## Creating and leading policy, systems, and environmental changes to improve older adult health and well-being

Initiate and lead efforts to join the Age-Friendly Communities network and align public health work in the social determinants of health with the AARP's eight domains of livability.

Create or expand a community coalition or task force on healthy aging that engages multi-sector agencies and organizations working to improve the livability of the community.

Create a comprehensive community action plan with set goals and a timeline to achieve them.

Use the 2020 Census to assess whether the county has the appropriate level of support and resources for the fast-growing older adult population and invest in prevention for adults ages 50-64.

Support neighborhood improvement and incorporate sidewalks, paths, and recreation areas to include older adults into community design and streets policy.

Assess the Healthy Aging Continuum of Care and ensure that services are available for the needs of individuals with Alzheimer's and related dementias, as well as their caregivers.

Perform a fall risk assessment in elder care facilities and fine tune the design of special needs shelters including the traffic flow plan around registration, meal distribution, and restroom access.

Develop a plan for emergency preparedness and enlist community volunteers and a broader workforce to ensure registration of vulnerable older adults for emergency special needs shelters.

Ensure elder care facilities have the capacity to provide medications, vaccinations, and medical supplies to a large community during public health emergencies.

Complete a policy/practice environmental scan of county departments including social determinants of health.

Improve Community Health Improvement Plans to ensure it addresses older adult health and increases older adults' ability to remain in a non-institutionalized setting by receiving in- home community-based services.

Educate the community on ACEs to increase awareness of their impact on health over a lifetime.

Assess housing access and perform assessments on safety of housing for aging adults in your community

Dedicate funding for healthy aging staff positions or shared positions with other agencies

Analyze how internal organizational policies and relevant public policies (such as mandated funding streams) impact health/health inequities among older adults.

Connecting and convening multi-sector stakeholders to address the health and social challenges of older adults through collective impact approaches

Create multi-sector coalitions that meet monthly to identify and meet the needs of the county's older adults. Through the coalition, the county DOH can engage new and existing partners in the aging sector including Area Agency on Aging, community cooperatives, public libraries, senior citizens centers, Office of Attorney General, non-profit service delivery organizations, local Universities with healthy aging and nutrition initiatives, farmers markets, and older adult residents.

Engage partners in the community, such as the area agency on aging, to promote educational initiatives on healthy living, nutrition, exercise, immunizations, tobacco use, and diabetes prevention.

Work with housing non-profits and developers to educate on the benefits of universal design to increase access for older adults.

Partner with transportation stakeholders to elicit support from a local hospital to pay for non-emergency medical trips for older adults.

Strengthen partnerships with community paramedics to provide care coordination for older adults when discharged from hospitals and DMEs, including wheelchairs and blood pressure kits.

Develop or expand work with local universities and train public health nursing students in focus group facilitation skills to gather assessment data on the needs of older adults. The DOH can also offer internships for students in public health and Aging Studies programs.

Use the community coalition or task force on aging to provide the opportunity for stakeholders to collect and share program information and resources. The coalition can develop and disseminate best practices into a paper and electronic resource guide of services.

Work closely with community paramedics to provide care coordination for older adults when discharged from the hospital.

Foster partnerships with schools of public health to include equitable healthing aging education in curricula and support equitable healthy aging research and fellowships

Build cross-sector collaboration to hold provider networks and other public health system partners accountable for advancing healthy aging Consider the need to balance stakeholder organizations that represent the aging populations with community members who are part of the aging population and their caregivers

Assesses each partner's understanding and commitment to equitable health equity and related concept of equitable healthy aging, their role in addressing inequities and analysis of existing interventions across socio-ecological spectrum (i.e., individual, organizational, systemic, and structural level).

Coordinating existing supports and services to help older adults, families, and caregivers navigate and access services and supports, avoid, duplication, and promote a seamless system of care.

Adapt existing tools to assess agency programs across the county that address older adults and use the results to engage county leaders in Age-Friendly Communities efforts.

Use community outreach staff to offer education and selfmonitoring blood pressure programs as well as free biometric health screenings and individualized health counseling at facilities such as senior citizen centers community centers and the local library.

Engage partners that distribute food and senior centers to provide flu and COVID-19 vaccines to participants.

Support walking groups in 55+ communities to reduce social isolation and increase activity and encourage health providers to offer Physical Activity Prescriptions with older adults.

Engage aging health facilities to provide care coordination for older adults including fall awareness and prevention, fall risk assessment, medication management review, hearing assessment, blood pressure check, and balance assessment.

Community Health Improvement Plan can incorporate the needs and struggles of older adults dealing with Adverse Childhood Experiences (ACEs), both as a victim of ACEs and as a guardian of those impacted by ACEs.

Create information "hub" for easy access to healthy aging resources and services

Work with health care providers to educate their workforce about healthy aging best practices and evidence aimed at eliminating practices that overtly or implicitly discriminate based on social class, language, gender identity, race and ethnicity, disability, etc

Determine organizational resources to meet diverse needs of older adults across a variety of social identities and positions (e.g., LGBT, socio-economic status, etc.)

Collecting, analyzing, and translating relevant and robust data on older adults to identify the needs and assets of a community and inform the development of interventions through community-wide assessment.

Use data from local community health assessment resources to engage DOH senior leadership on the need to address older adult health. DOH can further identify issues such as the need to focus prevention programs on the 50-64 age group, which is the fastest growing demographic in the county, as well as to analyze fall prevalence as one of the largest risks among older adults, resulting in the inclusion of fall prevention in the community health improvement plan.

Include older adults as a target population within existing health priorities and leverage community health assessment results to engage partners for Age-Friendly Community efforts.

DOH can expand their community health questionnaire to target older adults, which will lead to prioritization of older adult health.

Expand the community health assessment indicators to include older adult health issues.

Conduct a scan of programs to better target services and funding towards issues effecting older adults such as mental health, social isolation, and grandparents raising grandchildren.

Conduct a scan of internal programs, policies, and plans to ensure a focus on older adults, and conduct an external scan of partners, policies and practices to identify gaps in services.

Align county community health improvement plan with a focus on Alzheimer's Disease as a health priority.

Share information from the AFPHS convening with the community health improvement planning group.

Prioritize housing for older adults in county Community Health Improvement plans.

Report data on reductions in the rate of injuries and deaths due to falls in Community Health Improvement plans.

Gather input from older adult residents on their community and educational needs through focus groups, door-to-door community tours, and community meetings.

Conduct an assessment of the livability needs of older adults and share results with the community to inform the Age-Friendly Action Plan.

Conduct gap analyses of the aging data sources to determine what may be missing with core socio-demographic characteristics (race, ethnicity, male/female, LGBT, marital status, living alone, English-speaking, income and poverty status).

Communicating important public health information to promote and support older adult health and well-being, including conducting and disseminating research findings, and emerging and best practices to support healthy aging

Develop handouts for older adults focused on suicide prevention and included resources for the older adult population on mental health and suicide prevention.

Create or leverage existing county-wide PSAs to make a video on all of the county programs and services targeted toward older adults.

Create an informational brief to share key data on the county's older adult population in community meetings and other venues to educate and engage partners in healthy aging.

Disseminate press releases on Facebook to better target older adult residents with a comprehensive list of benefits for all older adults and prevention programs.

Have a community Health Educator facilitate Grandparents Raising Grandchildren meetings and provide health and wellness information. The county can become a regular source of information on health for local magazines aimed at older adults.

Mail flyers to primary care providers and promote program awareness using radio spots and digital ads.

Provide health-related education materials to local faithbased organizations, including brief messages for organizations to use in bulletins, newsletters, etc.

Initiate education campaign among government/organization staff to counter ageism and other stigmas associated with age and intersecting social positions

Provide outreach education and mobilize community champions on issues pertaining to equitable healthy aging

Adapt communication to ensure effective messaging across diversity of older adult abilities, learning styles, and access including vision, hearing and literacy

Leverage an existing county-wide PSA opportunity to create a video on all of the county programs and services targeted toward older adults

Complementing existing health promoting programs to ensure they are adequately meeting the needs of older adults

DOH can work with county health services to expand access to mental health screenings and referrals to clinical services.

Implement a healthy aging in parks program to provide physical prescriptions to increase physical activity among older adults.

Work with local food banks to expand access to nutritious meals for older adults, providing food totes with nutrition messaging, and linking residents to SNAP benefits.

DOH can support educational sessions to clients of senior centers on topics such as diabetes self-management, nutrition, heart health, and chronic disease prevention.

Inform, educate, complement, and supplement partners and businesses in the planning and delivery of services for the aging population. Target low-income older adults in nutrition education programs.

Hire a health educator to provide training for the Area Agency on Aging in evidence-based workshops for older adults in order to help expand the number of workshops that can be offered.

Implement a personal preparedness education and resource program for vulnerable populations including older adults and persons with special health and medical needs and provide age-friendly diabetes prevention and other health education programs in older adult housing communities and at community center-based older adult activity groups.

Create ongoing learning opportunities for staff on agerelated conditions, syndromes and evidence-based practices that incorporates disparities and works towards equity

Work with partners to identify institutional practices such as allocation methods and eligibility requirements that lead to inequitable health as people age.

Work with urban planners and recreation departments to inform and embed age-friendly park features and healthy aging in parks and socially-connected communities.