel options, including through a one-call, one-click system.

Objective 3.2: Work with businesses and community institutions to provide customized multimodal travel information for seniors, including real-time.

Objective 3.3: Provide training and mobility management that introduces seniors to different travel options to ensure they can use the broadest range of modes and make cost-effective, efficient choices.

Objective 3.4: Work with broader communications efforts to ensure that transportation information is included.

**Goal 4. Transportation Operations: Seniors will have the information they need to make informed travel choices.**

Objective 4.1. Coordinate between service providers and for hire vehicles within the District and across the region to ensure efficient, cost-effective modal choices for customers.

Objective 4.2. Improve system reliability through real-time awareness of incidents, faster response, and making assets less vulnerable.

Objective 4.3. Ensure that transportation emergency response plans take into account the needs of vulnerable populations and that those plans are communicated to those populations.

Objective 4.4. Improve system flows between and within transportation modes (within transit stations, signal priority between modes).

Objective 4.5. Provide seamless payment options between different service providers.

Objective 4.6. Include seniors on advisory committees for all modes and providers.

# **Domain #3: Housing** - wide range of housing options for older residents, aging in place, and other home modification programs.

***Vision: As the senior population of DC continues to grow, the City will ensure that a continuum of living options exists, including the option to age in place, and that the necessary services are in place to support these options.***

**Goal 1: Support aging in place.**

Objective 1.1: Support the DC Department of Health Care Financing in implementing the necessary steps to start PACE within the targeted timeline, i.e. the application, submission, and approval of a state plan amendment and the creation of a Request for Application/Request for Proposal by DC and the selection of a provider in response to the requests. Implement the Program of All-Inclusive Care for the Elderly (PACE) upon Federal approval.

Objective 1.2: Act on the recommendations listed below of the Single Family Residential Rehabilitation Program and Handicapped Accessibility Improvement Program Task Force, which includes representatives from DHCD, DCHF, AARP-DC, DC Free Falls Coalition, DCOA, and Legal Counsel for the Elderly.

Objective 1.3: Eliminate the need for renters to apply to Handicapped Accessibility Improvement Program (HAIP) program for environmental adaptation

Objective 1.4: Eliminate the need for renters in need of environmental adaptations to move through the HAIP eligibility process.

Objective 1.5: Include occupational therapy (OT) home assessment for accessibility requests

Objective 1.6: Create an expedited, capped program to address immediate accessibility/safety needs. For example, modifications up to $7,500 would be eligible.

Objective 1.7: Housing (four units or less) that is using District funds to address code remediation or other rehab should be assessed for accessibility needs to facilitate aging in place.

Objective 1.8: Expand the Single Family Residential Rehabilitation Program to include funding for reasonable modifications for seniors with a disability in rental properties. This recommendation would provide funding for such structural changes in properties without Federal assistance. In addition to providing funding for reasonable modifications for seniors with a disability, funding could also be made available for modest modifications for seniors who did not meet the applicable disability definition.1

Objective 1.9: Implement changes to DC Zoning Law recommended by the Office of Planning in their September 2012 draft zoning revisions that would permit accessory dwelling units (ADUs, or “granny flats”) by right in most residential zones, with certain restrictions.

Objective 1.10: Explore home-sharing as a strategy for enabling older adults who are physically, mentally and emotionally capable of maintaining their residency in a safe and mutually beneficial partnership.

**Goal 2: Improve access to and availability of assisted living, supportive and affordable housing options.**

Objective 2.1: Encourage preservation and improvement of existing, affordable senior housing proximate to mass transit (bus or metro).

Objective 2.2: Consider using Housing Production Trust Funds to produce new affordable, transit-oriented, universally designed units that are welcoming to all seniors and supportive of special needs populations.

Objective 2.3: Ensure consistent enforcement of the Fair Housing Act. Review impediments and recommendations included in the District of Columbia Analysis of Impediments to Fair Housing Choice 2006-2011, paying particular attention to Impediments 6, 8, and 9 and the associated recommendations. (Impediment 6 relates to accessory dwelling units; impediment 8 relates to ensuring the planning process complies with the Fair Housing Act and Americans with Disabilities Act; Impediment 9 addresses community-based residential facilities.)

Objective 2.4: Amend Medicaid waiver and/or State Plan to promote real assisted living options for low income seniors and promulgate more realistic Medicaid reimbursement rates that are high enough to attract investment and flexible enough to provide for seniors with greater ADL needs.

Objective 2.5: Devote more units to assisted living.

Objective 2.6: Investigate opportunities to use “Pay for Success” partnerships, such as the assisted living model being pursued by Ohio-based National Church Residences, to take on the financial risk of expanding permanent housing and assisted living, as described above.

Objective 2.7: Champion and advance a revised version of the visitability bill that was developed in consultation with developer and advocate communities that requires first floor bathrooms, 31.75 inch doorways, zero step entryways, and accessible controls and is on par with neighboring jurisdictions' visitability requirements and incentives.

Objective 2.8: In those projects where inclusionary zoning goals apply, 5% of the set asides should be suitable for households where at least one member is 60 years of age or older and the household’s income is at or below the appropriate thresholds.

Objective 2.9: Recognizing that older LGBTQ residents still face unwelcoming environments in age-friendly housing settings, ensure that a range of safe, welcoming housing options exist for LGBTQ residents across the continuum of housing needs for aging populations.

Objective 2.9.1: Recognizing that older LGBTQ residents still face unwelcoming environments in age-friendly housing settings, ensure that a range of safe, welcoming housing options exist for LGBTQ residents across the continuum of housing needs for aging populations.

Objective 2.9.2: Encourage development of new group (congregate) or other age-friendly housing projects that are committed to welcoming and including LGTBQ seniors and work with operators of existing housing to create more welcoming environments.

**Goal 3: Maximize awareness and utilization of age friendly housing opportunities through education**

Objective 3.1: Charge a position or office with responsibility for the above function, and ensure this entity is adequately resourced and empowered. Consider direct reporting lines to the Deputy Mayors of Health and Human Services and Planning and Economic Development. This entity could lead or support many of the recommended actions below.

Objective 3.2: Ensure greater awareness and increase utilization of programs and tax expenditures available to seniors

Objective 3.3: Increase awareness of changes to the Property Tax Credit made in 2014 and its applicability to and utilization by renters.

Objective 3.4: Require housing-related agencies to conduct affirmative marketing of affordable, safe, and welcoming housing options to LGBTQ seniors and other groups as needed.

Objective 3.5: Provide training for managers of existing publicly-owned and private projects (including those tenant-owned projects) in resources available and best practice strategies for dealing with needs of aging residents, including LGTBQ cultural competency training.

Objective 3.6: Utilize home inspectors and HUD certified housing counselors to train older adults on how to avoid and prevent home repair scams from unscrupulous contractors.

Objective 3.7: Require continuing education on aging in place, and universal design for architects and designers working in related areas.

Objective 3.8: Stimulate increased use of volunteering, possibly using tools such as timebanks and service learning programs, to improve services available to older adults to support aging in place and address issues affecting all ages.

Objective 3.9: Use an intergenerational lens to review existing timebank activities in DC and insert intergenerational language to encourage time exchanges across generations.

Objective 3.10: Build partnerships with local universities and professional associations to leverage pro bono design services and support that encourage universal design and aging in place. Consider the following possible opportunities: facilitate design competitions with students and/or professionals, create a fellowship program that pairs students with community based organizations, and generate research that informs design and production of age-friendly housing.

# **Domain #4: Social Participation** - access to leisure and cultural activities and opportunities for older residents to participate in social and civic engagement with their peers and younger people.

**Goal 1: To bolster and promote continuing education and learning for older adults in the District of Columbia.**

Objective 1.1: Assess current vocational and avocational opportunities for older adults in the District of Columbia

Objective 1.1.1: Identify current opportunities

Objective 1.1.2 Determine gaps, strengths, weaknesses

Objective 1.1.3: Identify potential and existing stakeholders

Objective 1.2: Overcome barriers to expanding access to education and learning opportunities for older adults

Objective 1.2.1: Ensure participation across cultures

**Goal 2: Establish and strengthen vocational opportunities** for older adults

Objective 2.1: promote/publicize vocational opportunities to older adults

Objective 2.2: maximize technology to expand learning opportunities for older adults

**Goal 3: Establish and strengthen avocational opportunities for older adults**

Objective 3.1: develop intergenerational opportunities

Objective 3.2: promote/publicize avocational opportunities to older adults

Objective 3.3: maximize use of technology and facilitate learning of that technology

**Goal 4:** **Strengthen, develop, and promote arts, recreational and leisure activities for older adults (ARL= Arts, Recreation and Leisure)**

***Definition of Older Adults:*** *older adult retirees, working older adults, homebound older adults, residents in long-term care, non-English speakers, older adults in the LGBTQ community, differently abled older adults*

Objective 4.1:Assess current arts, recreational, and leisure opportunities for older adults.

Objective 4.1.2: Determine gaps in services, strengths, weaknesses

Objective 4.2. Increase/Enhance access to arts, recreational and leisure opportunities for older adults

Objective 4.2.1: Develop quality transportation systems

Objective 4.2.2: Develop culturally, linguistically, and technologically appropriate opportunities

Objective 4.2.3: Make programming affordable

Objective 4.2.4: Expand ADA Accessibility to all programs

Objective 4.3: Strengthen and Expand ARL opportunities

Objective 4.3.1: Create participatory, not just passive opportunities

Objective 4.3.2: Create intergenerational opportunities

Objective 4.3.3: Create neighborhood based opportunities

Objective 4.4: Market ARL activities to promote health and well-being for older adults

Objective 4.5: Evaluate ARL programs, assessing degree to which they are:

Objective 4.5.1: Relevant

Objective 4.5.2: Accessible

Objective 4.5.3: Affordable

Objective 4.5.4: Culturally competent

**Goal 5: Strengthen, promote and develop voluntarism among older persons and promote volunteer opportunities for them.**

Objective 5.1: **Assessment**

Objective 5.1.1:Assess the nature and extent of volunteering among the city’s older population

Objective 5.1.2: Assess the kinds of volunteer opportunities open to older persons

Objective 5.1.3: Identify needs, gaps and make recommendations for next steps

Objective 5.2: Develop a volunteer clearinghouse in the District whose mission is to match elders with volunteer opportunities

Objective 5.2.1: Promote streamlined volunteer application and matching process

Objective 5.2.2**:** Promote volunteering among older persons:

Objective 5.2.3: publicize research on benefits of volunteering;

Objective 5.2.4:: make volunteering “affordable” by exploring time -bank arrangements and/or providing stipend to low-income persons

Objective 5.2.5: enhance transportation opportunities

Objective 5.2.6: organize neighbor-hood-based volunteer opportunities

Objective 5.2.7explore volunteer potential of homebound and institutionalized populations

Objective 5.2.8: provide a broad range of volunteer opportunities to address many skill levels

Objective 5.2.9: create and distribute volunteer handbooks directed to seniors

Objective 5.2.10: promote volunteerism through city-wide volunteer expo

Objective 5.2.11: provide recognition of model volunteers on an annual basis

Objective 5.3: Promote volunteering among potential users:

Objective 5.3.1: The Mayor should ensure all Boards and Commissions reflect the age-diversity of DC (unless the specified membership criteria requires otherwise)

Objective 5.3.2: Promote programs that provide multi-generational benefits—*e.g*., DC Public Schools should explore the use of older volunteers in classroom settings

Objective 5.3.3: Civic and senior organizations should actively recruit seniors to apply for all Boards and Commissions, including ANCs

Objective 5.3.4: publicize research on the benefits of using older volunteers

Objective 5.3.5: promote networking between organizations that use older volunteers and those who haven’t

Objective 5.3.6: promote information on volunteerism at retirement exit interviews

Objective 5.3.7: create and distribute volunteer handbooks directed to “employing” agency

Objective 5.3.8: provide recognition of model volunteer employers on an annual basis

# **Domain #5: Respect and Social Inclusion** - programs to support and promote ethnic and cultural diversity, along with programs to encourage multigenerational interaction and dialogue.

***Mission Statement. Foster and sustain a culture that is empowering, understanding and accepting of older adults within the fabric of Washington, D.C.***

**Goal 1. Empower: expand programs and services that promote and empower older adults to thrive.**

Objective 1.1: Expand older adult-only times at activities, services, and programs (i.e. older adult hours at pools)

Objective 1.2: Increase programs and services specifically and exclusively for designated groups in the older adult population (i.e. LGBT specific dances, book clubs in different languages, etc.)

**Goal 2. Elevate: increase social and economic partnerships that engage older adults.**

Objective 2.1**:** Establish a program that assists businesses to communicate age friendliness (i.e. certificate)

Objective 2.2: Increase older adult discount opportunities

Objective 2.3: Establish a comprehensive public relations campaign and training initiatives that promote respect and inclusion, and engage older adults and their families.

**Goal 3: Inclusion: expand education and communication efforts that promote respect and a better understanding of older adults’ presence and contributions in the community**

Objective 3.1: Increase cultural sensitivity training in the community and work place

Objective 3.2: Increase older adult visibility in ad campaigns

Objective 3.3: Expand intergenerational connectivity through DC Schools

**Goal 4 Access: improve community infrastructure that increases opportunities for aging in place**

Objective 4.1: Expand one-stop resource center for older adults to include searchable list of age friendly businesses and programs

Objective 4.2: Improve government services and facilities to address older adults (i.e. designated lines at DMV and Libraries)

Objective 4:3: Expand business and government outreach and communication efforts to seniors

# **Domain #6: Civic Participation and Employment** - promotion of paid work and volunteer activities for older residents and opportunities to engage in formulation of policies relevant to their lives.

Goal 1: Promote the benefits of elder employment and entrepreneurship.

Objective 1.1: Communicate the value of older workers to employers

Objective 1.2: Provide training for older workers to complete online employment applications

Objective 1.3. Inform employers of potential senior employees via a newsletter

Objective 1.4: Adopt a campaign slogan such as, “BRAVO for Seniors”: Businesses Receive And Value Cooperating” with seniors

Objective 1.5: Using social media, promote the value of older workers to the business community

**Goal 2: Increase full- and part-time employment and entrepreneurial opportunities for elders.**

Objective 2.1: Engage the business community in identifying home-based, part-time employment opportunities using communication technology

Objective 2.2: Educate seniors on the rules regarding Social Security benefits and working; partner with OHR to educate seniors on their rights on Age Discrimination and resources available to help them.

Objective 2.3: Ensure older adults are aware of how to start new businesses, and provide them small start-up loans/grants

Objective 2.4: Coordinate with the business community to foster opportunities for elder employment, especially job sharing

Objective 2.5: Increase the capacity of the SCSEP program, and engage non-government organizations in identifying potential participants with high employment potential

Objective 2.6: Engage senior-volunteers, churches and service organizations (NGO) to help identify unemployed seniors with high employment potential

Objective 2.7: Provide additional resources to DOES and DCHR, dedicated to senior employment. Create customized programs in order to prepare older workers for government positions, i.e., Grades 5 & 7 to ensure benefits are not affected.

Objective 2.8: Actively seek job opportunities for which transgender individuals may be uniquely qualified (e.g. home care for LGBT clients; LGBT-owned businesses)

Objective 2.9: Recruit older adults for internships and apprenticeships (including government.)

Objective 2.10: Investigate how employers who make concerted efforts to hire seniors can be exempted from State/Federal discrimination laws (similar to how residences dedicated to seniors have been exempted)

**Goal 3: Improve the job application and business formation process for elders.**

Objective 3.1: Decrease the number of jobs requiring face-to-face interviews (more phone interviews)

Objective 3.2: “Age-Friendly” employers should make concerted efforts to hire employees who are age-diverse

Objective 3.3: Increase communication to the transgender community about employment

Objective 3.4: Business community should adopt standard, streamlined employment applications for seniors (supplemented by company-specific items)

Objective 3.5: Provide training programs for entrepreneurs dedicated to seniors, perhaps taught by senior “mentors”

# **Domain #7: Communication and Information** - promotion of and access to the use of technology to keep older residents connected to their community and friends and family, both near and far.

**Goal 1: DC residents will have access to information important to them in a timely manner and via their preferred medium or media.**

Objective 1.1**:** Review existing data (or collect data, if not currently available) on the types of media DC residents use, how they use them, and which are preferred by different age groups*.* Regularly update this data via surveys as needed.

Objective 1.2: Target communications through a variety of media formats (print, television, radio, digital) to reach all residents. Develop standards for each medium to ensure understanding and readability by older adults.

Objective 1.3:Develop email list-serves for emergency, traffic, senior-specific and other types of important communications, and invite residents with email accounts to opt in by Ward or neighborhood, as well as age and interest.

Objective 1.4: Communications (whether print or digital) should be made available in the languages most commonly used by DC residents, as well as in formats suitable for those with no or low vision and other types of disability.

**Goal 2: DC residents will have ready access to current information about services and resources available to assist older adults and their caregivers.**

Objective 2.1: Print an annual information and resource guide that is easy to use, inexpensive to print and distribute, and can be funded through advertising.

Objective 2.2:Develop and maintain an online resource guide that is regularly updated and can serve as a template for each year's printed guide. It should also be funded through advertising.

Objective 2.3: Recruit and train contacts at existing community facilities (senior wellness centers, recreation centers, libraries, villages, faith-based and other organizations and clubs, etc.) to communicate with older residents as intermediaries.

Objective 2.4**:** Explore additional methods to reach socially isolated seniors through formal and informal community representatives, such as village volunteers, callers and home visitors, homecare workers, hairdressers/barbers, as well as through television, radio and print public service announcements. Consider developing interactive electronic kiosks or billboards for malls, office buildings and other public locations.

**Goal 3: Older DC residents will have access to, and be able to use, advanced, emerging and assistive technologies, including computers, smartphones and tablets, wireless, fiber and digital technologies, and software applications.**

Objective 3.1: Train older DC residents in technologies and devices using existing institutions, including libraries, senior centers, nonprofits and other organizations that offer technology education.

Objective 3.2: Train the trainers in appropriate techniques for teaching technology to older adults.

Objective 3.3: Provide low-cost broadband to low-income seniors, as well as readily available public access at little or no charge.

Objective 3.4: Provide advanced technology, including broadband service, devices and software, to low-income seniors at low cost.

# **Domain #8: Community Support and Health Services** - access to homecare services, clinics, and programs to promote wellness and active aging.

***Mission Statement: For private, non-profit and DC government entities, to meet the demands of a growing and changing older population, at various levels of engagement, in need of health and behavioral, wellness and preventative, residential and home care supports and services, by expanding capacity, access, sensitivity, and effectiveness to achieve better health outcomes.***

**Goal 1: Health and Behavioral Services: to increase consumer awareness of and access to primary and behavioral care and immediate health services and equipment.**

Objective 1.1 Increase awareness by promoting:

Objective 1.2: Transparent information regarding quality of care in hospitals, nursing homes, assisted living facilities and by individual providers

Objective 1.3: Explanations regarding billing, medical reports, and fraud identification

Objective 1.4: Assistance with finding the right healthcare providers and health care products

Objective 1.5: Identify and inform the public about providers who accept Medicare and Medicaid

Objective 1.6: Cultural sensitivity training for healthcare providers, family caregivers, and EMS to treat older adults (including LGBT older adults)

Objective 1.7: Improve access to health care services

Objective 1.7.1: Align public policies to ensure maximum access to community-based care and services

Objective 1.7.2: Increase access to transportation for patients with physical and behavioral health issues

Objective 1.8: Increase range of care options for older people including:

Objective 1.8.1:Adult day centers

Objective 1.8.2: Care for persons with cognitive impairments

Objective 1.8.3: Mental/behavioral health services

Objective 1.8.4: Respite care for caregivers

Objective 1.8.5: Rehabilitation, hospice, and palliative care

Objective 1.8.6:Hospital discharge planning and execution

Objective 1.8.7: Encourage increased supply of durable medical equipment, and better access in public spaces (e.g. Wheel chairs, Walking frames; Hearing and vision aids, Other adaptive equipment)

Objective 1.9: Advocate for barrier-free structures for health service centers, for easy accessibility

Objective 1.10: Improve and increase use of crisis and health emergency telephone services, medical alert systems, and telemedicine facilities for older adults, especially those living alone

Objective 1.11: Increase/establish shelter and protection services exclusively for homeless and abused older adults

Objective 1.12: Expand the Long-Term Care Ombudsman program to serve all clients residing in nursing homes, assisted living facilities, and Medicaid-funded home care services

**Goal 2: Wellness and Preventative Services: to promote livability and activity in the community.**

Objective 2.1: Increase livability in the District of Columbia

Objective 2.2: Promote nutritious meal and grocery services, and stores with healthy foods

Objective 2.3: Insure access to affordable vaccines

Objective 2.4: Increase professional and life-long learning opportunities

Objective 2.5: Increase evidence-based falls prevention programs

Objective 2.6: Support programming for disease prevention, health promotion and wellness

Objective 2.7: Health-awareness

Objective 2.7.1: Preventive screening

Objective 2.7.2: Vision and hearing care

Objective 2.7.3: Nutritional guidance, grocery distributions

Objective 2.7.4: Behavioral health counseling

Objective 2.7.5: Physical activity promotion

Objective 2.7.6: Support groups (i.e. Diabetes, etc.)

Objective 2.7.7: Social and recreational activities

Objective 2.8: Develop substance abuse programs specifically targeting older adults

Objective 2.9: Increase public awareness of elder abuse and neglect, and of reporting methods

Objective 2.10: Increase access to and the number of affordable and Medicaid-approved assisted living facilities in DC

Objective 2.11: Develop opportunities for adult foster care

Objective 2.12: Increase level of activity among DC seniors

Objective 2.13: Increase peer support and counseling services

Objective 2.14: Encourage partnerships with religious institutions and communities to develop

Objective 2.15: programs, including spiritual support and counseling

Objective 2.16: Ensure older adult populations most susceptible to cultural and social isolation

Objective 2.17:have programs and venues that target their needs (i.e. blind, API, Latino, LGBT, etc.)

Objective 2.18:Increase the capacity and operating hours of existing senior wellness centers

Objective 2.19: Ensure that all new and existing senior wellness centers have up-to-date designs and capabilities, and offer all essential services and technologies for people living with disabilities

Objective 2.20:Increase access to affordable fitness centers and equipment

Objective 2.21: Increase access to literacy and educational opportunities

**Goal 3: Residential and Home Care Services: improve safety and support structures in and around the home, and increase connectivity.**

Objective 3.1: Evaluate existing support and services contributing to age-friendly housing.

Objective 3.1.1: Increase access to affordable, universal design housing

Objective 3.1.2: Increase the number of moderate and low income affordable housing units available to older adults

Objective 3.1.3: Increase emergency rental assistance programs (i.e. E-RAP)

Objective 3.1.4: Increase financial assistance with utilities for older adults with low income (i.e. LIHEAP)

Objective 3.1.5: Support programs to provide additional assistance with non-medical needs

Objective 3.1.5.1: Light house cleaning

Objective 3.1.5.2: Shopping

Objective 3.1.5.3: Meal preparation and grocery delivery

Objective 3.1.5.4: Non-emergency Medical transportation

Objective 3.1.5.5: Expand home services for physiotherapy and psychological counseling

Objective 3.1.6: Include pharmacists in home-visit teams, to identify and remove expired medications

Objective 3.1.7: Improve quality of home care services:

Objective 3.1.7.1: Place case-managers in convenient locations, easily accessible to clients (walkable)

Objective 3.1.7.2: Increase number of case managers and professional supervisors for home care workers

Objective 3.1.7.3: Establish a maximum client caseload for case managers, and modify staffing standards accordingly

Objective 3.1.7.4: Decrease time between hospital discharge and caregiver’s first visit

Objective 3.1.8: Develop integrated/coordinated case management systems, including tracking

Objective 3.1.8.1: Reduce fraud by increased monitoring/accountability of home care agency services

Objective 3.1.8.2: Systematic monitoring of home care workers’ performance, skills and educational levels

Objective 3.1.8.3: Revise and update home care agency licensure standards to reflect industry standards

Objective 3.1.9: Increase the number of medical house call programs (i.e. Washington Hospital Center)

Objective 3.1.10: Improve transition from nursing facilities and hospitals back to the community

Objective 3.1.10.1: Improve the networks, human and technological, that connect older residents, especially those living alone.

Objective 3. 1.10.1: Increase intergenerational opportunities through volunteerism

Objective 3. 1.10.2: Provide access and training around technology (i.e. software, devices.)

Objective 3. 1.10: Increase access to internet and affordable computers

Objective 3. 1.10.4: Increase the number of senior villages and ensure all are sustainable

Objective 3. 1.10.5: Expand volunteerism for life-span respite care

Objective 3. 1.10.6: Increase personal storage space in nursing homes

**Goal 4: Long-Term Care Planning: to educate the community-at-large about options, and promote planning for longer, healthier living and future care needs.**

Objective 4.1: Assist in building pathways to economic security and equality for older adults (i.e. career to golden years framework)

Objective 4.2: Promote financial assistance and training, and encourage employers to provide pensions

Objective 4.3: Continue education regarding public benefits

Objective 4.4: Encourage will & estate planning

Objective 4.5: Increase awareness of both public and private long-term care resources

Objective 4.6: Allow domestic partners to access “spousal impoverishment protections” when one person needs nursing home care. (This reform will provide equal protection for opposite-sex couples, same-sex couples, and other pairs of adults who live together, thus ending the disproportionate effect against older LGBT people.)

# **Domain #9: Emergency Preparedness and Resilience**, a DC focus - information, education and training to ensure the safety, wellness, and readiness of seniors in emergency situations.

**Goal 1: Conduct best practice research on emergency resilience messaging.**

Objective 1.1: Focus research on protocols, process orientation, community capacity, cultural competencies.

Objective 1.2: Include vulnerable populations, specifically residents over the age of 50, the disabled, and those who speak English as a second language.

**Goal 2: Disseminate business continuity infrastructure survey, a vulnerability assessment tool.**

Objective 2.1: Survey healthcare facilities, faith-based institutions, residential housing facilities, and other organizations serving the Age-Friendly population.

Objective 2.2: Use survey results to inform the development training models produced by Sustainable DC and Resilient DC.

Objective 2.3: Increase Health Alert and/ or SMART911 enrollment by 50% through business outreach.

**Goal 3: Encourage Advisory Neighborhood Commissions to support building community resiliency and individual COOP planning.**

Objective 3.1: Design training to emphasize the importance of community members as first responders in resiliency efforts.

**Goal 4: Introduce modified method of care legislation**

Objective 4.1: modify Medicare/Medicaid regulations to allow seniors to maintain a one-month emergency medication supply at all times.

**Goal 5: Identify, locate and reach special, vulnerable and at-risk populations in an emergency.**

Objective 5.1: By 2017, Create a Community Outreach Information Network (COIN).

Objective 5.2: Update signs for evacuation routes and dead ends streets.

# **Domain #10: Elder Abuse, Neglect, and Fraud**, a DC focus - prevention and prosecution of financial exploitation, neglect, and physical, sexual, and emotional abuse of seniors.

**Goal 1: Develop a sustainable framework and increase local and federal agency cooperation and collaboration, to share information and jointly work on cases of actual or suspected elder abuse.**

Objective 1.1:Form a panel composed of D.C. Adult Protective Services, D.C. Metropolitan Police Department, U.S. Office of the Attorney General, Department of Insurance Securities and Banking, social services staff who can provide advice, temporary shelter and other services, and financial services/banking to educate on elder abuse and fraud.

Objective 1.2: Advocate with the Mayor to appoint a Commission

Objective 1.3: Hold a summit on Elder Financial Abuse for seniors and professionals, with work groups to address various aspects of financial fraud.

Objective 1.4: Conduct a survey among financial institutions about their current practices for safeguarding seniors’ assets, and the extent to which collaboration with investigation is supported.

Objective 1.5: Establish reporting criteria and processes, and use them to develop a Memorandum of Agreement

Objective 1.6: Update the list of stakeholders, including financial institutions

Objective 1.7: Reinforce communication and referral systems.

Objective 1.8: Develop a “pilot” program with financial institutions to determine best practices for increasing collaboration and minimizing fraud.

Objective 1.9: Require that bank tellers and customer service personnel are trained on elder financial fraud and abuse.

Objective 1.10: Lower the dollar threshold from $5,000 to $2,000 for Suspicious Activity Reports (SARs) on the part of financial service providers to law enforcement.

Objective 1.11: Make banking more accessible for LMI older adults.

**Goal 2: Increase awareness of Elder Abuse and Fraud Prevention issues among the general public and professionals who engage with older adults.**

Objective 2.1: Develop the message(s) we want to deliver to the public.  (Awareness, detection, prevention, reporting)

Objective 2.2: Develop Public Service Announcements for broadcast over Channel 16 and other media

Objective 2.3: Advertisements on buses and billboards, physician offices, schools/universities.

Objective 2.4: Identify and enlist the support of various community and advocacy groups.

Objective 2.5: Compile District Elder Abuse and Fraud Prevention educational materials by Spring, 2015, including a DVD.

Objective 2.6: Conduct Money Smart trainings for seniors in churches, Wellness Centers, congregate meal sites, day programs and other events attended by Seniors.

Objective 2.7: Provide CEU training to community social workers and other health professionals

Objective 2.8: Provide training to direct care workers in home care and facility settings.

Objective2.9**:** Provide training to financial institutions.

Objective 2.10: Increase private partnerships to enhance outreach efforts.

Objective 2.11: Conduct outreach to family caregivers through the DC Caregivers’ Institute and other programs that reach family caregivers of seniors.

Objective 2.12**:** Consider conducting a study to determine prevalence and categories of abuse using empirical data

**Goal 3: Enforce rigorous certification regulations for home health providers that include, but are not limited to, nurses, home health aides and home health workers.**

Objective 3.1: Increase awareness of regulations.

Objective 3.2: Develop a strategic plan to allocate appropriate resources for enforcement activities.

Objective 3.3: Mandate culturally sensitive continuing education, training & licensing in order to maintain certification through the Board of Nursing, Social Work or other agencies that certify home health providers

Objective 3.4: Develop an accessible registry of home health workers that have been terminated for reasons pertaining to elder abuse and/or fraud.

Objective 3.5: Provide certificates and other awards and incentives for agencies/organizations that become age-friendly

Objective 3.6: Develop a Compliance Office for monitoring and oversight.

Objective 3.7: Expand the scope of the Long-term Care Ombudsman Program to investigate issues regarding home care providers.

Objective 3.8: Fully implement the pending legislation regarding Nursing Assistive Personnel.

**Goal 4: Increase reporting of abuse, neglect, self-neglect and fraud, and enforcement**

Objective 4.1: Assess the current reporting system (identify challenges, numbers, sources).

Objective 4.2: Establish uniform reporting criteria and process.

Objective 4.3: Educate mandated reporters.

Objective 4.4: Develop an early warning system focused on suspicion of elder abuse and fraud

Objective 4.5: Require all Senior-serving agencies that receive funding or licensure through the D.C. government to have a written policy regarding mandatory reporting of elder abuse, neglect, self-neglect and fraud.

Objective 4.6: Review the elder abuse/neglect/self-neglect/fraud policy and evidence of compliance during licensure surveys and other compliance site visits.

Objective 4.7: Require all financial institutions that serve seniors to have a written policy & process for mandatory reporting of elder abuse, neglect, self-neglect and fraud.

Objective 4.8: Reach out to mandatory reporters to inform them of the requirements and methods of compliance.

Objective 4.9: Strengthen the sanctions for failure to report, and incentives for complete reporting and cooperation

Objective 4.10: Develop early intervention strategies for loss prevention and minimization of damage.

Objective 4.11: Establish rating system/survey to identify and reward businesses with best reporting practices and procedures.