LEARNING COLLABORATIVE CONVENING

MARCH 5, 2020 | ALBANY
Health & Age Across All Policies Learning Collaborative

Convening 1: Planning for Success
March 5, 2020
Please take your seats

Schoharie County
Welcome

Schenectady County
HEALTH & AGE ACROSS ALL POLICIES

NORA O'BRIEN-SURIC
PRESIDENT

Health Foundation
for Western & Central New York
Agenda

10:00 Welcome
10:15 Panel discussion: NYS Health & Age Across All Policies
11:10 Break
11:15 Workshop
12:15 Lunch
1:15 Presentation: Dr. Mildred Warner
2:20 Break
2:30 Expert clinic sessions
3:15 Group discussions/networking/lessons learned
3:55 Closing remarks
Ground rules

• One person speaks at a time
• Step up, step back to avoid monopolizing
• Hear from everyone
• Explain acronyms
• Use “and” instead of “but”
• Ask clarifying questions
• Maintain focus on issues at hand
VISION
Everyone has the opportunity to live a healthy life

MISSION
Drive progress towards improved health through attaining health equity
HEALTH & AGE ACROSS ALL POLICIES

Nora OBrien-Suric
HFWCNY

Greg Olsen
NYS Office for the Aging

Mark Kissinger
NYS Department of Health

Paul Beyer
NYS Department of State

Mildred Warner
Cornell University

Bill Armbruster
AARP

Randy Hoak
AARP

Lindsay Goldman
The New York Academy of Medicine

Diane Kolack
The New York Academy of Medicine

Alyssa Kies
The New York Academy of Medicine
Panel Agenda

- Health and healthy aging
- Health & Age Across All Policies (HAAAP)
- Rationale for HAAAP
- Implementation
What factors influence health and healthy aging?
What is health?

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

– World Health Organization, 1948
What is healthy aging?

The process of developing and maintaining the functional ability that enables well-being in older age... [which] reflects the ongoing interaction between individuals and the environments they inhabit.

Healthy aging

Self-rated health (fair to poor health)

New York

Year: 2017
View by: Age Group

New York - 2017
Percentage of older adults who self-reported that their health is "fair" or "poor"
View by: Age Group

Mean number of days with activity limitations in the past month
View by: Age Group

Healthy People 2020 Target: No target specified.
Data Source: Behavioral Risk Factor Surveillance System (BRFSS)
What influences health across the lifespan?
What is Health & Age Across All Policies (HAAAP)?
NYS Executive Order 190

Mechanisms:
Planning / Procurement / Policy-making and Regulation through interagency collaboration at the state level

DEPT. OF HEALTH
NYS Prevention Agenda

DEPT. OF STATE
Smart Growth

OFFICE FOR THE AGING
8 Domains of Livability

Improved population health and health equity
Improved social and physical Environments
More efficient and effective government
Economic growth in NYS
The Executive Order supports efforts to:

- Improve alignment and coordination of the Prevention Agenda and Age-Friendly programs and policies across State entities and among public and private partners;
- Enable individuals to continue living in their communities in a manner consistent with their abilities and values;
- Expand opportunities for civic engagement;

(continued)

- Strengthen infrastructure for home and community-based services;
- Build toward a future in which every New Yorker can enjoy wellness, and quality of life in strong, healthy communities;
- Leverage technology, innovation, research, health care, and business to support healthy aging and the work of family caregivers;

Include healthy and Age-Friendly communities’ initiatives in programs that support community design, planning, zoning, and development; Promote caregiver support; Provide cost-effective, high-quality services to residents, especially older adults, adults with disabilities, and their caregivers; and Increase consumer accessibility to health and supportive services.

Components of Successful Implementation Nationwide

- Facilitate ongoing multi-sector collaboration.
- Develop a rubric for decision-making that considers health and aging.
- Maintain accountability.
Why do we need Health & Age Across All Policies (HAAAP)?
### FAMILY STRUCTURE in the United States

<table>
<thead>
<tr>
<th></th>
<th>Married couple families</th>
<th>Married couple families with children</th>
<th>Single parent households</th>
<th>Single person households</th>
<th>Non-traditional households</th>
</tr>
</thead>
</table>

### Change in Population Aged 60 and Over 2020 to 2030

<table>
<thead>
<tr>
<th>Proportion of County Population Aged 60 and Over</th>
<th>New York State 62 Counties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Counties with Specified Percent of Older Adults</td>
<td>Change in Population Aged 60 and Over 2020 to 2030</td>
</tr>
<tr>
<td>2020</td>
<td>2030</td>
</tr>
<tr>
<td>Less than 20%</td>
<td>3</td>
</tr>
<tr>
<td>20% to 24%</td>
<td>18</td>
</tr>
<tr>
<td>25% to 29%</td>
<td>32</td>
</tr>
<tr>
<td>30% and over</td>
<td>9</td>
</tr>
</tbody>
</table>

Shifting Demographics

New York's total population is over 19 million individuals, and the State ranks fourth in the nation in the number of adults age 60 and over – 4.3 million.

- 4.2 million people between the ages of 45-59
- 935,000 individuals age 60+ contribute 495 million hours of service at economic value of $13.8 billion
- 64% of individuals age 60+ who own their own homes and have no mortgage
- 4.1 million caregivers at any time in a year – economic value if paid for at market rate is $32 billion, average age is 64
Longevity Economy

Aggregate Personal Household Income by Age in NYS for people ages 45+ (2008 - 2012 ACS Data)

63% of total NYS Personal Income
$379 billion

Aggregate Personal Household Income by Age in NYS for people ages 45+ (2018 – ACS Data)

65% of total NYS Personal Income
$481.6 billion
50+ Longevity Economy

As people in the 50-plus cohort make purchases at grocery stores, retail outlets, restaurants, healthcare centers, and so on, money ripples through these providers’ supply chains.

- And the longer people remain in the labor market, the more they earn and have to spend

Accounts for a majority of the spending in several categories of goods and services, including:

- Healthcare;
- Nondurable goods;
- Durable goods, utilities;
- Motor vehicles and parts;
- Financial services; and
- Household goods.
Persistent Health Inequities
## Persistent Health Inequities

NYS DOH County Health Indicators by Race/Ethnicity (CHIRE)

### Albany Health Indicators by Race/Ethnicity, 2014-2016

<table>
<thead>
<tr>
<th>Health Indicator</th>
<th>Non-Hispanic</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>White</td>
<td>Black</td>
<td>Asian/Pacific Islander</td>
<td>Hispanic</td>
<td>Total</td>
</tr>
<tr>
<td>Population (2010)</td>
<td>227,739</td>
<td>41,471</td>
<td>21,056</td>
<td>18,015</td>
<td>308,840</td>
</tr>
<tr>
<td>Percentage of population (2016)</td>
<td>73.7%</td>
<td>13.4%</td>
<td>6.8%</td>
<td>5.8%</td>
<td>100.0%</td>
</tr>
<tr>
<td>Median annual household income in US dollars (2012-2016)</td>
<td>67,244</td>
<td>31,739</td>
<td>65,595</td>
<td>36,827</td>
<td>60,904</td>
</tr>
<tr>
<td>Percentage of families below poverty (2012-2016)</td>
<td>4.2%</td>
<td>24.2%</td>
<td>8.9%</td>
<td>21.5%</td>
<td>7.3%</td>
</tr>
</tbody>
</table>

### General Health Indicators

<table>
<thead>
<tr>
<th>Health Indicator</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total mortality per 100,000 population, age-adjusted</td>
<td>674.0</td>
<td>744.2</td>
<td>296.8</td>
<td>509.9</td>
<td>676.7</td>
</tr>
<tr>
<td>Percentage of premature deaths (&lt; 75 years)</td>
<td>34.3%</td>
<td>66.0%</td>
<td>51.6%</td>
<td>66.2%</td>
<td>38.0%</td>
</tr>
<tr>
<td>Years of potential life lost per 100,000 population, age-adjusted</td>
<td>5,268.5</td>
<td>8,614.6</td>
<td>2,073.1</td>
<td>4,790.5</td>
<td>5,625.9</td>
</tr>
</tbody>
</table>

### Heart Disease and Stroke Indicators

<table>
<thead>
<tr>
<th>Health Indicator</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Diseases of the heart mortality per 100,000 population, age-adjusted</td>
<td>171.3</td>
<td>177.5</td>
<td>71.0</td>
<td>124.1</td>
<td>171.0</td>
</tr>
<tr>
<td>Diseases of the heart hospitalizations per 10,000 population, age-adjusted (2012-2014)</td>
<td>64.3</td>
<td>100.4</td>
<td>14.6</td>
<td>41.7</td>
<td>69.7</td>
</tr>
<tr>
<td>Cerebrovascular disease (stroke) mortality per 100,000 population, age-adjusted</td>
<td>26.2</td>
<td>25.1</td>
<td>25.5*</td>
<td>19.1*</td>
<td>26.9</td>
</tr>
<tr>
<td>Cerebrovascular disease (stroke) hospitalizations per 10,000 population, age-adjusted (2012-2014)</td>
<td>17.7</td>
<td>30.5</td>
<td>6.6</td>
<td>12.4</td>
<td>19.5</td>
</tr>
</tbody>
</table>

Maximize Resources

The Five Pillars of Collective Impact

- It starts with a common agenda.
- It establishes shared measurement.
- It fosters mutually reinforcing activities.
- It encourages continuous communication.
- And it has a strong backbone.
How is New York State implementing Health & Age Across All Polices?
HEALTH & AGE ACROSS ALL POLICIES

GREG OLSEN
DIRECTOR
NEW YORK STATE OFFICE FOR THE AGING
In March 2017, the NYS Steering Committee agencies were asked to complete a detailed matrix indicating which of their programs were working to improve health and promote healthy aging.

Across the 14 agencies, 235 projects were working to address Prevention Agenda priorities and 332 projects were working to address the WHO Eight Domains.
NYSOFA
2019-23 State Plan
Supporting Aging in Place – Age Friendly New York State

Programs and services administered by NYSOFa and provided directly or indirectly via AAAs are all designed to support aging in place. There has been a movement however to also promote changes in how communities are planned for, designed or redesigned that consider features that are important for people of all ages to help make them more livable. Prior to the WHO/AAARP designation of Age Friendly communities, NYSOFa created Livable New York. All Livable New York activities are now part of the Governor’s priority to make NYS the first age friendly state in the country.

Significant demographic, public policy, economic, environmental, and social “change-drivers” are transforming New York’s communities and the circumstances and conditions under which the tasks and activities affecting residents’ quality of life are planned and implemented. In the face of such forces, municipalities are searching for assistance to employ proven, often innovative models and strategies to improve the quality of life and well-being (livability) of their neighborhoods—to create communities that all residents say are good places to live, work, grow up, and grow old.

Through Governor Cuomo’s efforts, in 2017, New York State was designated the first age-friendly state in the nation by the World Health Organization (WHO) and AARP. This achievement was a result of the Governor’s directive to include healthy aging in state agency policymaking, an effort that will result in more livable communities for people of all ages and enable more New Yorkers to age comfortably in their homes. Municipalities throughout the country, including 21 in New York, have earned the age-friendly designation, but New York is the first state to have achieved this honor.

To achieve this designation, New York ranked high in the eight age-friendly and livable community domains outlined by WHO and AARP, which include:

- Outdoor spaces and buildings;
- Transportation;
- Housing;
- Social participation;
- Respect and social inclusion;
- Work and civic engagement;
- Communication and information; and
- Community and health services.

Age friendly in New York State is not just about old age—it is about the collective value of
Supporting Aging in Place – Age Friendly State

Objectives:
2.9 Embed the 8 domains of age friendly and healthy aging in government work.
2.10 Increase the number of communities officially signed on as WHO/WHO certified Age Friendly.
2.11 Market the benefits of Age Friendly domains to the general public, businesses, and public and private organizations.
2.12 Embed age friendly goals and objectives in the counties’ next four-year plan to the state.
2.13 Provide data to the general public regarding the value older New Yorkers are to their families and communities.

Strategies:
• Work with the Health Access All Policies interagency workgroup to provide assistance to agencies on embedding healthy aging and the 8 domains of livability in their state and local plans and procurement.
• Release an RFA to fund communities to be designated as age friendly, replicate NYS Age Friendly executive order and create Age Friendly Regional Assistance Centers.
• Continue to demonstrate the value of older New Yorkers economically, socially and intellectually to their families and communities, to combat ageism and stereotypes.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Expected Outcome</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.9</td>
<td>Guidance documents will be created to assist state agencies in implementing healthy aging in their work.</td>
<td>2020</td>
</tr>
<tr>
<td>2.9</td>
<td>Review, comment and offer guidance to agencies on their local, state and federal plans embedding healthy aging and the 8 domains of age friendly as appropriate.</td>
<td>2021</td>
</tr>
<tr>
<td>2.10</td>
<td>Increase by 10 the number of communities who commit to receiving age friendly certification by WHO/WHO and WHO/WHO via RFA.</td>
<td>2022</td>
</tr>
<tr>
<td>2.10</td>
<td>Develop Regional Age Friendly Technical Assistance Resource Centers and Learning Collaborative.</td>
<td>2022</td>
</tr>
<tr>
<td>2.11</td>
<td>Present the Governor’s vision for a health across all policies approach and healthy aging to all 10 Regional Economic Development Councils.</td>
<td>2023</td>
</tr>
<tr>
<td>2.11</td>
<td>Present the Governor’s vision for a health across all policies approach and healthy aging to community groups, philanthropy, conferences and other appropriate public venues.</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

2.12 Age friendly domains will be included in county plans to the state.
2.13 Provide data that shows the value older New Yorkers are through their incomes, volunteerism, civic engagement, mentorship and through the workforce to combat ageism.
2.11 Interventions to counteract ageism in mental health.
Question 7. Complete planning roster for three or more needs which have been determined to be a priority for the AAA through the needs assessment process. For each of the three or more needs, complete:

- Name Need (a brief name to create the roster entry)
- Description of Need
- Domain(s): Select one or more Domains

Eight age-friendly and livable community domains, outlined by WHO and AARP, include:

- Outdoor spaces and buildings;
- Transportation;
- Housing;
- Social participation;
- Respect and social inclusion;
- Work and civic engagement;
- Communication and information; and
- Community and health services.


- Plan to address need over next four years (including goal(s) and objective(s), i.e. developing, expanding or modifying services; increasing efficiency; coordinating across service delivery types; participation in interagency meetings, committees and boards; coordinating funding proposals with other organizations; establishing linkages with other agencies; increasing the availability of dementia-capable services and supports to individuals with Alzheimer's disease and related dementias and their caregivers.)
Other Agency Actions to Advance Approach

• **New York State Energy, Research and Development Agency (NYSERDA)**
  • Working on energy efficiency and resiliency across the state, especially regarding driving and affordable housing
  • Energy efficiency can also be considered in health facilities, nursing homes, and hospitals in order to improve living conditions and save money for older New Yorkers.
  • Working to:
    • get more older adults to consider energy efficient housing
    • make efficiency part of community planning efforts
    • work with Homes and Community Renewal (HCR) to expand houses to weatherize
  • Working on Green and Health Homes Initiative that integrates efficiency to lower energy burden and add educational components.
  • Retrofit NY – Set design criteria to create energy efficient buildings
    • Opportunity to set criteria for development projects and design of buildings
  • Working on better lighting options (LED) to improve people’s ability to get around at night as well as increase activities.
  • Electric car expansion to reduce air pollution and expand ride sharing options

• **Department of State**
  • Using state contracting to incorporate a list of specific principals related to health and healthy aging as a criterion for the procurement process and selecting contractors that can promote designs for health and physical activity. This is especially important for departments with large procurement contracts like DOT and Dept. of Housing.
Other Agency Actions to Advance Approach

- **Deputy Secretary for the Environment**
  - Addressing air pollution to reduce 1 in 10 emergency hospitalizations and 2700 premature deaths.
    - Expanding use of electric vehicles, especially in Metro areas, as they cut down on ozone and particulate rates of air pollution.
    - Toxicity reduction work (i.e. toxicity in what people eat, etc.)

- **Parks & Recreation**
  - Parks has outdoor recreation initiatives and is working with DOH to implement a federal grant via a Tai Chi program for fall prevention. Park staff are trained to provide Tai Chi in parks. Parks is also expanding access to outdoor facilities and trails.
  - Focusing on getting young people out to parks, and possibly carving out a role for older adults to be included to act as "outdoor ambassadors".
  - Swim programs that teach kids to swim for free in parks and free park access on weekdays, ages 62+.
  - Studying whether there is a way to use technology in the parks such as a walking app that describes the trail, tracks distance, and determines number of calories burned.

- **Department of Transportation**
  - DoT considers the “active design” aspect when they look at contracts to work on complete streets, and are enhancing this feature in their selection process.
  - Expanding Bike share programs and downtown revitalization program.
  - Working on expanding the understanding of the opportunities that transportation presents for other agencies, in that transportation is relevant to all fields because people need a way to access these services and facilities.
Other Agency Actions to Advance Approach

- **Housing and Community Renewal**
  - Working on green building sustainability and active design incorporation into new and existing housing
  - Considering proximity of housing to transit services as well as use of low emission building materials, day light and stairways lighting
  - Designing buildings to promote physical activity
  - Considering a transition of certain optional health requirements in buildings to required, such as smoking, now optional, to smoke free.
  - Considering implementing the Healthy Housing concept – providing linkages to services and healthier supportive housing for aging and vulnerable populations

- **Office of Alcohol and Substance Abuse Services**
  - Working on Hepatitis C initiative as well as prevention of underage drinking in SUNY and CUNY campuses
  - Supporting recovery Centers for people to maintain healthy lifestyles in the comfort of their treatment facilities and new residential treatment centers with renewed structures geared to healthy lifestyles.

**Office of Mental Health**

- Working to identify socially isolated people and connect them with supports (friends, family, etc.).
  - Utilizes local postal workers to check on isolated older adults and link to services
  - Created resources to help out-of-state families seek services for their in-state relatives.
  - Geriatric Mental Health – tri-partnership
  - Anti-stigma campaign

- **Office of General Services**
  - Implement no smoking policy
    - Enforcing no smoking within 25 feet of entrances to buildings
  - Work with implementing healthy foods in communities in collaborate with Ag & Markets
  - Brining farmer’s markets to state buildings
  - Added benches and Farmer’s Market to Concourse to accommodate visitors
  - Work with Ag & Markets to increase Taste NY Stores – Fresh foods in NY
  - OGS has program space for other agencies to host healthy programs
HEALTH & AGE ACROSS ALL POLICIES

PAUL Beyer
DIRECTOR OF SMART GROWTH PLANNING
OFFICE OF PLANNING, DEVELOPMENT & COMMUNITY INFRASTRUCTURE
NEW YORK STATE DEPARTMENT OF STATE
FOLLOW THE $$

Age-Friendly NY/Health Across All Policies in State Funding and Messaging
Downtown Revitalization Initiative

$100 Million State Investment in 10 downtown neighborhoods nominated by REDCs

Strategic Investment Plans will identify projects funded through the DRI and other public & private resources
DOWNTOWN REVITALIZATION INITIATIVE

AGE-/HEALTH FRIENDLY COMMUNITY PRINCIPLES

• Eligibility for Age-Friendly Community Certification from AARP/WHO.
• Community design and/or housing that caters to all ages.
• Application of Complete Streets principles that add to the enjoyment of amenities by all abilities and ages
• Access to health care facilities
• Community spaces, institutions and events that reflect the ethnic, cultural, and religious diversity of the population of the state
• Academic, cultural and entertainment amenities
ENERGY AND CLIMATE CHANGE

Health Impacts of Climate Change—Disease; Extreme heat/heat island effect; Impact of frequent, severe storms on vulnerable populations; water contamination from flooding...

NYSERDA Net-Zero for Economic Development Funding

“Does the proposed project community health in support of NYS’s Prevention Agenda priorities. If yes, please describe how the project supports age-friendly communities by impacting the ability of individuals to continue living in their communities in a manner consistent with their abilities, and the project’s approaches that build toward a future in which every New Yorker can enjoy wellness, longevity and quality of life in healthy communities.”
CLIMATE CHANGE IN AGE-FRIENDLY NY

Bonus points for applicants that have achieved DEC Climate-Smart Communities certification or NYSEDA Clean Energy Communities Designation
“2019 Program Focus: Age-Friendly Communities

Applicants are encouraged to submit projects that enhance age-friendly characteristics of Park communities... Applicants are encouraged to describe how their smart growth project addresses age-friendly inclusion in these domains.”
DOS SMART GROWTH PLANNING GRANT PROGRAM

$1 Million to partially fund this initiative
Effective Messaging...

“Vital Brooklyn also supports Governor Cuomo's "Health Across All Policies/Age-Friendly NY" Executive Order, which directs state agencies to incorporate the principles of age-and health-friendly communities into all relevant programs and policies. The effort supports access to healthy food and safe and clean outdoor public space and expands opportunities for outdoor recreation.”
HEALTH & AGE ACROSS ALL POLICIES

MARK KISSINGER
SPECIAL ADVISOR TO THE COMMISSIONER OF HEALTH
NEW YORK STATE DEPARTMENT OF HEALTH
OFFICE OF PRIMARY CARE AND HEALTH SYSTEMS MANAGEMENT
New York State Age-Friendly Health System Initiative

In 2018, the Governor set a goal of making 50 percent of New York State’s health systems age-friendly within the next five years.

The Institute for Healthcare Improvement and John A. Hartford Foundation launched a national campaign to make 20 percent of all U.S hospitals and medical practices age-friendly by 2020.

To work collectively toward each other’s goals, New York State has partnered with the Institute for Healthcare Improvement and John A. Hartford Foundation.
The 4Ms Framework

John A. Hartford Foundation and the Institute for Healthcare Improvement came together with a core team to research and design the 4Ms Framework.

Previous evidence-based geriatric care models were effective but often can be difficult to disseminate and scale, difficult to reproduce in settings with less resources, and may not translate across care settings.

The 4M Framework was developed to create a system wide evidence-based geriatric care model so that all care with older adults is age-friendly care.
The 4Ms

The 4Ms are evidence-based practices that define how a health system can become age-friendly:

• What Matters: Know and align care with each older adult’s specific health outcome goals and care preferences.

• Medication: If medication is necessary, use age-friendly medications that do not interfere with What Matters, Mobility, or Mentation across care settings.

• Mentation: Prevent, identify, treat, and manage dementia, depression, and delirium across care settings.

• Mobility: Ensure that older adults move safely every day in order to maintain function and do What Matters.
Action Community

- Participate in 90 minute interactive webinars
  - Monthly content calls focused on 4Ms
  - Opportunity to share progress with other teams by brief case study

- In person meetings
  - One all team meeting
  - Live case visits: Bilateral structured visits to nearby mentor AFHSs

- Test Age-Friendly interventions in between
  - Test implementing specific changes in your practice

- Share data on a standard set of Age-Friendly measures
  - Submit a data dashboard on a standard set of process and outcome measures

- Join topical, peer coaching sessions
  - Join similar teams on topics you prioritize e.g. EHRs, Rural/Urban

- Leadership track to Support System-level scale up
  - Monthly C-suite/Board level calls to set local conditions for spread

7 Months
Next Steps for New York State

This year the Department is looking to:

• Develop a targeted outreach campaign to educate health systems on what it means to be age-friendly, and why it is important.

• Explore opportunities to incorporate Age-Friendly Health System priorities into State procurement and policy language.

• Work with health foundations and other funders to support health systems looking to become age-friendly.
Local Implementation support

- Health Foundation for Western & Central New York
- Department of State
- Health
- THE NEW YORK ACADEMY OF MEDICINE
- Aging
- AARP® Real Possibilities
Local Implementation support

Daniel and Andrew from Public Allies (AmeriCorps) will support Health & Age Across All Policies efforts throughout NYS from March through December 2020. Based in Albany, they may be able to assist teams with remote tasks such as research.
### Local Implementation

<table>
<thead>
<tr>
<th>Replicate the Executive Order</th>
<th>Certify Livable Communities</th>
<th>Establish Centers for Excellence</th>
</tr>
</thead>
</table>
| • Replicating the Executive Order will provide counties with the opportunity to incorporate health and aging in their decision-making for planning, policymaking, and procurement. | • Counties will conduct an assessment of age-friendliness and then a 3-year action plan.  
  • Plans will leverage the social, economic, and intellectual capital of older adults to involve them in the planning and execution of livable communities. | • Centers for Excellence will spread and scale best practices and provide the basis for a network of cross-sector collaborations supporting systems change. |
Local Implementation

<table>
<thead>
<tr>
<th>Executive Order 190</th>
<th>1</th>
<th>Herkimer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2</td>
<td>Ontario</td>
</tr>
<tr>
<td></td>
<td>3</td>
<td>Orange</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Schoharie</td>
</tr>
<tr>
<td>Cert. Age-friendly</td>
<td>5</td>
<td>Broome</td>
</tr>
<tr>
<td></td>
<td>6</td>
<td>Monroe</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>Nassau</td>
</tr>
<tr>
<td></td>
<td>8</td>
<td>Onondaga</td>
</tr>
<tr>
<td></td>
<td>9</td>
<td>Oswego</td>
</tr>
<tr>
<td></td>
<td>10</td>
<td>Saratoga</td>
</tr>
<tr>
<td></td>
<td>11</td>
<td>Schenectady</td>
</tr>
<tr>
<td></td>
<td>12</td>
<td>Ulster</td>
</tr>
<tr>
<td>HAAAP Centers for Excellence</td>
<td>13</td>
<td>Nassau</td>
</tr>
<tr>
<td></td>
<td>14</td>
<td>Rockland</td>
</tr>
<tr>
<td></td>
<td>15</td>
<td>Erie</td>
</tr>
<tr>
<td></td>
<td>16</td>
<td>Oneida</td>
</tr>
<tr>
<td></td>
<td>17</td>
<td>Tompkins</td>
</tr>
</tbody>
</table>
Conclusion

- Health and healthy aging are influenced by systemic, environmental, and behavioral factors.

- HAAAP is a collaborative approach to improving health by considering the NYS Prevention Agenda priorities, the WHO 8 Domains of Livability, and Smart Growth principles in government planning, policymaking, and procurement.

- Collective Impact is a process that can help identify the co-benefits of partnering and facilitate cooperation.

- By harnessing state and local implementation approach simultaneously, this initiative will catalyze the momentum of both to support better health for all New Yorkers.
Break
Please return in 5 minutes

Ulster County
Innovation Inventory

Complete the checklists for work that aligns with:
- Executive Order 190 goals
- Smart Growth principles
- WHO 8 Domains of Livability
- New York State Prevention Agenda priorities

Then, choose one innovative strategy or initiative to share

- What is novel or unique? Does it serve a particular population?
- How might you leverage Executive Order 190 to support your work?
- What advice would you give to another county who wants to try something similar?
Please return your paper 2-page event survey before you leave for the day.

**Convening 1: Planning for Success**

**ATTENDEE SURVEY**

_Empire State Plaza Convention Center | Albany, New York_

_March 5th, 2020_

1. Please select the team you represent:
   - [ ] Bronx
   - [ ] Erie
   - [ ] Nassau
   - [ ] NYS Health & Age Across All Policies
   - [ ] New York City
   - [ ] Oswego
   - [ ] Orange
   - [ ] Westchester
   - [ ] Ulster
   - [ ] Other

2. How relevant was the March 5th HAARP Convening to your current work?
   - [ ] Extremely relevant
   - [ ] Somewhat relevant
   - [ ] Neither relevant nor irrelevant
   - [ ] Somewhat irrelevant
   - [ ] Extremely irrelevant

3. In which of the following aspects of the event were you most interested?
   - [ ] Panel with NYS Health & Age Across All Policies team
   - [ ] Morning Workshop
   - [ ] Presentation by Professor Mildred Warner on Planning for All Ages
   - [ ] QA with panelsists and speakers
   - [ ] Expert clinic session on Livable Communities with Bill Armbruster and Randy Hask
   - [ ] Expert clinic session on Visualizing data with Lindsey Goldman
   - [ ] Group discussions

4. How satisfied were you with the following?

<table>
<thead>
<tr>
<th>Extremely</th>
<th>Somewhat</th>
<th>Neither</th>
<th>Somewhat</th>
<th>Extremely</th>
</tr>
</thead>
</table>

5. Please indicate the extent to which you agree with each statement:

<table>
<thead>
<tr>
<th>The March 5th HAARP Convening helped me to...</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Undecided</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understand what influences health and healthy aging across the lifespan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Explain how NYS Executive Order 150 can be adapted for local implementation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identify examples of how Health Age Across All Policies is implemented in NYS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Explain how multi-generational planning can improve health</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Make connections with other people who are working on HAARP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. For the clinic session you attended, please indicate the extent to which you agree:

<table>
<thead>
<tr>
<th>The Expert clinic session I attended helped me to...</th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Undecided</th>
<th>Disagree</th>
<th>Strongly disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understand the HAARP</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age-friendly program cycle</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understand how data can be used to communicate impact</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

7. What was your biggest takeaway?

8. Is there anything else you would like to share with us?
Lunch
Please return by 1:15pm
### Goals of the Program:
1. Implement age friendly/livable community and healthy aging elements into county plans via county executive order or other similarly binding resolution;
2. To assist communities in achieving age friendly designation by AARP;
3. Develop an Age-Friendly Center of Excellence; and
4. Consider and apply relevant principles of smart growth in age-/health-friendly community outcomes.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Measurable Outcomes</th>
<th>Deliverables</th>
<th>Due Date</th>
</tr>
</thead>
</table>
| Replicate Governor Cuomo's Executive Order #190 at the county level *(For Options 1 and 3)* | 1. County passed Executive Order or other binding document (i.e. resolution) similar to Governor Cuomo's Executive Order #190 that incorporates age friendly concepts in government planning, contracting and procurement that furthers the goals of incorporating healthy aging and livability features in the development of policies, guidance, regulations and proposed legislation.  
2. Participation and engagement in the Health Across All Policies / Age Friendly Learning Collaborative.  
3. Consideration and incorporation of relevant smart growth principles in the planning and implementation process. | 1. Written county executive order or similarly binding county passed document.  
2. Attend 3 convening meetings; participate in 4 webinars; participate in needs assessment by phone; and complete web-based participant assessment surveys.  
3. Create a collaborative, interdisciplinary/interdepartmental governance mechanism to implement the grant, which includes planning departments, professionals and/or officials. | 1. June 2021  
2. June 2021  
3. June 2021 |
| Assist county or municipality in achieving age friendly designation by AARP via participating in age-friendly | 1. Acceptance into the WHO’s Global Network of Age-Friendly Cities and Communities.  
2. Establishment of mechanisms to involve older people throughout the Age-Friendly cycle.  
3. A baseline assessment of the age-friendliness of the community.  
4. Development of a 3-year community plan of action based on assessment findings.  
5. Identification of indicators to monitor progress. | 1. Submission of application to AARP with letter of commitment from county or municipal exec. leadership.  
2. Outreach plan describing how older people and the community at large will be engaged to participate.  
3. Completed survey instrument and surveys from the public creating baseline assessment for age-friendliness.  
4. Written 3-year community plan of action based | 1. September 2020  
2. September 2020  
3. January 2021  
4. June 2021  
5. June 2021  
6. June 2021  
7. June 2021  
8. June 2021 |
<table>
<thead>
<tr>
<th>Communities Program Cycle (For Options 2 and 3)</th>
<th>Develop an Age-Friendly Center of Excellence (COE) (For Option 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6. Commitment to implement step 3 (implementation and evaluation) and step 4 (continuous improvement) of the Age Friendly Communities Program Cycle.</td>
<td>1. Documentation that Center of Excellence was created.</td>
</tr>
<tr>
<td>7. Participation and engagement in the Health Across All Policies / Age Friendly Learning Collaborative.</td>
<td>2. Attend 3 convening meetings; participate in 4 general webinars; participate in 2 COE webinars; participate in 4 COE conference calls; participate in learning collaborative needs assessment by phone; and complete web-based participant assessment surveys.</td>
</tr>
<tr>
<td>8. Consideration and incorporation of relevant smart growth principles in the planning and implementation process.</td>
<td>3. Demonstrate that materials developed for distribution by COE contain smart growth principles and services.</td>
</tr>
</tbody>
</table>

- Written monitoring tool to measure progress.
- Written plan to implement Steps 3 and 4 the Age Friendly Communities Program Cycle.
- Attend 3 convening meetings; participate in 4 webinars; participate in needs assessment by phone; and complete web-based participant assessment surveys.
- Create a collaborative, interdisciplinary/interdepartmental governance mechanism to implement the grant, which includes planning departments, professionals and/or officials.

1. June 2021
2. June 2021
3. June 2021
The Age-Friendly Process and Program Cycle

Members of the AARP Network of Age-Friendly States and Communities commit to an assessment process and cycle of continuous improvement, the steps of which typically require the member community to:

1. Establish a way — such as through a commission, advisory panel or focus groups — to include older residents in all stages of the age-friendly planning and implementation process

2. Conduct a community needs assessment (AARP can provide survey examples, templates and an online tool in English and Spanish)

3. Develop an action and evaluation plan based on the assessment results

4. Submit the plan for review by AARP

5. Implement and work toward the goals of the plan

6. Share solutions, successes and best practices with AARP

7. Assess the plan’s impact and submit progress reports

8. Repeat!

https://www.aarp.org/