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<tr>
<td><strong>Domain 1. Outdoor Spaces and Buildings: Accessibility to buildings, parks, and recreation facilities</strong></td>
<td>DPR, DGS, OP, DOEE</td>
<td>Improve/develop 1-2 small parks and playgrounds based on the Capital Improvement plan. Establish joint-use agreements with schools allowing communities to use school recreational facilities.</td>
<td>DC’s Trust Public Land Park Score, which includes factors like proximity of residences to parks, is a 79. DC has the fourth highest park score in the nation, with 97% of residents living within ½ mile of a park. Oxen Run in Ward 8 is the largest city-run park. Marvin Gaye Park in Ward 7 has an accessible playground, and DPR plans to commission a new rec center and make renovations, such as a splash, to improve feelings of safety. DPR is in the planning design phase on two park projects to develop more green space, one with two acres at 3rd and L St. NE along North Branch Trail, another at the south edge of Eckington. OP leads an interagency effort to update inventory of small parks/green spaces. There are also currently two zen “pocket parks” in Ward 4 off Kansas Ave. and two in Hill East underway. OP will be establishing two free-standing bathrooms, one in Adams-Morgan and one in Oxen Run. Finally, DPR is trying to make all rec center bathrooms accessible from outside.</td>
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<tr>
<td><strong>Goal 1.1: Increase access to buildings and use of parks and open spaces by incorporating a systems approach to provide greater opportunities for people to enjoy the outdoors while protecting the environment.</strong></td>
<td>DPR</td>
<td>Improve/develop 1-2 small parks and playgrounds based on the Capital Improvement plan. Establish joint-use agreements with schools allowing communities to use school recreational facilities.</td>
<td>DC’s Trust Public Land Park Score, which includes factors like proximity of residences to parks, is a 79. DC has the fourth highest park score in the nation, with 97% of residents living within ½ mile of a park. Oxen Run in Ward 8 is the largest city-run park. Marvin Gaye Park in Ward 7 has an accessible playground, and DPR plans to commission a new rec center and make renovations, such as a splash, to improve feelings of safety. DPR is in the planning design phase on two park projects to develop more green space, one with two acres at 3rd and L St. NE along North Branch Trail, another at the south edge of Eckington. OP leads an interagency effort to update inventory of small parks/green spaces. There are also currently two zen “pocket parks” in Ward 4 off Kansas Ave. and two in Hill East underway. OP will be establishing two free-standing bathrooms, one in Adams-Morgan and one in Oxen Run. Finally, DPR is trying to make all rec center bathrooms accessible from outside.</td>
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<td>1.1.1: Ensure all residents have access to parks and open spaces within a half-mile of every home, and recreation facilities within a mile of every home.</td>
<td>DPR, DGS, OP, DOEE</td>
<td>Improve/develop 1-2 small parks and playgrounds based on the Capital Improvement plan. Establish joint-use agreements with schools allowing communities to use school recreational facilities.</td>
<td>DC’s Trust Public Land Park Score, which includes factors like proximity of residences to parks, is a 79. DC has the fourth highest park score in the nation, with 97% of residents living within ½ mile of a park. Oxen Run in Ward 8 is the largest city-run park. Marvin Gaye Park in Ward 7 has an accessible playground, and DPR plans to commission a new rec center and make renovations, such as a splash, to improve feelings of safety. DPR is in the planning design phase on two park projects to develop more green space, one with two acres at 3rd and L St. NE along North Branch Trail, another at the south edge of Eckington. OP leads an interagency effort to update inventory of small parks/green spaces. There are also currently two zen “pocket parks” in Ward 4 off Kansas Ave. and two in Hill East underway. OP will be establishing two free-standing bathrooms, one in Adams-Morgan and one in Oxen Run. Finally, DPR is trying to make all rec center bathrooms accessible from outside.</td>
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<td>1.1.2: Develop a plan to use landscaping, art, and natural features as a way to create distinct and memorable places within neighborhoods.</td>
<td>DCCAH, OP, DPW, DDOT</td>
<td>Implement one or more new public art projects that have an age-friendly component.</td>
<td>Crossing the Street provides $60,000 to implement a structure/activity on a six-week basis. MuralsDC has continued to provide new murals yearly.</td>
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<td>1.1.3: Increase the number of parks and public spaces that are equipped with seating (particularly seats with arms and backs), drinking fountains, and restrooms.</td>
<td>DPR, NPS, ODR</td>
<td>Finalize a method for identifying areas that need more benches, drinking fountains, and restrooms. Identify a strategy for adding arms and backs to benches and drinking fountains to selected parks.</td>
<td>DPR continuously installs new park benches and drinking fountains. Additionally, the Kenilworth Rec Center was recently created with a new pool, outdoor spray park, seating and restrooms in what once was an inaccessible elementary school building. Additionally, the National Mall recently published a guide that shows where all public bathrooms are located on the Mall.</td>
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<td>1.1.4: Enhance clinical and community linkages to physical activity and nutrition programs for residents 50+, including expanding the Park Prescription program beyond children to residents age 50+.</td>
<td>Unity Health Care, NPS</td>
<td>DOH, DPR, DCOA, Senior Wellness Centers, MCOs, DC Greens, Wholesome Wave</td>
<td>Identify clinical and community sites that serve adults 50+ and seniors; Disseminate information about DPR Senior Services Division programs at these sites; Identify existing evidence-based physical activity and nutrition programs such as Diabetes Prevention Program</td>
<td></td>
<td>DPR has an outdoor fitness program running throughout the summer with free exercise classes open to the public.</td>
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<td>1.1.5: Post on-line accessibility reports for District buildings and parks. Work with the private sector to publish additional accessibility reports for private buildings.</td>
<td>ODR</td>
<td>DCRA , DCPS</td>
<td>Accessibility survey data posted on ODR website. Access for All campaign created, where constituents send in recommendations for ADA improvements, like the Department of Transportation (DDOT) does with sidewalks.</td>
<td></td>
<td>OP and DPR continue to implement ADA-aligned additions. There are 8 current projects where ADA implementations are occurring. These are occurring in Benning, Banneker, East Potomac, Kelly Miller Farm etc.</td>
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<td>1.1.6: Increase opportunities for intergenerational gardening and food access on public lands, focusing on DC food deserts.</td>
<td>DPR, OP</td>
<td>OSSE, DCOA</td>
<td>Activate 2-3 community gardens/yard space, providing opportunities for intergenerational interactions.</td>
<td></td>
<td>DPR has a division on community gardening with approximately 50 community gardens. Next summer, DPR will pilot a food-growing community program. Additionally, the Kelly Miller Farm and their partner Dreaming Out Loud, operate an urban farm used for food production. UDC also grows a garden using solar power, which is used for educational purposes.</td>
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<td>1.1.7: Establish an awareness campaign for safe disposal of over-the-counter and prescription medications. The campaign will focus on both disposal of medications as household waste and the establishment of convenient drop-off locations throughout the city.</td>
<td>DEA</td>
<td>DBH, DC Water, FEMS, DCOA, pharmacies, hospitals, clinics, DDOE, MPD, DPW</td>
<td>Establish a permanent drop-off location for medications.</td>
<td></td>
<td>District agencies have been distributing 100,000 medication disposal bags. Age-Friendly DC has 1,000, almost all of which are gone.</td>
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**Domain 2. Transportation: Safe and affordable modes of private and public transportation**

**Goal 2.1:** Ensure all modes of transportation are safe, affordable, and accessible for residents of all ages and abilities.
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<td><strong>2.1.1: Improve the transparency of reports for- and prioritization of- service requests for repairs of sidewalks, curb cuts, and street lights.</strong></td>
<td>OUC</td>
<td>DDOT</td>
<td>Publish reports on data kept around repairs , curb cuts, and street lights. ADA Transition Plan inventory of barriers will be complete and available as an online map.</td>
<td>The District Transportation Access Portal (DTAP) will allow DC residents to view up-to-date information on District projects in various stages of planning, design, and construction. DDOT will finalize this website in 2018. DDOT has also identified all bus stops needing shelters and other repairs and has created a plan to complete all these projects. DDOT prioritizes work based on public request, condition, and usage. Public requests are the biggest priority.</td>
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<td><strong>2.1.2: Develop a sustainable funding system for sidewalk repairs.</strong></td>
<td>DDOT</td>
<td></td>
<td>Utilize two local capital projects to focus on restoring distressed sidewalks. Utilize Federal dollars to assist.</td>
<td>DDOT expects to make 148 sidewalk repair during this fiscal year. Thirty-seven are currently complete, and about 70 should be complete by the end of July. The multi-modal committee will have a staff person, who can help bridge the public and policy. This could ultimately help with the budget and get the mayor involved.</td>
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<td><strong>2.1.3: Use safe, aesthetically pleasing materials for sidewalk construction that minimize falls and accidents.</strong></td>
<td>DDOT</td>
<td></td>
<td>Continuously increase feet of flexipave throughout the city to repair dangerous sidewalks in an environmentally-friendly way.</td>
<td>DDOT uses pervious flexible rubberized pavement for sidewalk repairs to preserve and protect trees. Last year 1,800 miles were laid and it has been well received by the community.</td>
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<td><strong>2.1.4: Establish workgroup to promote bicycle safety and identify strategies to increase the number of older riders using bicycles.</strong></td>
<td>DDOT</td>
<td>Capital Bikeshare, WABA, DCPS, DCPCSB, DCPL, MPD, DCOA, DPR, Unity Health DC, Whitman-Walker Health, Community of Hope.</td>
<td>Workgroup formed and recommendations developed.</td>
<td>Capitol Hill Village is offering dialogue opportunities to pedestrians, bikers and drivers to share their frustrations with one another. These conversations may become a model. Capital Bikeshare is working to expand the range of users, targeting all lower income residents, including older riders. Additionally, the Community Partners Program provides lessons for all new riders, and has been encouraged to use more inclusive wording when discussing and promoting their programs.</td>
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<td><strong>2.1.5: Require that replacement of missing street/traffic signage is easily readable, well-lit at night, and addresses access and functional needs.</strong></td>
<td>DDOT</td>
<td></td>
<td>The new MUTCD standards have enhanced retro-reflectivity requirements to improve night time visibility. Continuously increase the number of signs that comply with the new standards as part of regular sign installation and replacement.</td>
<td>DDOT will complete 16,649 sign repairs by the end of fiscal year 2017. The agency is also reviewing where duplicate and confusing signage exists.</td>
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<td>2.1.6: Increase accessibility at public transit stops.</td>
<td>DDOT</td>
<td>WMATA</td>
<td>In FY 16 DDOT will develop ADA-compliant engineering plans and drawings for 51 high priority bus stops in the District. We plan to make 26 bus stops fully ADA accessible which will include the access and egress of the bus stop and bus shelter (if applicable) and nearby curb ramps in FY16. Another 25 will be completed in FY 2017. There are approximately 800–1000 bus stops in need of repair. This process has been made easier through the seamless communication between DDOT and WMATA. If people are not happy with changes made by DDOT, residents are welcome to come to the public meetings to voice their concerns.</td>
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<td>2.1.7: Convert pre-existing on-street parking spaces into ADA accessible spaces.</td>
<td>DDOT</td>
<td>DPW, DGS, Various disability organizations</td>
<td>Roll out of Red Top Meter Program including finalizing the new rulemaking.</td>
<td></td>
<td>DDOT fully implemented the Red Top Meter Program in May 2017 to provide reserved parking spots to residents with disability placards in their vehicles. Approximately 350 red top meters have been installed in the Central Business District. DDOT plans to expand this program to other parts of the city.</td>
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<tr>
<td>Goal 2.2: Provide residents with the information and tools they need to make informed travel choices.</td>
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<td>2.2.1: Create an integrated, one-call, one-click system for older adults and those with disabilities to access and schedule transportation options, including accessible options.</td>
<td>OUC</td>
<td>WMATA, DCOA, DDOT, DCTC, DHCF, OCTO</td>
<td>Develop more integrated transportation protocol to maximize efficiency of transportation access.</td>
<td></td>
<td>DDOT completed the accessDC study in June 2017 to identify ways to improve transportation for people living with disabilities and older adults. DDOT’s goDCgo currently provides different travel routes and consulting services to residents. AccessDC recommended creating a Centralized Transportation Resource Repository through the No Wrong Door grant to make travel planning easier. The study also recommended creating a single website for all accessible mobility data currently published by DC agencies. AccessDC has many relevant plans and more can be read on their website, <a href="https://ddot.dc.gov/page/accessdc-study">https://ddot.dc.gov/page/accessdc-study</a>.</td>
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<td>2.2.2: Develop an available-on-demand, cross training for direct service staff to ensure they have up-to-date information about current accessible transportation options and the one-call, one-click system.</td>
<td>DCHR</td>
<td>STRATEGY WITHDRAWN</td>
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<td>2.2.3: Expand offerings of transportation trainings (individual counseling and group instruction) to introduce and familiarize older adults with all travel options to ensure they can make informed, appropriate, cost-effective, and efficient choices.</td>
<td>WMATA</td>
<td>DCOA, DCPL, DPR, DMV</td>
<td>Increase number of individuals receiving WMATA's travel training. Develop a new cross-agency training to incorporate neighborhoods, popular destinations, and alternative transportation options in addition to transit.</td>
<td></td>
<td>WMATA provides training to residents seeking how to best use transportation. Between 6% and 8% of those trained are older adults. In 2017, WMATA has trained 2,609 residents, with an estimated 182 older adults.</td>
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<td>2.2.4: Integrate eligibility determination for transportation options into the DC Access System (DCAS).</td>
<td>DHS</td>
<td>DDOT, WMATA, DCTC, DCOA, DHCF, ODR, DDS</td>
<td>STRATEGY WITHDRAWN</td>
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<td>Domain 3. Housing: Wide range of housing options for older residents aging in communities/place, and other home modification programs</td>
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<td>Goal 3.1: Streamline, expand, and promote programs that support affordable housing and aging in place.</td>
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<td>3.1.1: Conduct a current Needs Assessment Study taking into consideration recent population changes, needs of residents of various age-cohorts ages 45+, income levels, current and future availability of housing, visitability, etc. and the projected resources necessary to meet these needs.</td>
<td>DHCD, DCOA</td>
<td>DMPED, OP, OVA, VA, ODR, OHR, DMHHS, DDOT, DOH, OGLBTQ</td>
<td>Comprehensive citywide needs assessment completed, taking into account: current aging programs, senior wellness centers, senior center facilities; housing, transportation infrastructure, employment, and services offered to older adults in DC.</td>
<td></td>
<td>DHCD and the DMHHS, DDOT, DOH, OP, LGBTQ Offices worked collaboratively to create a needs assessment which was recently completed.</td>
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<td>3.1.2: Research and promote home-sharing options for both intergenerational living arrangements and among residents age 50+, as a strategy to enable capable older adults to remain in their communities.</td>
<td>DCOA</td>
<td>WAVE DC, AARP, DHCD, DMHHS, CFSA, Mi Casa, Generations of Hope</td>
<td>Begin development of second Generations of Hope Project in DC and develop home-sharing program.</td>
<td></td>
<td>A home-sharing program is being developed between Age-Friendly DC and local universities, Howard and Gallaudet, which is hoped to be finalized by January 2018 for the fall 2018. The program would connect college students and older adults who would live together. This would reduce housing costs, increase intergeneration interactions and give older adults access to a hand at home who could assist with tasks. There are currently some liability perspectives to be considered. Thus, the next step should be to look for conveners that help connect people, but then allow them to do their own negotiations.</td>
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<td>3.1.3: Amend DC Zoning Law to permit accessory dwelling units (also known as ADUs or “granny flats”) in more residential zones.</td>
<td>OP</td>
<td></td>
<td>Implement new zoning code.</td>
<td>Progress complete. New code passed by Zoning Commission in January 2016. New regulations went into effect in September 2016. Code permits more ADUs in residential zones.</td>
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<td>3.1.4: Encourage the development, preservation, and improvement of new and existing independent living residences and affordable and accessible housing in the city by working with the federal Department of Housing and Urban Development (HUD) to increase the allocation of units under the 202 and Section (811) programs.</td>
<td>DHCD, DCHA, DCHFA, DMPED</td>
<td>DDOT, WMATA, HUD</td>
<td>Identify complexes that need accessibility improvements. Increase availability of subsidized housing for seniors.</td>
<td></td>
<td>Current progress is moving slowly through Housing and Urban Development (HUD) and Congress.</td>
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<td>3.1.5: Improve age 50+ residents’ awareness of, and access to, home modification programs, so that they can prepare applications prior to the years when they may experience mobility limitations. Streamline the processes (e.g., the Single Family Residential Rehabilitation Program (SFRRP) and Handicapped Accessibility Improvement Program (HAIP), Rebuilding Together) for older residents who need home modifications urgently.</td>
<td>DHCD</td>
<td>DCOA</td>
<td>SFRRP streamlined so that all money can be dispensed annually.</td>
<td></td>
<td>Safe at home has made 332 home adaptations in FY17. The program will continue into the next fiscal year and has been well received.</td>
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<td>3.1.6: Develop incentives financed by the Housing Production Trust Fund (HPTF) and other government financing to encourage developers to increase the production of new affordable, transit-oriented, universally-designed units for older residents with incomes less than 30% of Area Median Income (AMI).</td>
<td>DHCD, DCHA, DCHFA, OP</td>
<td>Nonprofit housing developers, DBH, DHS</td>
<td>Increased supply of affordable, accessible units within 1/2 mile of major transit.</td>
<td></td>
<td>DHCD has reviewed the criteria of the HPTF and other funding sources. To provide incentives for developers, up to five prioritizations scoring points will be awarded for projects that include units designed and reserved for seniors, including assisted living and intergenerational housing units.</td>
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<td>3.1.7: Explore and develop options for expanding the supply of neighborhood-scale assisted living for DC residents with incomes below 50% AMI.</td>
<td>DOH, DHCF</td>
<td>DCOA, DHCF</td>
<td>Explore potential locations for these developments and raise Medicaid reimbursement rate.</td>
<td></td>
<td>Assisted living is determined to work most effectively with 100+ unites. Victory Housing Model is a worthwhile model to look into because it is small/neighborhood based. Reaching out to DOH or the DMHHS may be the most effective way to help fund these projects and to see what outcomes they have observed.</td>
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Goal 3.2: Maximize awareness and provide training to increase the amount of housing that is accessible, affordable, safe, and healthy.
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<td>3.2.1: Develop a series of easy-to-comprehend factsheets, webinars, and/or infomercials on topics such as qualifying for tax credits, Fair Housing Act compliance, saving money on utilities, and maintaining healthy homes.</td>
<td>DHCD, DCHFA, DCHA, DOEE, DOH</td>
<td>DCOA</td>
<td>Compile information on a central site that is easy to access and ensure that printed versions are up to date.</td>
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<td>These factsheets will be available on the Age-Friendly website.</td>
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<td>3.2.2: Develop a user-friendly inventory and description of housing choices ideally suited for residents age 50+, who are LGBTQ, who have disabilities, and/or who are English language learners, and identify methods for wide dissemination of this list.</td>
<td>DHCD, DCHFA, DCHA</td>
<td>ODR, DCOA, OGLBTA, OLA, OAA, OAPIA, National Association of Realtors</td>
<td>Add additional filters to DC Housing Search.</td>
<td></td>
<td>DHCD and partner agencies incorporated the study and assessment of the LGBTQ group as part of the Citywide comprehensive needs assessment. Currently the committee is finalizing the preparation of the RFP and the development of the SOW. The study is targeted to be completed by the end of FY17</td>
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<td>3.2.3: Provide training for managers of existing public and private housing (including tenant-owned buildings) to address the needs of aging residents, including Fair Housing and ADA compliance and cultural competency for populations such as residents who are LGBTQ, who are disabled, and/or who are English language learners.</td>
<td>OHR, ODR, DHCD</td>
<td>OTA, DCOA, OGLBTA, OLA, OAA, OAPIA, DCHA</td>
<td>To provide 10 fair housing trainings for managers of existing public and private housing with a specific focus on the needs of aging residents as it pertains to the federal Fair Housing Act, Americans with Disabilities Act and the DC Human Rights Act. A cultural competency component of the training will address LGBTQ, disability and language access issues.</td>
<td></td>
<td>The 2017 Housing Expo drew a crowd of 6,000 people. This demonstrates growth since last year when 4,000 people were in attendance.</td>
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<td>3.2.4: Promote consistent compliance with the Fair Housing Act by providing DCRA and third-party inspectors with additional guidance and training and offering technical assistance to architects and developers during design and construction.</td>
<td>DCRA, ODR</td>
<td>DHCD, OHR, DGS</td>
<td>Increase in trainings and decrease in complaints.</td>
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<td>Progress complete.</td>
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**Domain 4. Social Participation: Access to leisure, cultural activities, and volunteer opportunities for older residents to participate in social engagement with their peers and younger people**
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<td><strong>Goal 4.1: Strengthen, develop, and promote arts, recreation, leisure, and educational activities involving and targeting older adults.</strong></td>
<td>DCOA</td>
<td>DCCAH, DPR, DCPL, DDOT, DDOE, DCOA, Serve DC, OUC</td>
<td>Increase in the number of residents referred to services and activities through DCOA.</td>
<td></td>
<td>The Mayor’s Office of Community Relations and Services (MOCRS) have played an active role in engaging seniors throughout all eight wards in the District of Columbia. MOCRS have hosted seniors on two separate occasion with Mayor Bowser in the John W. Wilson building offering them lunch, pictures with Mayor and a tour of the building through the Office of the Secretary. Additionally, on multiple occasions MOCRS have participated in DCOA community events by having a table and providing information on Mayor Bowser’s initiatives. MOCRS Director Tommie Jones also served on a panel at the DCOA Senior Symposium that helped residents learn how to be involved in their government. Senior Villages funded by the Office on Aging helped seniors connect with a multitude of educational and recreational activities throughout the District this summer, including boat rides in the National Harbor, D.C. Duck Tours, trips to farmers markets, movie and game nights, Tai chi and mediation programs, technology training sessions on internet use, smartphones and email, nutrition and health seminars, and cooking demonstrations.</td>
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<td>4.1.1: Inform and connect older residents to arts, recreation, leisure, and educational activities through technology and non-technological means in order to make it easier to find activities of interest.</td>
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<td>Age-Friendly DC promotes the Consortium of Universities website, which allows users to compare the courses available across institutions via one portal. Osher Lifelong Learning Institute (OLLI) is expanding the number of classes offered at American University, and membership at OLLI has increased, to 1,302 in June 2017. DCOA and promoted social participation through social media and live event updates throughout the summer covering Senior Symposium, Ambassador training, Community health and wellness fairs, and other activities. DCOA Promoted events widely in printed monthly printed newsletters and DCOA e*news.</td>
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<td>4.1.2: Increase opportunities for formal and informal group learning for older residents.</td>
<td>DMHHS</td>
<td>Consortium of Universities, DCPL, DPR, DME</td>
<td>Increase number of participants in lifelong learning. And develop database of all courses offered by universities in the Consortium.</td>
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### 4.1.3: Organize peer-to-peer learning activities on art, history, travel, culture, sports, politics, etc. that isolated residents can facilitate and participate in.

| DMHHS | DCCAH, OLA, OAA, OAPIA, OGLBTA, OCTO, DCPL, DCOA, Smithsonian Museums, GWU, SOME, EventsDC, Verizon Center, National Geographic | Complete pilot study with GWU & SOME and expand to incorporate a learning/teaching component. | AARP extended a grant in 2017 to continue to facilitate phone conversations among homebound residents. Age-Friendly promotes this program through home-delivered meals provided by DCOA. |

### 4.1.4: Expand activities, services, and programs likely to attract residents age 50+ throughout the day.

| DCOA | DCCAH DMPED AARP WAVE DCOA DPR, DDS | Increase in the number of residents participating in recreational activities. | DCOA presented the Mayors Annual Senior Symposium, with more than 900 residents, age 60 and older, participating in a full day of educational workshops, speakers, musical and creative performances and a resource-rich exhibit hall with over 80 exhibitors. DCOA hosted community health and wellness fairs in all eight wards with representatives from District and Federal government agencies and community-based organizations highlighted services available for District seniors. DPR is developing two new parks, with one in the planning and design phase and another to begin construction in July. DPR has enhanced partnerships with villages to facilitate programming for older residents at local recreation centers. Membership in LGBTQ groups within villages has increased. |

### Goal 4.2: Promote and provide quality volunteer opportunities for older adults.
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<tr>
<td>4.2.1: Produce a &quot;State of Volunteerism in the District&quot; report, assessing</td>
<td>Serve DC</td>
<td>United Way, AARP</td>
<td>Produce an extensive report assessing volunteerism by age group, activity, and organization, as well as providing recruiting and retaining techniques and recommendations.</td>
<td></td>
<td>The Corporation for National and Community Service (CNCS) reports on community service in the District through its three Senior Corps programs: Foster Grandparents, RSVP, and Senior Companions. From 2016-17, of the more than 3,500 volunteers working through CNCS in the District, 1,400 adults volunteered for Senior Corps. Over 3,900 young people have been assisted through the Foster Grandparents program, and companions have helped over 260 homebound older adults, while RSVP volunteers have serviced 42 groups across DC.¹</td>
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<td>volunteerism by age group, activity, and organization, providing recruiting</td>
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<td>and retaining techniques and recommendations.</td>
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<td>4.2.2: Enhance and promote the NeighborGood volunteer database to expand</td>
<td>Serve DC</td>
<td>WAVE</td>
<td>District agencies, non-profits, and collaborative partners in the District will increase their advertising of volunteer opportunities on NeighborGood with a focus on intergenerational opportunities.</td>
<td></td>
<td>The Serve DC web portal has a special tab titled &quot;seniors&quot; on the webpage for those interested in volunteering to provide senior citizen services and or support. They continue to attract volunteers interested in working with senior citizens throughout the city. Members of villages in the District continue to offer peer services such as transportation, light home maintenance, in-home assistance, friendly visits or calls, and technological support. The District has the highest number of villages in the nation, with more in development. Membership in DC villages has increased significantly in the last year, especially in Palisades Village and Capitol Hill Village.</td>
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<td>volunteer opportunities, improve usability, increase choices, and better</td>
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<td>match residents age 50+ with volunteer opportunities.</td>
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<tr>
<th>5.1.2: Develop and launch a Districtwide anti-discrimination and anti-ageism campaign that is inclusive of diverse constituencies, including but not limited to LGBTQ older adults, older adults with disabilities, and older adults who are limited and non-English proficient.</th>
<th>OHR</th>
<th>DCOA, DDS, OP, ODR</th>
<th>OHR will launch the campaign in late FY16 on social media and in collaboration with multiple agencies. OHR also plans to release the campaign in the Metro if funding is secured.</th>
<th>The 2017-2020 Olmstead Plan is in the drafting stages. The plan outlines how people living with a disability can and should be integrated into the community. The plan is looking for feedback from persons living with a disability.</th>
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<tbody>
<tr>
<td>5.1.3: Encourage the business community to adopt age-friendly business best practices and provide a welcoming and inclusive environment for older adult customers.</td>
<td>DC Economic Partnership</td>
<td>DC Economic Partnership, ODR</td>
<td>Continue to designate more businesses, reaching more than 100.</td>
<td>There are currently 43 Age-Friendly businesses. Over 224 nominations have been received and 17 applications have been submitted. Councilman Todd is going across the city to encourage businesses to apply.</td>
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<td>5.1.4: Increase Districtwide engagement in ongoing Age-Friendly DC initiatives that promote inter-generational and multicultural respect and inclusion among diverse communities.</td>
<td>DMHHS</td>
<td>OGLBTQ, Serve DC, OSSE, DYRS, DDS, Generations United, OAA, OLA, OAPIA, Office of women’s policy, GWU, DCPL, OP</td>
<td>Connect with partner agencies to increase number of residents reached at events across the city.</td>
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<td>5.1.5: Develop and distribute surveys in various languages to gauge the level of respect and social inclusion felt by various groups across the city.</td>
<td>DMHHS</td>
<td></td>
<td>Show improvement in 2017 Livability survey from 2015/16 survey results. Reach over 1,000 respondents.</td>
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<td>Domain 6. Civic Participation and Employment: Promotion of paid work and entrepreneurship for older residents and opportunities to engage in the formulation of policies</td>
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<tr>
<td>Goal 6.1: Increase full- and part-time employment and entrepreneurial opportunities for older residents.</td>
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<tr>
<td>6.1.1: Establish an interagency work group to increase coordination of employment and senior services for residents age 50+.</td>
<td>DOES</td>
<td>DCOA, DDS, DHS, DCPL, Community partners, OCA, NCBA, WIC, AARP, MOCA, ServeDC</td>
<td>Develop a resource tool combining all workforce training/development resources and job sites/opportunities.</td>
<td>Green</td>
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<tr>
<td>6.1.2: Develop and increase District government adult internship/fellowship programs for residents age 50+.</td>
<td>DCHR</td>
<td>DOES</td>
<td>Produce findings on DCHR research on programs associated with this goal. Establish partnerships in creating internships/fellowships.</td>
<td>Green</td>
</tr>
<tr>
<td>6.1.3: Increase outreach and understanding of issues and opportunities related to employment and entrepreneurship for residents 50+.</td>
<td>DOES</td>
<td>DCOA DHS DDS OHR, DCHR, DSLBD, Chamber of Commerce</td>
<td>Develop training and resource materials to connect older adults to entrepreneurship opportunities.</td>
<td>Green</td>
</tr>
<tr>
<td>6.1.4: Increase technical assistance to help small and local businesses become age-friendly, hire residents age 50+, and provide entrepreneurship opportunities for older residents.</td>
<td>DSLBD</td>
<td>OTR, DOES</td>
<td>Increase the number of businesses seeking technical assistance to become age-friendly.</td>
<td>Green</td>
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<tr>
<td><strong>Goal 6.2: Strengthen, develop, and promote civic participation among residents age 50+</strong></td>
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<td>6.2.1: Compile and publish a listing of all opportunities for civic participation and how to get involved.</td>
<td>MOCA</td>
<td>OBC, OANC, MPD, BOE, MOTA</td>
<td>Create booklet or guide for civic participation with steps on how to get involved.</td>
<td>Digital literacy training for older adults is accessible through the Back to Work 50+ program. Through the program, which hosts a Microsoft Digital Alliance resource center, individuals can customize job searches. In addition, DOES partners with 15 different Age-Friendly businesses to identify suitable jobs for older adults. DOES continues to look into ways to recognize and promote these businesses. The Business Service Group at DOES is committed to recruiting additional Age-Friendly Businesses. DOES conducts ongoing outreach to businesses promoting the benefits for these businesses to become Age-Friendly businesses.</td>
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<td><strong>Domain 7. Communication and Information: Make timely and pertinent information available to, and accessible by, older residents through multiple media.</strong></td>
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<tr>
<td><strong>Goal 7.1: Improve readability, ease of use, and delivery of timely and accessible information through traditional and digital media utilized by residents age 50+ and caregivers, including television, radio, print, telephone, websites, and mobile apps.</strong></td>
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<td>7.1.1: Develop guidance for, and promote adoption of, age-friendly communication practices to be used in all media.</td>
<td>DMHHS</td>
<td>DDS, OHR, DMHHS</td>
<td>Age-Friendly Communication guidance has been presented to all DC government agency’s communications officers.</td>
<td>In addition to the handout, “Reaching Adults Age 50+ More Effectively Through Print,” the task force is considering developing a set of aural and visual guidelines for online sources to follow. All websites based in the Mayor’s office feature audio and text enlargement modules to make the information accessible to all. OCTO has implemented a translation module on 123 websites.</td>
</tr>
<tr>
<td>7.1.2: Overhaul and promote 211 Answers, Please! database to ensure it is up-to-date, user-friendly, and offers filterable reports.</td>
<td>DHS, OCTO</td>
<td>OUC, OCP</td>
<td>STRATEGY WITHDRAWN</td>
<td>The 311 call center provides comprehensive assistance with city services and information. In 2016, the system underwent changes to improve accessibility on its website, including a live agent chat. The Office of Unified Communications also implemented the option of texting service requests to 311.</td>
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<tr>
<td>7.1.3: Ensure that appropriate government employees, contractors, community partners, and others from whom people may seek age-related information know how to answer them or to direct them to the Aging and Disability Resource Center for answers.</td>
<td>DCOA</td>
<td>No Wrong Door Partners: DHCF, DDS, DBH, DOH, OVA, DHS, Senior Service Network</td>
<td>STRATEGY MOVED TO 8.1.1</td>
<td>Age-Friendly incorporated this plan into strategy 8.1.1 to improve dissemination of information about the No Wrong Door program.</td>
</tr>
</tbody>
</table>
### Goal/Strategy

7.1.4: Utilize radio, TV, print, public service announcements, email blasts, face-to-face events, home-delivered meals, and other means to inform residents how they can access age-related information in a format appropriate to their needs and abilities.

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<tr>
<td>7.1.4: Utilize radio, TV, print, public service announcements, email blasts, face-to-face events, home-delivered meals, and other means to inform residents how they can access age-related information in a format appropriate to their needs and abilities.</td>
<td>DCOA</td>
<td>National Council on Aging</td>
<td>Increase the number of residents accessing Benefits Check-Up</td>
<td>The Beacon newspaper, directed toward adults age 50+ and their families, features updates from organizations such as DCOA and AARP. The Beacon reaches an audience of over 350,000 each month, 80% of whom are over 50. The newspaper is available at over 2,400 sites, including pharmacies, libraries, wellness centers, and faith-based communities or by mail. Increasing its own outreach, DCOA has expanded the reach of its biweekly newsletter. From 2016 to July 2017, DCOA attended 226 events throughout the city and interacted with 1,100 older adults in attendance at the 6th Annual Senior Symposium as well as with small groups in residences. Much of the outreach material is available in seven languages, following the guidelines of the DC Language Access Act. DCOA also holds training for Ambassadors on a monthly basis. Ambassadors, motivated community volunteers, inform residents of DCOA services through word-of-mouth promotion.</td>
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Goal 7.2: Expand availability and use of age-friendly and affordable technology by older residents.

| Goal 7.2: Expand availability and use of age-friendly and affordable technology by older residents. | Octo | DCPL, DDS, ODR, OCP | Develop program to provide surplus computers and smartphones to older adults. | DC’s Assistive Technology Program, an organization that provides aid to individuals with disabilities, continues to demonstrate and loan devices, and to offer low-interest loans to purchase them. Also connecting older adults with nearby aging resources, OCTO has created websites for all wellness centers in the District. For its innovations in technological accessibility, OCTO won Best City Portal from the Center for Digital Government for accessibility in 2014 after having finished as a finalist in 2013. |

7.2.1: Increase access to technology (computers, tablets, smartphones, and Wi-Fi) at home and in public places for low-income residents age 50+, including those who are disabled and/or isolated.
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<tr>
<td>7.2.2: Train older DC residents in technologies and devices using existing</td>
<td>DCPL</td>
<td>DPR, DCPCS, Byteback, Connect DC, Academy of Hope, UDC, DCOA, Connect Home Program, DCHA</td>
<td>Identify service providers of technology training for seniors and their offerings, review and research</td>
<td></td>
<td>Through Connect DC and EveryoneOn, residents may apply to receive wifi at a reduced cost. Since 2013, approximately 400 residents have purchased internet</td>
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<td>institutions (libraries, senior centers, nonprofits, and other organizations</td>
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<td>the current technology skills aptitudes of seniors in the District, and craft a plan outlining</td>
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<td>service through the EveryoneOn website. DCOA has partnered with Byte Back to provide technology training at six wellness centers. Byte Back continues</td>
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<td>that offer technology education and intergenerational training opportunities).</td>
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<td>suggested recommendations to address technology training needs.</td>
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<td>to target connectivity deserts and teach mobile health app classes. Since 2015, the number of people connected to the internet in DC has increased by 23%.</td>
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<td>Additionally, Project Reboot, a joint project of OCTO, DC Housing Authority, and the private sector have implemented a program at Frederick Douglass</td>
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<td>Community Center in Ward 8 to train residents to use and repair older computers donated by major corporations.2</td>
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<td>Domain 8: Community Support and Health Services: Access to homecare services,</td>
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<td>clinics, and programs to promote wellness and active aging</td>
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<td>Goal 8.1: Increase consumer awareness of and access to preventive, primary,</td>
<td>DDS</td>
<td>All direct service agencies</td>
<td>Finalize No Wrong Door Strategic Plan</td>
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<td>No Wrong Door implementation grant activities are hitting work plan bench marks with complete implementation anticipated in Sept. 2018. NWD</td>
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<td>urgent, and long-term care.</td>
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<td>implementation activities for this reporting period include: NWD training twice a year which professionals can use as CEUS; the development of a</td>
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<td>multiagency case management system; a interagency definition of linguistic and cultural competency (including provisions for those living with</td>
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<td>vision and hearing impairments). The system has been formally named “DC Support Link.”</td>
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<td>8.1.2: Provide cross-training for navigators and a series of fact sheets on accessing financial planning, will and estate planning, Medicaid qualification, and long-term care resources for individuals, families, spouses, and domestic partners.</td>
<td>DCOA</td>
<td>DISB, LCE, Senior Service Network, DHCF, DDS, DBH, DOH, OVA, DHS</td>
<td>Improved customer service provision achieved through cross-training and information sharing with other District agencies and community partners.</td>
<td></td>
<td>No change.</td>
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<tr>
<td>8.1.3: Require Continuing Education Units (CEU) or relevant training in geriatric care and cultural competency to be obtained by licensed healthcare providers, first responders, caseworkers, and caregivers.</td>
<td>DOH</td>
<td>DHS, FEMS, Home Care Partners</td>
<td>Have one of the boards require CEUs or training specific to geriatric care.</td>
<td></td>
<td>Home Care Partners and DOH are considering requirements that all persons caring for an older adult client receive proper training. An additional emphasis needs to be placed on educating first responders.</td>
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<tr>
<td>8.1.4: Continue progress toward federal approval to implement the Program for All-inclusive Care for the Elderly (PACE), using a hub and spoke model to reach more residents closer to home.</td>
<td>DHCF</td>
<td>DOH DCOA PACE vendor</td>
<td>The District moves closer to implementing PACE.</td>
<td></td>
<td>PACE has received funding for a part-time position in FY18. MCAC has approved a budget for FY19, which has been supported by DOH and DBS, to fund the program.</td>
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<td>8.1.5: Expand compensated respite care for low-income unpaid caregivers.</td>
<td>DCOA</td>
<td>DHCF, Home Care Partners</td>
<td>Increase number of low-income, unpaid caregivers receiving some form of support.</td>
<td></td>
<td>Respite care is a mechanism to provide support and relief for caregivers. Through the EPD Waiver program, a component of Medicaid, all caregivers’ hours are covered, including those of family members. Additionally, adult day programs provide opportunity for respite.</td>
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<tr>
<td>8.1.6: Fully implement the Nursing Assistive Personnel (NAP) legislation.</td>
<td>DOH</td>
<td>DISB</td>
<td>Fully promulgate rulemaking</td>
<td></td>
<td>The Nursing Assistive Personal Omnibus regulation was first published on January 25, 2015, and is currently undergoing legal sufficiency review in the Executive Office of the Mayor. Upon completion of legal review, the regulation will be implemented.</td>
</tr>
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<td>8.1.7: Ensure the availability of linguistically and culturally competent training and certification for nursing assistive personnel.</td>
<td>DOH</td>
<td>Carlos Rosario, ESL providers</td>
<td>Multi-lingual training and revised certification program.</td>
<td></td>
<td>NAP testing is not required to be offered in another language. Due to the necessity to communicate with many clients in English the test currently required a 5th grade English level. There do need to be programs offering in other languages though! Currently, ESL speakers are connected with classes to help with their English.</td>
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<td>8.1.8: Introduce or expand primary mental health screening programs for older adults.</td>
<td>DBH</td>
<td>DCOA, DHCF, MCO’s, AMA, CHA</td>
<td>Require the use of screening tool(s) by PCPs in annual physicals and hospital discharges.</td>
<td></td>
<td>DBH is working with area training programs for home health aides to review and revise mental health curricula when asked. The District cannot mandate a curriculum for training programs, but all area programs have some element of a mental health curriculum. There is potential to create a model that could be followed by training programs if they wish.</td>
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<td>8.1.9: Provide training on behavioral health for counselors and aides working in hospitals and home-based care units.</td>
<td>DBH</td>
<td>DCOA, DHCF, AMA, DCHA, Home Care Partners</td>
<td>Provide training on behavioral health signs, symptoms and management developed for counselors and aides working in hospitals and home-based care units.</td>
<td></td>
<td>DBH has been communicating with primary care providers to determine mental health training needs. Additionally, a mental health first aid program has been established and is being shared with area social workers, home health aides, and nurses.</td>
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**Goal 8.2: Promote safety, wellness, livability, and activity in the community.**
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<td>8.2.1: Increase access to affordable, fresh produce and other healthful foods.</td>
<td>DOH, DCOA</td>
<td>DC Central Kitchen, AARP, Capital Area Food Bank, OP, DSLBD, Unity Health Care, DC Farmers' Market Collaborative</td>
<td>Effectively promote nutrition services to better connect seniors to programs that provide affordable fresh produce and wellness education</td>
<td></td>
<td>The District provides meals through communal dining, home meal delivery, and voucher programming. The Capital Area Food Bank will also be expanding their Grocery Plus program in FY18, which provides residents with prepacked groceries. CAFB will also be increasing produce distributed through their Senior Brown Bag lunch program from three pounds to eight pounds of fresh produce per person. The Produce Plus voucher program is also growing.</td>
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<td>8.2.2: Establish and implement an evidenced-based falls prevention program for residents, particularly those with balance and mobility issues.</td>
<td>DCOA</td>
<td>Community partners</td>
<td>Increase the number of programs available to improve strength and balance and reduce the risk of falls.</td>
<td></td>
<td>DCOA is hoping to create a falls review board. If the root causes of falls are understood, then programming, prevention and education can address these concerns. DCOA and DPR have also teamed up to offer a falls prevention program to educate older adults in the community. The OTAGO program is also under research with GW students, DuPont Circle Village is now offering balance training and DPR is offering Tai Chi. The Safe at home program has made 332 home adaptation this year (October 1-June 30, 2017), and more are expected to be completed. The program has grown significantly since February and will continue into FY18. Most renovations have been made in wards 4,5,7 and 8.</td>
</tr>
<tr>
<td>8.2.3: Expand number of peer counseling and support programs and increase the number of older adult peer counselors.</td>
<td>DBH</td>
<td>DOH, DHCD, DCRA, DDOT, and DCOA’s Senior Service Network; CSAs/SUD providers</td>
<td>Increase in the number of Certified Peer Specialists who are age 50+</td>
<td></td>
<td>The Certified Peer Specialist program has 139 peer specialists, 87 of whom are 50+ as of June 2017. Adults 50+ now account for 62% of the peers. DBH is also creating the DC Peer Academy to be a source of CEUs and to allow peers to continue personal growth.</td>
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<td>8.2.4: Establish awareness campaign to educate older adults on optimal use of over-the-counter and prescription medications.</td>
<td>DOH</td>
<td>pharmacies, hospitals, universities</td>
<td>Establish campaign.</td>
<td></td>
<td>MPD hosts two drug take back days yearly where community members can drop off unused and expired medications. The District has also distributed over 1,000 neutralizing bags that residents can put medications in before throwing in the trash. Area pharmacies are also starting to take back unused medications and provide clients with medication disposal kits, though this is not required and thus not monitored.</td>
</tr>
<tr>
<td>8.2.5: Increase opportunities and programming for older adults to engage in physical and mental wellness activities.</td>
<td>DCOA</td>
<td>DPR, OLLI, University Consortium</td>
<td>Increase physical activity and mental health offerings.</td>
<td></td>
<td>DPR parks are offering free summer fitness classes which are open to people of all ages.</td>
</tr>
</tbody>
</table>

### Domain 9: Emergency Preparedness and Resilience, a DC focus: Information, education, and training to ensure the safety, wellness, and readiness of older adults in emergency situations

**Goal 9.1: Identify and reach vulnerable and at-risk resident populations with information and education on emergency preparedness and resilience.**

<table>
<thead>
<tr>
<th>9.1.1: Increase AlertDC enrollment.</th>
<th>HSEMA</th>
<th>OUC</th>
<th>Increase Alert DC enrollment by 3% from FY16 numbers.</th>
<th>Participation has increased in 2017 by 3.19%, which is over 5,400 persons this year. The program is reaching over 170,000 people in the DC area with alerts.</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.1.2: Identify and locate facilities and service centers serving vulnerable populations and identify locations with high concentrations of vulnerable adults throughout DC, creating a usable database containing this information.</td>
<td>DOH</td>
<td>HSEMA, OCTO, OP, DOEE</td>
<td>Database created with vulnerability index.</td>
<td>HSEMA has completed a community needs assessment to determine the whereabouts of vulnerable populations in DC. Notably, the task force wants to keep the definition of vulnerable populations as broad as possible to encompass the widest audience, including those who may temporarily identify as a vulnerable person.</td>
</tr>
</tbody>
</table>

**Goal 9.2: Build individual and community resilience and preparedness for emergencies.**
<p>| 9.2.1: Continue to provide uniform trainings on preparedness, mass care, emergency response, access and functional needs, behavioral health, CPR/first aid, and resilience to District government staff and public volunteers. | DOH | ServeDC, FEMS | Provide CERT training for every existing village. | ServeDC had 25 new commissioners come on board this past May. Due to some complications, progress has been slow. The CERT program continues to be a beneficial program for training individuals in emergency response and it is an inclusive program that trains individuals who may otherwise be considered vulnerable. ServeDC also used to have programing for young adults that may be worth reimplementing. |</p>
<table>
<thead>
<tr>
<th>Goal/Strategy</th>
<th>Lead Agency</th>
<th>Partners</th>
<th>2017 Outcome</th>
<th>Progress Code</th>
<th>June 2017 Update</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.2.2: Create and assist community supported, neighbor-to-neighbor networks across the city that are accessible to all income levels.</td>
<td>DCOA</td>
<td>DMHHS</td>
<td>Launch a village in ward 5, 7, and 8.</td>
<td></td>
<td>One new village was recently completed, and an additional one is close to completion.</td>
</tr>
<tr>
<td><strong>Domain 10: Elder Abuse, Neglect, and Fraud, a DC focus: Prevention and prosecution of financial exploitation, neglect, and physical, sexual, and emotional abuse of older adults</strong></td>
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<tr>
<td>Goal 10.1: Strengthen the elder abuse prevention, detection, and enforcement system.</td>
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<tr>
<td>10.1.1: Improve awareness about elder abuse among the public, unpaid caregivers, and non-healthcare mandated reporters.</td>
<td>DHS</td>
<td>DISB</td>
<td>Increase in the number of participants reached through presentations on how to detect and report elder abuse, neglect and fraud.</td>
<td></td>
<td>APS has printed 1,000 Senior $afe brochures and distributed them throughout the District at wellness centers and other locations around the city.</td>
</tr>
<tr>
<td>10.1.2: Provide training specific to elder abuse, neglect, and fraud to be obtained by in-service providers, licensed caseworkers, and caregivers working with older adults.</td>
<td>DOH</td>
<td>LCE U.S. Attorney’s Office, Community Prosecution Division</td>
<td>Provide specific training on elder abuse prevention.</td>
<td></td>
<td>APS runs a weekly presentation on Senior $afe at different wellness centers and other locations accessible to older adults. DISB and AARP’s Legal Counsel for the Elderly gave a presentation earlier this year on the Senior $afe program. They will also present to the National Society of Compliance Professionals in October of this year and hope to get interest nationwide on this program.</td>
</tr>
<tr>
<td>10.1.3: Develop programs to educate and protect vulnerable residents from scams.</td>
<td>OAG</td>
<td>DHCD DCOA DCRA OAG, MPD</td>
<td>Continual increase in number trained/reached through presentations.</td>
<td></td>
<td>Numbers of programs and participation has increased in DC since the last update in February.</td>
</tr>
<tr>
<td>10.1.4: Conduct a study to determine the amount of 'hidden' cases of elder abuse that are not reported.</td>
<td>DHS</td>
<td>STRATEGY WITHDRAWN</td>
<td></td>
<td></td>
<td>The Age-Friendly DC Task Force agreed that a study in DC was unnecessary, as studies elsewhere in the US have shown that there are many more unreported than reported cases of elder abuse, neglect and fraud. Instead the focus will be on prevention through education.</td>
</tr>
<tr>
<td>Goal 10.2: Improve cooperation and collaboration among agencies on cases of actual or suspected elder abuse.</td>
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<tr>
<td>10.2.1: Adult Protective Services and the DC Long Term Care Ombudsman Program (DCLTCOP) will collaborate on mutual issues, including investigations, and will share limited information accordingly.</td>
<td>DHS</td>
<td>MPD, LCE, DCOA, DBH, DHCF, DOH, OTA, DCRA, DHCD, CFSA, DYRS, DDS</td>
<td>Increased collaboration between Adult Protective Services and DCLTCOP.</td>
<td>Green</td>
<td>APS and the DCLTCOP continue to collaborate on cases when appropriate. 800 cases as of June 30, 2017</td>
</tr>
<tr>
<td>10.2.2: Enhance awareness by agencies and the public of the Health Regulation &amp; Licensing Administration's &quot;Online Professional License Search&quot; that provides names of health care professionals who have been disciplined by their respective Boards.</td>
<td>DOH</td>
<td>DHCF, DCOA</td>
<td>Increased awareness and usage of search engine.</td>
<td>Green</td>
<td>DOH has a hyperlink on its website that allows the public to search for licensing status and disciplinary actions of licensed health professionals. <a href="https://app.hpla.doh.dc.gov/Weblookup/">https://app.hpla.doh.dc.gov/Weblookup/</a></td>
</tr>
</tbody>
</table>

**Code**

- **44**: Significant progress or outcome achieved
- **25**: Moderate, steady progress
- **1**: Minimal or no progress
- **5**: Strategy withdrawn or moved