

**NH Alliance for Healthy Aging Strategic Group Summary**  
**March 2017**

**Strategic Group:** Advocacy

**Strategic area:** Develop an advocacy infrastructure to enhance support for aging issues.

**Summary:** The advocacy group meets a minimum of monthly. NHLA has established a steering committee for the scope of their work. This group also meets a minimum of monthly. NHLA and the advocacy group continue to track legislation that impacts the aging population in NH. The group has drafted talking points related to the ask for a 5% increase for home and community based providers. The group is also drafting a letter of support for this ask and will be disseminating information regarding hearing dates to encourage providers and consumers to attend. A survey has been drafted to identify advocacy resources and skills of organizations in NH. **Next Steps:** Advocacy group members will be attending legislative hearings, disseminate information to stakeholders and requesting support from stakeholders. The asset mapping survey will be sent out to stakeholders.

**Strategic Group:** Care Coordination

**Strategic area:** Improve care coordination for older adults involving medical, mental health, social, community, and oral health services.

**Summary:** The care coordination group has identified two possible goals: 1) Inform the public about care coordination and availability through the creation of a one page awareness document that could be shared across care coordination programs for dissemination to patients and families. 2) Inform the Cross Disciplinary policy group of specific policy needs. Members of the care coordination group continue to inform the development of a white paper written by CACL that outlines the landscape of care coordination both locally and nationally. **Next Steps:** Continue to inform the white paper; begin to draft one page awareness tool. Next meeting will be scheduled in late March/early April.

**Strategic Group:** Caregiving

**Strategic area:** Enhance services and supports for informal, family caregivers.

**Summary:** A video conference call with the caregiving group, other invited guests and Bob Stephens, Vice President, Caregiving and Health Programs at AARP, was held on 1/26 to help the group better understand what is occurring on a national level with caregiving initiatives. Since the call, Bob and others at AARP have provided contacts for other groups across the country which are taking on similar projects as the AHA Caregiving group. The caregiving group met in February to continue the process of drafting the self-identification tool. Outreach has been made to the NHPCO for permission to modify the tool they developed. Permission was received to do this in early March. Permission was also received from Wendi Aultman to utilize the ServiceLink 800 number and NHCarePath website as the points of contact on the tool. **Next Steps:** Continue to work on a draft of the self-identification tool and pilot the tool at the Endowment for Health annual meeting in March.

**Strategic Group:** Transportation

**Strategic area:** Increase transportation options, including an analysis of current efforts and funding issues.

**Summary:** A convening of transportation stakeholders was held in December to determine the scope and feasibility of an economic impact study. Discussions at the convening indicated a need for further conversations about what type of data would be most beneficial to transportation advocates. Those that attended the convening agreed to participate in future discussions and assist the transportation group in determining the best next steps. The group has compiled information regarding the meeting and sent out to stakeholders. The group determined that it could not meet more

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frequently than bi-monthly due to schedule demands of the members. **Next Steps:** the transportation group will reconvene in April to discuss how best to engage the participants of the December stakeholder meeting to refine next steps.

**Strategic Group:** Zoning

**Strategic area:** Identify and advocate for needed zoning changes in order to promote affordable, accessible housing options.

**Summary:** The Zoning group developed a survey for planners/developers that would identify barriers and possible solutions related to housing diversity. The survey has been disseminated and 17 developers have responded to date. Several additional surveys have been developed through the Southern NH Planning Commission's (SNHPC) project funded by the Tuft's Foundation. This includes three surveys targeting libraries, businesses and residents, with a focus on age friendly criteria, business accessibility and resident perspectives on achieving age friendly communities and environments. **Next Steps:** The group will be reconvening in April to discuss the results of the housing diversity survey and discuss how the AHA group can continue to support the work of the SNHPC.

**Strategic Group:** Cross-disciplinary

**Strategic Area:** Convene a cross-disciplinary workgroup including medical, mental health, social service, community service, and oral health providers, in order to plan and coordinate efforts.

**Summary:** Since the last summary in January, the Cross disciplinary group has continued to dialogue on how this strategic area intersects with the Advocacy Strategic Workgroup and with efforts to develop an AHA policy agenda. The group developed two documents to clarify this group's process: "Cross disciplinary Workgroup process" and "Cross disciplinary framing convening". The approach still needs to be refined, so the group will invite some members of the Advocacy Workgroup to ensure there is common understanding and alignment of workplans and goals. Two parts of the framing document include the "why" and "how" of convening a cross-disciplinary group. **The Why:** To work across silos to identify and solve barriers to receiving quality care; Identify and suggest solutions to legislation, rules & regulations and/or organization system policy for AHA policy agenda and other champions. **The How (two options):** Identify 2-3 priorities/issues/barriers that have risen in AHA workgroups or Steering Committee to bring to the larger convening group; Bring a larger group together to identify the barriers on one or more of the bullets from the domain goal (prevention, planning for end of life, etc.) **Next Steps:** include members of the Advocacy workgroup in the next meeting.

**Strategic Group:** Workforce

**Strategic Area:** Improve the availability of quality healthcare and social service workforces.

**Summary:** At the last meeting the group addressed the first two activities in their workplan: 1) Develop a one pager on why direct care workforce matters and AHA's focus; 2) Create an inventory of workforce efforts occurring in NH currently. Related to activity one, Lisa Henderson shared some samples of one pagers and data that NH could use to create a one pager about the workforce issue and the group discussed the overall audience and intent of the document. Members of the group are taking on researching the three intents of the document. *Part 1: Demographic imperative (educate audience with current workforce/aging data and projections of growth to show drastic mismatch). Where to find data? Part 2: Symptoms of crisis. Already here (e.g., positions open, limited services, temporary staff has to be used at larger expense, wage pressures, etc.) Part 3: Solutions. Use what other states have done. Perhaps use bullets to contact "said person" for more info.* To address the second activity of the workplan, the group reviewed an inventory of workforce efforts occurring in NH that was developed by DHHS. The focus of inventory is mostly healthcare specific as opposed to being more broad based, which might be beneficial. The group discussed how best to utilize the list and

decided to further review each initiative to see how the specific initiative intersected with AHA. The group emphasized that when conducting research, understanding if each initiative is actively meeting, who sits on the group (i.e., should an AHA Workforce group member be attending?), and how AHA intersects with this initiative is key. **Next Steps:** Draft one-pager, gather more information for the inventory, finalize SMART goals.

**Strategic Group:** Information is coordinated

**Strategic Area:** Assure that information on resources and services, (e.g. transportation and housing) is available, accessible, and coordinated.

**Summary:** This group continues to have additional new members at each meeting. Three individuals who have been working on the issue of awareness of services for older adults outside of AHA came to the meeting to see if there was synergy between the workgroups. They shared their findings with the group. In addition, individuals who were in attendance at the last meeting shared the research they had done on a set of criteria for organizations about what is age friendly website. The National Institute of Aging has a great resource that can be adapted. The group did not have time to dive deeper into dialogue or discussion on the best project to take on. **Next Steps:** Dialogue on a project/direction for this strategic area.