

THE BUNCOMBE COUNTY AGING PLAN (2008-2012)

Presented By:

The "Livable, Aging-Friendly Community"

Planning Task Force

of the Buncombe County

Aging Coordinating Consortium

Adopted By:

Buncombe County

Board of Commissioners

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PART I: EXECUTIVE SUMMARY

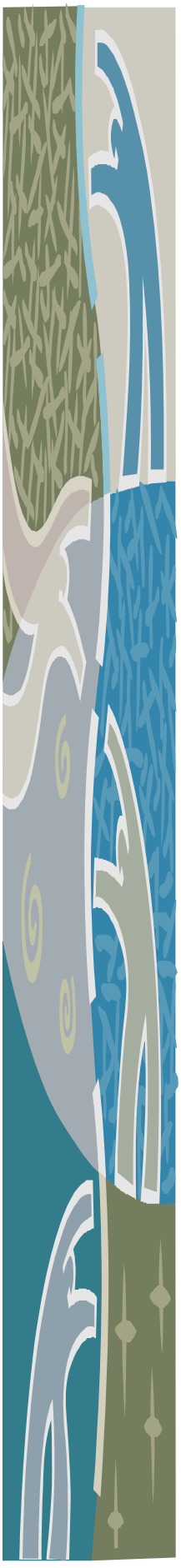
The Buncombe County Aging Plan (2008-2012) is the product of the ***Livable, Aging-Friendly Community Planning Task Force*** of the Buncombe County Aging Coordinating Consortium (ACC). This timely, comprehensive, and long-range plan is situated within a larger context of planning efforts at the state, federal, and even global levels. This plan was developed over a one-year period from April 2007 through March 2008. It reflects the combined efforts of over 500 individuals, including professionals, aging-services providers, volunteer older adults, and other community members.

The Aging Plan offers a vision for a **livable, aging-friendly Buncombe County** in which:

- Home and community environments are safe and support self-sufficiency for older adults and caregivers;
- A health care system maximizes wellness and health potential and meets the diverse and unique needs of older adults;
- Resources, services and opportunities support and enhance the financial well-being of older adults and caregivers;
- Life enrichment opportunities engage older adults with people, places and programs;
- Living environments (built and natural) support and enhance the functioning of older adults;
- A collaborative network of formal and informal services and supports is coordinated to meet the needs of older adults and caregivers.

These six goals are comprised of eighteen (18) subordinate objectives, each with specific recommendations. In addition, three key themes emerged: **Awareness, Accessibility,** and **Advocacy.** These themes tie the specific recommendations in the Aging Plan together. In order to adequately implement the recommendations of this Plan, it is critical that Buncombe County build its capacity to address these "A's."

With the current median age of 43 in Buncombe County (*Buncombe Life: Your County Resource Guide, fall/winter '07*) half of our population are "boomers" or older. This demographic demands a sense of urgency in changing the ways we address the needs of older adults in our community. Cooperation and



collaboration will be required to keep our services in synch with the growing number of aging residents.

Nothing less than a paradigm shift in our views of aging is needed. This shift would represent a dramatic departure from 'business as usual' in terms of how we think about aging and planning for older adults. We must challenge the perception that aging is a disease, build broad community support for the importance of healthy lifestyles, and promote awareness that planning for one's later years begins long before age 65. We must also recognize that older adults bring significant economic and civic assets to our community.

The Task Force asserts that an on-going, focused, collaborative effort is needed to effectively implement this plan, review and evaluate outcomes, and sustain the planning process.

We urge the Buncombe County Board of Commissioners to endorse this Plan and provide funding for coordinating its implementation.

> *"The needs of older adults are often interrelated [and] may require a completely new comprehensive, holistic approach to service delivery, organization and management...Those communities who have already begun to test their 'aging readiness' are now reaching out to their older citizens to engage them in discussions about what changes...may be needed to enhance their quality of life and ensure that they can grow old successfully in the community."*
>
> ~The Maturing of America: Getting Communities on Track for an Aging Population
> http://www.n4a.org/pdf/MOAFinalReport.pdf



PART II: BACKGROUND AND CONTEXT

The work of the Livable Aging-Friendly Community Task Force takes place within a larger context of planning efforts to address the needs of older adults. Furthermore, the local and global demographic contexts underlie the importance of this work.

> The Labor Ministers in the 2000 G8 Turin Charter "Toward Active Ageing," concluded:
>
> *We are convinced that*
> - *the ageing of our societies will create new opportunities as well as challenges;*
> - *there is nothing inevitable about the impact of ageing on society;*
> - *older people represent a great reservoir of resources for our economies and societies.*
>
> *Therefore, we agree that, through concerted efforts, coherent strategies and enhanced partnership with all actors concerned, we can reap the economic and social benefits resulting from increased activity of older people*
> (https://tspace.library.utoronto.ca/bitstream/1807/657/2/ageingnov2000.htm).

Federal, State and Local Contexts

With the passage of the Older Americans Act in 1965, the United States embarked on a deliberate effort to plan for meeting the needs of older adults at the federal, state and local levels. The Act created the Administration on Aging, and authorized grants to States for planning and service delivery programs.

The North Carolina Division of Adult and Aging Services refers to the *calm before the storm* when it states, in its Report to the North Carolina General Assembly on Recommendations for a Statewide Aging Study (2008), "North Carolina is beginning to experience a major shift in its age demographic" (p. 3). In its summary report to the 2005 White House Conference on Aging, North Carolina committed to establishing itself and its communities as livable and senior-friendly. Working in partnership with Area Agencies on Aging, the NC Division of Aging and Adult Services provided planning and assessment tools and a vision for a Livable and Senior-Friendly Community:

> *A livable and senior-friendly community offers a wide range of social and economic opportunities and supports for all citizens, including seniors; values seniors' contributions to the community; promotes positive intergenerational relations; considers the needs and interests of seniors in physical and community planning; respects and supports seniors' desire and efforts to live independently; and, acknowledges the primary role that families, friends, and neighbors play in the lives of older adults*
> (http://www.dhhs.state.nc.us/aging/sfcmain.htm).



The Buncombe County Aging Coordinating Consortium (ACC) is a volunteer organization that provides a structure for agencies, funders, and individuals to work together to plan, promote and advocate for services for the older adults of Buncombe County. Among the ACC's key tasks are the assessment of needs and, subsequently, the development of a plan for coordinated aging services. This specifically has taken the form of a five year strategic Aging Plan. The plan serves to advise the Buncombe County Commissioners on the effective allocation of State and Buncombe County funds and to guide the provision of services to older adults. Early in 2007, the ACC agreed to apply the NC Division of Aging and Adult Services concept of a livable and senior-friendly community in developing its 2008-2012 Aging Plan for Buncombe County.

Demographic and Economic Impact

Adults age 60+ are the fastest growing segment of North Carolina's population due to decreasing birth rates, in-migration of retirees, the Boomers, and improved life expectancies. The projected growth of the total population of adults age 60+ in North Carolina is expected to grow from 16% in 2005 to 23% by 2030.

The changes will be even more dramatic in Buncombe County. The total population in our county is expected to grow from 217,000 to 285,000, and the number of individuals age 60+ is expected to nearly double (see Figure 1). In 2005 the percentages of the total population of those age 60+ and those 17 and younger were almost the same. However, it is projected that in 2030, the percentage of the population age 60+ will grow significantly, while the percentage of the population age 17 and younger will actually decrease (see Figure 2).

Because of this growth, Buncombe County is one of six counties in North Carolina named in NC Senate Bill 448 (enacted in 2007). This bill directs the Department of Health and Human Services, Division of Aging and Adult Services to "assess program and service levels and needs for older adults" in, among others, Buncombe County. The intent of this legislation is to understand how communities can best prepare for the changing aging demographic. Buncombe County has the opportunity to be a model not only in North Carolina, but nationally as well. In fact, Bill 448 reports already include work from the Buncombe County *Livable, Aging-Friendly Task* Force (http://www.ncdhhs.gov/aging/demograpic/agingstudy.htm).



Data suggest that North Carolina, and Buncombe County specifically, will experience a growing – and disproportionate – aging population that will require an expanded level of resources, supports and services. However, it is important to recognize that the older adult population is a significant and vital part of our local economy. For instance, their local economic impact includes: cultural, recreational and tourism spending; home construction and property taxes; and expenditures for health care. In 2006, state-supported funding for services associated with older adults brought $74 million to Buncombe County*. An additional $32.1 million was received in Social Security payments**; Medicare provided over $240 million to health care providers***; and Medicaid providers received over $40 million for their services to older adults****. Dollars received through public funding are generally dollars spent locally; these funds impact a broader cross section of our county's overall economy than just older adults. The impact of the older adult population on our economy should not be underestimated.

(*North Carolina Division of Aging & Adult Services, County Data Package, February 2008; **US Social Security Administration, Beneficiaries by State and County, 2006; ***US Census Bureau Consolidates Federal Funds Report, FY 2005; ****NC Division of Medical Assistance Report to NC Division of Aging, August 2007)

The Labor Ministers in the 2000 G8 Turin Charter "Toward Active Ageing," state:

> *Older people are an asset to society. They should have the possibility of developing and using their potential to lead active, independent and fulfilling lives. A central challenge is to promote a culture that values the experience and knowledge that come with age. Policies oriented toward facilitating and supporting the participation of older people in economic and social life can contribute significantly to the goals of economic growth, prosperity and social cohesion in all countries.*
> (https://tspace.library.utoronto.ca/bitstream/1807/657/2/ageingnov2000.htm).

Figure 1 (Based information from the North Carolina Data Center)

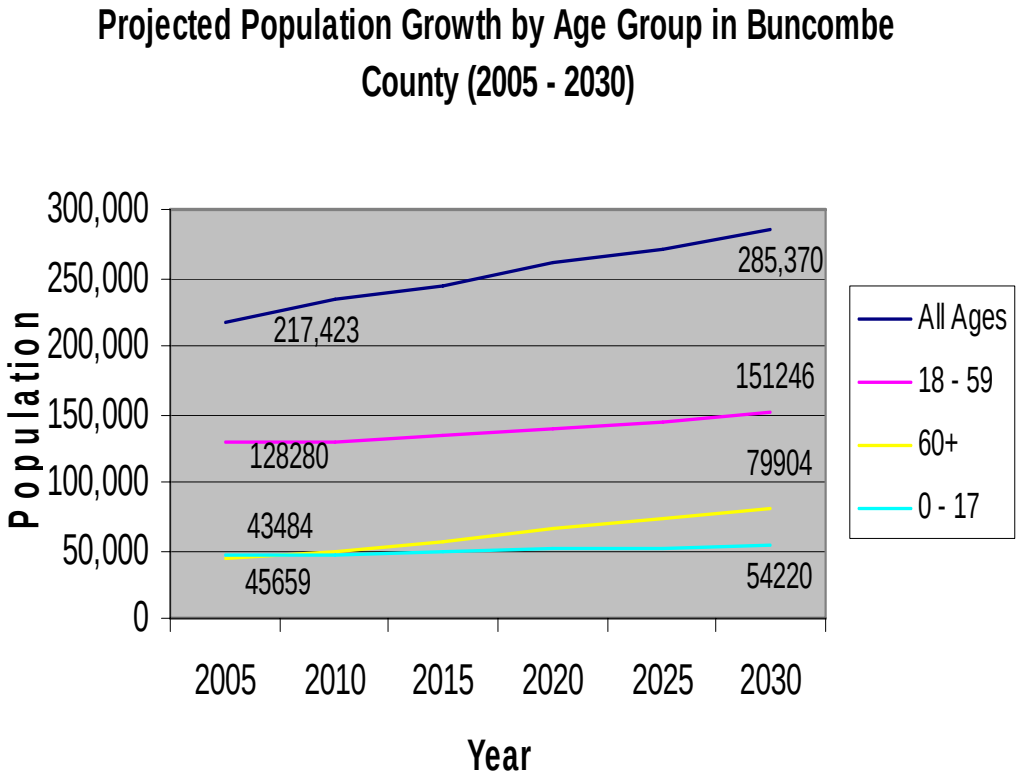
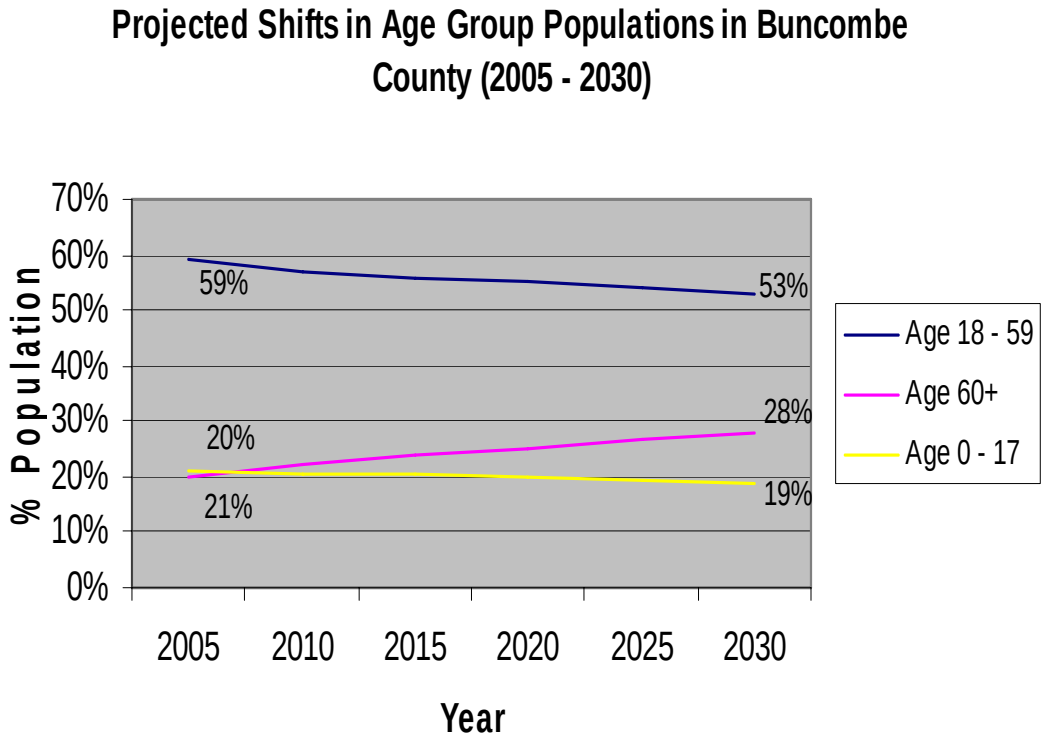


Figure 2 (Based on information from the North Carolina Data Center)





PART III: PLANNING PROCESS

The ***Livable, Aging-Friendly Community Planning Task Force*** was formed in April, 2007 and was charged with providing leadership for a broad-based, inclusive and collaborative planning process that would promote a livable, aging-friendly community for Buncombe County. This work expands upon previous planning efforts in several significant ways. Namely, it:

- Casts a broader, more comprehensive planning scope, rather than simply focusing on services for older adults;
- Ensures that participation in the planning process reflects the diversity in our community;
- Elicits broad community support by seeking innovative collaboration and community validation from key stakeholders and partners;
- Creates an efficient and effective planning process; include evaluation throughout the plan's lifecycle to ensure a sustainable planning infrastructure and model;
- Recommends outcomes-based changes or evidence-based results that will promote a livable, aging-friendly community.

The Planning Framework that was developed by the Task Force to guide its process may be found in Appendix A.

Frameworks

The Task Force embraced the North Carolina Division of Aging and Adult Services planning framework of "Livable, Senior-Friendly Communities" and identified six components that frame its vision for Buncombe County:

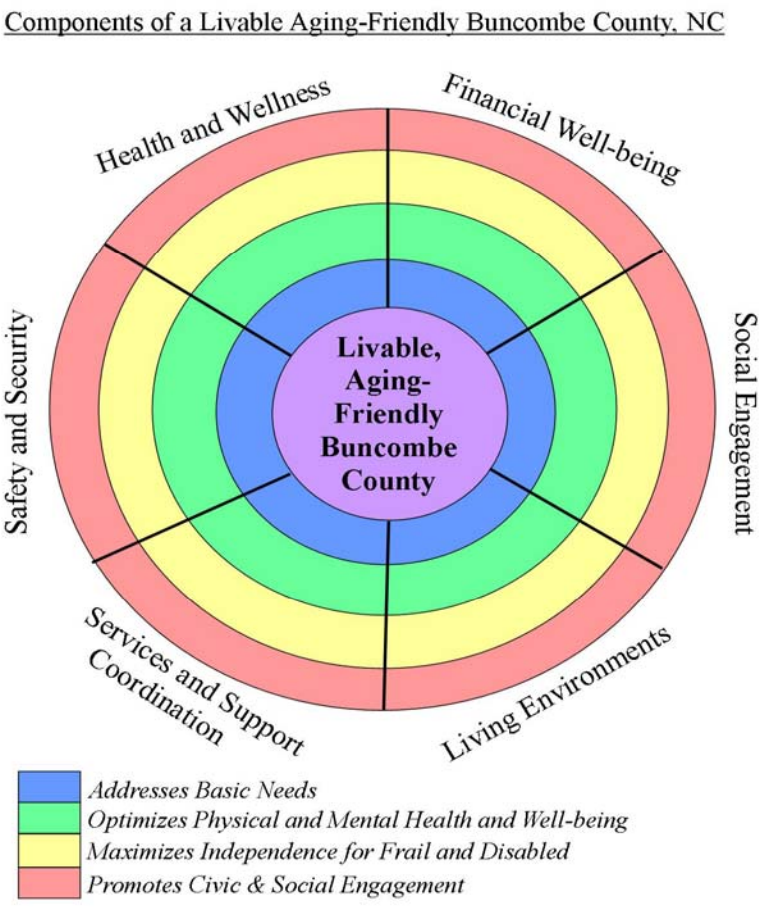
In a livable, aging-friendly Buncombe County…

- **Safety and Security**…home and community environments are safe and support self-sufficiency for older adults and caregivers.
- **Health and Wellness**…the health care system maximizes wellness and health potential and meets the diverse and unique needs of older adults.
- **Financial Well-being** …resources, services and opportunities support and enhance the financial well-being of older adults and caregivers.
- **Social Engagement**…life enrichment opportunities engage older adults with people, places and programs.

- **Living Environments**…the living environments (built and natural) support and enhance the functioning of older adults.
- **Service and Support Coordination**…a collaborative network of formal and informal services and supports is coordinated to meet the needs of older adults and caregivers.

The Task Force also utilized the AdvantAge Initiative model to further frame the evaluation of older adults' needs, available resources, and gaps in service delivery in Buncombe County (see http://www.vnsny.org/advantage/). This model emphasizes 1) addressing basic needs, 2) promoting social and civic engagement, 3) optimizing physical, mental health and well-being, and 4) maximizing independence for frail and disabled older adults (see Figure 3).

Figure 3.





Task Force

The **Task Force,** endorsed by the Buncombe County Board of Commissioners, was made up of members of the standing Aging Coordinating Consortium (ACC) Planning Committee and community members who offered expertise in community planning and/or one of the six major goals of the vision. The Task Force included a Chair, a Steering Team, an Executive Team, six Work Team Chairpersons, and two At-large Community Members. It benefited greatly from the participation of the Social Work Program Director on sabbatical from Warren Wilson College (WWC), and a senior social work major serving as research assistant. Each of the six Work Teams Chairs recruited community members whose interests and areas of expertise reflected their specific focus (see Appendix B for a complete roster of the Task Force).

The **Steering Team** was composed of the Task Force Chair, ACC Planning Committee members, the regional Area Agency on Aging (AAA) Director, and the WWC Social Work Program Director. The responsibilities for this team included:

- Developing the vision and guiding principles and frameworks;
- Establishing initial components of the vision, including their scope and focus;
- Providing resources and support to the Work Teams;
- Promoting community awareness of the Aging Plan;
- Ensuring a sustainable planning process.

The Task Force **Executive Team** was a subset of the Steering Team and consisted of the Chair, the AAA Director, the WWC Social Work Program Director and research assistant. This team met frequently between Task Force meetings to keep the planning process moving along. This included:

- Creating Task Force meeting agendas;
- Preparing material for the Work Teams;
- Planning, scheduling and conducting community meetings;
- Developing and distributing community and provider surveys;
- Presenting the work of the Task Force to various stakeholders;
- Writing, formatting and compiling the Aging Plan report and accompanying materials.



The six **Work Teams** were chaired or co-chaired by members of the Task Force, and included between 4 and 11 individuals who brought expertise and experience to the planning process in each of the six component areas (e.g., Financial Well-being). Responsibilities included:

- Defining the scope and focus of their component area;
- Analyzing and synthesizing data and information;
- Determining projected needs of the current population age 60 and older;
- Assessing the community's capacity to meet projected needs of Boomers;
- Identifying and evaluating available resources, services and opportunities as well as gaps and barriers;
- Identifying best practices and model programs;
- Preparing recommendations specific to their component area.

Community Input

Informing the work of the Task Force was input from community members gathered via meetings and surveys. Twelve (12) **community meetings** were held between June and September 2007 at various locations throughout Buncombe County. One hundred and seventy-six individuals (176) attended the meetings. General, open-ended discussion centered on information about needs and resources; participants were encouraged to consider their own needs as well as the needs of those for whom they know or care (See Appendix C for information about Community Meetings).

In addition, a **community survey** was conducted during September 2007. One thousand (1,000) paper copies were distributed at senior housing communities and congregate meal sites, and via faith communities and other service providers. The survey was also made available on the Land of Sky Regional Council website. Publicity about the survey included media releases and information on the Buncombe County and Land of Sky Regional Council websites. Buncombe County also produced a Public Service Announcement that was aired on BCTV and URTV channels during September. Two-hundred and twelve (212) surveys were completed (see Appendix D for information about Community Survey).



Service providers gave input to the plan at the September ACC meeting and via a survey during the month of September. Seventy individuals attended the ACC meeting or responded to the survey (see Appendix E for Service Provider Survey).

Ultimately, this plan reflects the combined efforts of:

- 62 business professionals, experienced aging-service providers, and volunteer older adults who participated as members of the Task Force and/or one of its six Work Teams;
- 176 community members who attended one of 12 community meetings held throughout Buncombe County;
- 212 community members who completed a survey; and,
- 70 experience aging-service providers who attended the September, 2007 meeting of the Aging Coordinating Consortium and/or completed a survey.



PART IV –RECOMMENDATIONS AND OUTCOMES

Key Terms and Underlying Values

Early in its work, the Task Force defined key terms and clarified underlying values used and reflected throughout this report. The Task Force elected to use the term "**older adults"** to refer to individuals age 60+. Similarly, the term **"aging-friendly"** is preferred over "senior-friendly" as more inclusive, recognizing that individuals age throughout their lifetimes at different rates. The needs of older adults are in many cases similar to the needs of other community members. For example, a parent pushing a child's stroller, a young adult in a wheelchair, and an older adult with a walker all need safe pathways. The terms **"services," "resources"** and **"providers"** are used in their most inclusive sense, referring to both formal and informal entities ranging from health care and social service providers to neighborhood leaders, faith communities pastoral ministers, and other community leaders.

The Task Force believes that the values reflected within this report demand nothing less than a paradigm shift in our views of aging is needed. We must recognize **aging as a dynamic process** that requires considering the whole person at every age and at every stage of life. Furthermore, we must challenge the perception that aging is a disease. Older adults contribute greatly to the vitality of our community by offering their experiences, knowledge and skills gained throughout their lives.

During a recent on-line conference: "Creating Aging-Friendly Communities," a 75-year old woman expressed the need for this paradigm shift:

> *Please consider in your conversations, that there are many of us who do not want to be maintained. We want to belong, not only to each other, with whom we may have only one common denominator, age, but to society. We want to be "just like every one else." Instead of a multi million dollar resort where every need is met, and everything is planned for the generic aging American, think up something daring, something challenging, something creative.*
> *(http://www.conferences.icohere.com/)*

Three "A's"

In assessing unmet needs, the Task Force identified three key themes: **A**wareness, **A**ccessibility and **A**dvocacy.



A significant lack of **awareness** exists among community members and service providers (formal and informal) about older adult needs and available Buncombe County resources. Recognition of the aging process and its impacts on older adults and their families are largely invisible until one experiences them personally. This lack of awareness permeates the landscape of service provision and magnifies the challenges faced by individuals and families facing aging-related changes. This is not due to lack of effort on the part of providers who tend to focus on their own areas of expertise and specific services when educating and promoting their services, resources and opportunities. Also, consumers tend not to anticipate potential needs or become aware of available resources until they are in the midst of a crisis. At this point decision making is compromised.

Accessibility refers to the ease with which older adults and caregivers obtain information about, or entry to, services, resources or opportunities. Accessibility issues include, but are not limited to:

- Affordability, payment options
- Wait lists
- Transportation
- Entry to buildings, offices
- Stigma (e.g., age, mental illness, etc.)
- Language barriers
- Visual, auditory barriers
- Knowledgeable, understanding providers
- Reliable, accurate information
- Home visits
- Business hours

Advocacy includes efforts to promote awareness and accessibility for services, resources and opportunities; to engage and empower older adults and caregivers in planning and decision-making; and to advance federal, state, and local policies affecting older adults and caregivers.

These three “A’s” reflect over-arching issues that we must address in order to become a **livable, aging-friendly community**. The recommendations in the Aging Plan begin to address these issues. Therefore, implementing them will help build our community’s capacity to meet the needs of all residents, especially the growing older adult population and their caregivers.

Goals, Objectives and Recommendations

This Buncombe County Aging Plan contains ***116 recommendations***, organized into ***18 objectives*** within ***6 goals.*** We must emphasize that these goals, objectives and



recommendations are only the beginning of what must become a sustainable, ongoing implementation and evaluation process. Task Force members acknowledge that this Aging Plan represents a vision for our community. Despite months of hard work on the part of many individuals, we recognize that much work remains in order to implement the plan and address the changing and growing aging population in Buncombe County.

The Aging Plan's recommendations are organized according to the six (6) goals and their objectives, all of which emerged from a comprehensive analysis of the Task Force Work Team reports. The original Work Team Reports are included in Appendix F. Annotated versions of the recommendations (see Appendix G) identify suggested lead contacts (individuals), possible partner agencies, models and best practices, and potential funding sources.

The following pages present these goals, objectives, and corresponding recommendations. Please note that some recommendations are identified as priorities because they were determined to be either most feasible or most important to begin implementing immediately. However, all are important.



Our vision of the Task Force for *a livable and aging-friendly Buncombe County* is:

Safety and Security…home and community environments are safe and support self-sufficiency for older adults and caregivers.

- ***Citizen Safety***…promote and provide for safety and protection
- ***Disaster Planning***…plan and prepare for disasters and emergencies

Financial Well-being…resources, services and opportunities support and enhance the financial well-being of older adults and caregivers.

- ***Money Management***…manage daily and monthly income and expenses
- ***Financial Planning***…offer resources without regard to ability to pay
- ***Income Supplements***...connect with public/private benefits
- ***Employment and Job Training***…provide jobs and training for all

Health and Wellness…the health care system maximizes wellness and health potential and meets the diverse and unique needs of older adults.

- ***Prevention and Health Promotion***…prioritize prevention and health promotion
- ***Geriatric Health Care***…health care meets the unique needs of older adults
- ***Expanded Geriatric Care***…complementary/alternative medicine, and dental care.
- ***Adequate Payment System***…payment system that adequately pays

Social Engagement…life enrichment opportunities engage older adults with people, places and programs.

- ***Engagement***…participation and leadership in civic and volunteer roles
- ***Enrichment Opportunities***…learning, cultural, recreational opportunities

Living Environments…living environments (built and natural) support and enhance the functioning of older adults.

- ***Housing***…options that promote physical safety and independence
- ***Transportation***...safe travel options
- ***Natural Resources***…improve air, water, and soil quality

Service and Support Coordination…a collaborative network of formal and informal services and supports is coordinated to meet the needs of older adults and caregivers.

- ***Awareness***…awareness about the needs and resources available
- ***Accessibility***…all services are accessible to those who need them
- ***Coordination***…coordinated network of services and providers



Goal: SAFETY AND SECURITY…Home and community environments are safe and support self-sufficiency for older adults and caregivers.

Objective 1: Safety and Security…Promote and provide for the safety and protection of older adults, especially those most vulnerable.

Priority Recommendation(s):

1. Expand education that addresses elder abuse, fraud, domestic violence and safe sex practices for older adults.

2. Promote awareness of currently offered Senior Reassurance and Elder Crime Prevention programs.

3. Build and strengthen collaboration among community stakeholders to help keep older adults safe from fraud and scams

4. Advocate for passage of the Adult Protective Services Clearinghouse Model by the North Carolina State Legislature.

5. Continue to increase the number of adult care homes that are participating in Quality Initiative for Improvement.

Additional Recommendation(s):

6. Collaborate with Department of Motor Vehicles to promote older adult driver safety.

7. Fund Project Lifesaver

Objective 2: Disaster Planning…Promote planning and preparedness for disasters and emergencies with special attention to older adults at greatest risk.

Priority Recommendation(s):

1. Create a centralized database that includes older adults with medical needs and other vulnerabilities.

2. Assist older adults and caregivers with developing emergency preparedness plans.

3. Participate in the North Carolina Disability and Elderly Emergency Management (DEEM) Initiative and utilize in local planning.

Additional Recommendation(s):

4. Encourage older adults and caregivers to plan and prepare for emergencies.



Goal: FINANCIAL WELL-BEING…Resources, services and opportunities support and enhance the financial well-being of older adults and caregivers.

Objective 1: Money Management…Assist older adults who need help managing their daily and monthly income and expenses.

Recommendation(s):

1. Expand services that help older adults manage their money, assets and credit.

2. Provide education and resources to help older adults avoid scams.

Objective 2: Financial Planning…Provide professional financial planning resources for all citizens, especially older adults and caregivers, regardless of their ability to pay.

Recommendation(s):

1. Increase awareness of the importance of long-term financial planning (including for long-term care).

2. Ensure that older adults have access to professional financial planning resources.

3. Provide financial education across the life course, including age-appropriate standard course of study in public schools.

4. Develop affordable financial planning services.

5. Encourage attorneys to specialize in elder law.

Objective 3: Income Supplements…Connect older adults and caregivers with all public and private income supplements (public/private benefits) for which they are eligible.

Recommendation(s):

1. Refer to benefits as “income supplements” to remove stigma.

2. Educate service providers so they can make informed referrals for income supplements

3. Streamline the assessment and application processes for income supplements.



Goal: FINANCIAL WELL-BEING…Resources, services and opportunities support and enhance the financial well-being of older adults and caregivers.

Objective 4: Employment and Job Training… Provide employment and job training opportunities for all older adults who need or desire to work.

Priority Recommendation:

1. Engage the Chamber of Commerce and local businesses in an "Aging-Friendly Employers" initiative to include a systematic way of matching jobs with qualified, interested seniors, as well as providing a way to identify businesses that offer senior discounts, provide easily accessible facilities, etc.

Additional Recommendation(s):

2. Increase awareness of existing programs and resources for job training.

3. Educate employers about the benefits associated with older workers.

4. Offer regular job fairs specifically for older adults.

5. Encourage flexible employment practices that benefit older adults and caregivers (i.e., allowing employees to work from home, flexible schedules, etc).



Goal: HEALTH AND WELLNESS (*Aging is Not a Disease*)…The health care system maximizes wellness and health potential and meets the diverse and unique needs of older adults.

Objective 1: Prevention and Health Promotion…Prioritize prevention and health promotion within the health care system to create a paradigm shift to healthy lifestyles for older adults.

Priority Recommendation(s):

1. Assist older adults and caregivers to develop skills needed to achieve a healthy lifestyle, e.g., in nutrition, exercise, disease management, fall prevention, and medication management.

2. Develop a comprehensive health and wellness information resource (e.g. website, information hotline, holistic elder care clinic).

3. Target education and outreach efforts in low-income and minority communities and address cultural medical mistrust.

Additional Recommendation(s):

4. Provide affordable fitness opportunities for older adults, e.g., fitness clubs to offer discounts for older adults for use during off-peak times.



Goal: HEALTH AND WELLNESS (*Aging is Not a Disease*)…The health care system maximizes wellness and health potential and meets the diverse and unique needs of older adults.

Objective 2: Geriatric Health Care…Provide a health care system that is designed to meet the unique needs of older adults in the following specific areas:

- Medical Care
- Mental Health Services/Substance Abuse

Priority Recommendation(s):

1. Develop mobile and satellite assessment clinics that offer "one stop shopping" for older adults, including baseline comprehensive health and wellness assessments by trained geriatric professional referrals with access to community resources.

2. Increase outpatient, long-term care, and assisted living facilities that can meet the needs of older adults with mental illness and/or dementia.

Additional Recommendation(s):

3. Provide assistance to older adults and caregivers to help them more easily navigate the medical system (e.g., elder advocates, care managers, and other transitional caregivers).

4. Expand continuing education opportunities for health and service providers about geriatric health care, especially in areas of mental health, substance abuse, and dementia.

5. Increase availability of geriatric trained health care professionals, such as geriatricians, pharmacists, psychiatrists, dentists, and nurse practitioners.

6. Encourage and educate primary care providers to screen regularly for poly-pharmacy, dementia, delirium, depression, substance abuse, etc.

7. Reduce the stigma that prevents some older adults from seeking treatment for mental illness, substance abuse, and/or dementia.



Goal: HEALTH AND WELLNESS (*Aging is Not a Disease*)…The health care system maximizes wellness and health potential and meets the diverse and unique needs of older adults.

Objective 3: Expanded Geriatric Care… Expand health care for older adults to include complementary /alternative medicine (CAM), and dental care.

Priority Recommendation(s):

1. Provide continuing education for health care providers about the benefits of including dental care and CAM therapies.

2. Provide training for dentists and CAM providers on the impact of aging, frailty, chronic disease, and risks associated with age (e.g., poly-pharmacy, delirium, depression, and dementia).

3. Develop a system of communication and sharing of information among all providers with attention to safety when combining both modalities.

Additional Recommendation(s):

4. Develop a database of CAM providers and their certifications.

5. Provide education to all health care practitioners and older adults about the importance of prevention in geriatric dental care.

6. Provide caregivers and older adults with oral/dental hygiene instructions.

7. Provide mobile dental care for frail or homebound older adults.

Objective 4: Adequate Payment System…Advocate for a payment system that adequately pays for the health and wellness care for all older adults.

Priority Recommendation(s):

1. Advocate for Medicare/Medicaid to expand coverage for health and wellness needs of older adults, including coverage of dental care, wellness programs, routine hearing tests (and hearing devices), eye exams, etc.

2. Develop/expand Project Access for older adults.

Additional Recommendation(s):

3. Advocate for lower costs of supplemental health care insurance.

4. Encourage more dentists to accept Medicaid.



Goal: SOCIAL ENGAGEMENT…Life enrichment opportunities engage older adults with people, places and programs.

Objective 1: Engagement…Promote participation and leadership in civic and volunteer roles that draw upon the diverse skills, wisdom, and life experiences of older adults.

Priority Recommendation(s):

1. Expand community transportation to include service for older adults to participate in volunteer and civic opportunities.

2. Train and encourage non-profits and community leaders in the recruitment and retention of older volunteers, in utilizing older adults as volunteers in professional roles, and in outreach to diverse populations of older adults.

Additional Recommendation(s):

3. Engage homebound older adults in volunteer and civic opportunities, for example through a "buddy system."

4. Encourage service providers and volunteer coordinators to refer older adults to volunteer opportunities.

5. Promote awareness of civic engagement and volunteer opportunities for older adults through comprehensive and up-to-date listings (i.e., local media outlets, "Welcome Wagon," Hand-On Asheville, on-line listings, etc.).

6. Expand civic engagement training for low-income and minority older adults.

7. Promote the benefits of civic and volunteer engagement by older adults for community and individual wellness.

8. Provide support and appreciation for older adults engaged in volunteer and civic activities (e.g., stipends).



Goal: SOCIAL ENGAGEMENT…Life enrichment opportunities engage older adults with people, places and programs.

Objective 2: Enrichment Opportunities…Provide a wide range of lifelong learning, cultural, and recreational opportunities to meet the needs of older adults with diverse interests and abilities.

Priority Recommendation(s):

1. Encourage collaboration among existing programs to eliminate competition for audience and resources.

2. Promote awareness of lifelong learning, cultural and recreational opportunities for older adults

Additional Recommendation(s)

3. Develop programs to promote awareness of diversity and cultural differences among older adults.

4. Expand availability of daytime cultural programs and opportunities for older adults with special needs, including compliance with the Americans with Disabilities Act (ADA).

5. Provide lifelong learning, cultural and recreational opportunities for older adults at a sliding fee scale and in locations throughout the county.

6. Encourage all Senior Centers in Buncombe County to achieve “Center of Excellence” status.

7. Utilize animals in social opportunities, especially for homebound and institutionalized older adults.

8. Encourage computer access, computer-literacy, and on-line learning opportunities for older adults and caregivers.



Goal: LIVING ENVIRONMENTS…Living environments (built and natural) support and enhance the functioning of older adults.

Objective 1: Housing…Provide a broad range of options that promote physical safety and independence for older adults, in a setting of their choice.

Priority Recommendation(s):

1. Educate the community about the safety needs and resources related to housing location, design and construction, as well as the impact that individual housing decisions have on the desire to "age in place."

2. Encourage older adults to use community resources to identify potential risks and hazards in and around their homes.

3. Expand and strengthen working relationships among organizations offering home modification and repair services.

4. Incorporate Healthy Built Home & energy efficient features in future developments.

5. Advocate that publicly funded development meet Universal Design criteria to benefit all ages and abilities.

Additional Recommendation(s):

6. Increase use of monitoring and filtering systems for air, water, and environmental quality.

7. Provide a range of housing options (both existing and new construction) at various levels of affordability including more public housing.

8. Ensure that the definition of "affordable" housing takes into account all utilities, taxes, and association dues, in addition to, home and property maintenance.

9. Explore and consider possibilities (e.g. land use planning) that allow for accessory dwelling units (granny flats) and co-housing communities.

10. Concentrate new housing options near employment, shopping, healthcare, transportation, and other community services.

11. Provide and protect public commons, parks, community gardens, and other gathering spaces, especially those near where older adults live.



Goal: LIVING ENVIRONMENTS…Living environments (built and natural) support and enhance the functioning of older adults.

Objective 2: Transportation… Improve safe travel options for older adults to and from their destinations.

Priority Recommendation(s):

1. Conduct walk-ability audits to identify and remedy pedestrian safety concerns, particularly near bus stops (including lack of or broken sidewalks, barriers presented by roundabouts, crosswalk areas and the timing of signal changes).
2. Include transportation services for older adults in updated services directory (include cost and personal assistance provided, if any).
3. Develop a system to identify the transportation provider of those older adults who are “dropped off” and “picked up” at appointments and who require assistance in arranging their return transportation.
4. Provide shelters and sitting areas at all bus stops.

Additional Recommendation(s):

5. Select appropriate residential and commercial street lighting and focus it more effectively on walking and driving surfaces to improve pedestrian and driver safety.
6. Consider best practices for road sign placement and size, as well as street numbers, for pedestrians, cyclists, and drivers.
7. Provide incentives for older adults to participate in driver safety programs and refresher courses, such as providing programs at locations serving older adults and advocating for NC insurance companies to recognize and reward participation in such programs.
8. Encourage Department of Motor Vehicles to adhere to policy for license renewal (license restrictions or physician-certified eye exams where indicated).
9. Explore ride-share and volunteer driver programs as models to implement in Buncombe County.
10. Expand community transportation to include service for social engagement and other non-medical needs of older adults.
11. Lower age limit to 60 for free city of Asheville bus pass.
12. Provide transportation vouchers that allow low-income older adults to afford and utilize taxi services.
13. Provide ongoing training for all transportation providers on the special needs of older and disabled adults.
14. Minimize risk of transfer of viruses or diseases in public transportation.



Goal: LIVING ENVIRONMENTS…Living environments (built and natural) support and enhance the functioning of older adults.

Objective 3: Natural Resources…Improve air, water, and soil quality to enhance the health and well-being of older adults.

Priority Recommendation(s):

1. Provide incentives and education that would encourage energy and water conservation measures.

2. Advocate that air, water and soil quality standards meet the needs of the most vulnerable older adults.

Additional Recommendation(s):

3. Support advocacy and education efforts for smoke-free environments for older adults.

4. Advocate for reduced concentrations of exhaust fumes associated with industry, development, and transportation systems, especially where older adults congregate.

5. Ensure public boards and commissions engage older adults in land-use planning.



Goal: Service and Support Coordination…A collaborative network of formal and informal services and supports is coordinated to meet the needs of older adults and caregivers.

Objective 1: Awareness…Promote public awareness about the needs of, and resources available for, older adults and caregivers.

Priority Recommendation(s):

1. Offer effective and ongoing public awareness campaigns that address ageism, the needs of older adults, the needs of caregivers, and the resources available in the community (utilizing local media outlets, "Welcome Wagon," 2-1-1, on-line listings, etc.).

2. Coordinate training opportunities for staff of aging services providers about the needs of, and resources for, older adults and caregivers.

3. Develop and maintain a comprehensive, senior resource directory in print and on-line.

Additional Recommendation(s):

4. Assess and plan for changing needs as boomers age and evaluate resources according to these changing needs.

Objective 2: Accessibility…Ensure that all services for older adults and caregivers are accessible to those who need them.

Priority Recommendation(s):

1. Expand community transportation to allow greater access to services and resources.

Additional Recommendation(s):

2. Advocate for increased Home and Community Care Block Grant funding to adequately meet the needs of older adults and caregivers (i.e., address long wait-lists).

3. Create user-friendly automated phone systems for services and programs accessed by older adults.

4. Expand availability of affordable caregiver respite services.

5. Ensure affordability and/or payment options for all services.

6. Increase availability of one-on-one professional case assistance services.

7. Recruit and train care navigators and personal advocates.



Goal: Service and Support Coordination…A collaborative network of formal and informal services and supports is coordinated to meet the needs of older adults and caregivers.

Objective 3: Coordination… Create a coordinated network of services and providers that is designed to meet the needs of older adults and caregivers.

Priority Recommendation(s):

1. Promote a culture of client/consumer-centered service delivery among formal and informal providers.

2. Explore the concept of a centralized approach to accessing multiple services, resources, and opportunities (e.g., “no wrong door”).

3. Ensure funding processes are objective, accountable, and outcomes-driven.

4. Define and develop best practice models to utilize as standards that inform funding processes.

5. Coordinate planning efforts (re: health care and other service needs) among local community (city/county) and regional (Region B/Western North Carolina) entities to promote streamlined survey/data collection efforts and compatibility between data sets.

Additional Recommendation(s):

6. Prioritize funding for programs and services that demonstrate effective collaboration and/or coordination.

7. Prioritize funding to minimize unnecessary overlap and gaps in service.

8. Built greater flexibility into current funding streams to allow programs and services to develop new strategies for meeting the needs of older adults and caregivers.

9. Establish shared positions between agencies (e.g., Care Partners and DSS Medicaid worker position).

10. Establish system of regular case conferencing for aging services providers.

11. Require agency applications for Home and Community Care Block Grant funds to provide monitoring results from the Area Agency on Aging with their applications.



PART V: NEXT STEPS

The Maturing of America (2006) report asserts, "The needs of older adults... may require a completely new comprehensive, holistic approach to service delivery, organization and management…" (p. 1). For Buncombe County, this approach demands coordination of an on-going, sustainable process of implementation, evaluation, and continued planning.

This coordination function will:

- Ensure that the Aging Plan's recommendations are implemented, evaluated, reviewed and adjusted as needed on an ongoing basis (not just once every 5 years);
- Build Buncombe County's capacity to meet the changing aging demographics;
- Advocate for a livable, aging-friendly perspective in City and County and other community planning initiatives;
- Promote collaboration among formal and informal providers recognizing that diverse aging populations may have unique needs;
- Increase efficiency, effectiveness and accountability in service delivery;
- Ensure community education and opportunities for feedback from all segments of the population
- Promote the Aging Plan through community awareness and advocacy.

Recognizing that this is a pivotal time to change the way Buncombe County addresses the needs of aging residents, the Task Force recommends that Buncombe County provide funding for a staff position that will function as a *facilitator* to guide agencies on implementing the recommendations of the Aging Plan, to improve the effectiveness and efficiency of existing services to older adults, and to advocate in the community for initiatives to bring about a ***livable, aging-friendly community***. The Aging Coordinating Consortium, the Area Agency on Aging at Land-of-Sky Regional Council and the County Manager's Office will determine the most effective approach for completing this important work (see Appendix H).



PART VI: CONCLUSION

Creating a ***livable, aging-friendly community*** demands new approaches and a comprehensive perspective. The Task Force asserts that, although some needs and interests are specific to older adults, generally what is good for older citizens is good for all citizens. A livable community is a place where folks can grow up and grow old. It is a place where residents can maximize their potential.

To achieve this ideal, it will be important for individuals, providers, funding organizations, businesses, and local government to work together in creating a ***livable, aging-friendly*** Buncombe County. Individuals will maximize their own independence through well-being practices and financial planning. Providers will collaborate to offer services based on needs identification, planning, and program accountability. Community funding organizations will utilize the recommendations in this plan to guide and support their decision making process. Private sector entrepreneurs will offer opportunities, products and services that meet older adults' needs and desires. Elected officials will make sound decisions related to safety and security, housing opportunities, transportation systems, and land use regulations that affect the ability of older adults to live independently in their community.

Let us all commit to making a ***livable aging-friendly Buncombe County*** a reality!



PART VII: ACKNOWLEDGEMENTS

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ACC Aging Plan Task Force Members

Pat Bacon	Asheville Habitat for Humanities
Betsey Bent	Mission Hospitals, Senior Services
Lisa Childs	Home Transitions, Inc.
Ali Climo	Warren Wilson College Faculty and Council on Aging Consultant
Celeste Collins	OnTrack Financial Education & Counseling
Joe Connolly	Land-of-Sky Regional Council, Area Agency on Aging
Phillip Gibson	Warren Wilson College, Environmental Leadership Center
Larry Haas	NC Center for Creative Retirement
Beth Lazer	Community Member
Don Lilenfeld	Community Member
Barbara Marlowe	Mission Hospitals
Wendy Marsh	Executive Director Council on Aging of Buncombe County
Angie Pittman	Buncombe County Dept of Social Services, Adult Services
Carlos Rangel	Community Member (resigned)
Heidi Sistare	Warren Wilson College, Student Intern
LeeAnne Tucker	Land-of-Sky Regional Council, Volunteer Services Department
Ann Von Brock	Vice President Asheville Buncombe United Way
Kate Zurich	Council on Aging of Buncombe County

ACC Aging Plan Work Team Members

Jennifer Atkinson	Land-of-Sky Regional Council, SCSE Program Coordinator
Kay Barrow	Community Member, former DSS Director of Adult Services
Patti Cameron	NC Center for Creative Retirement
Walt Brewer	Brewer Natural Gas
Kate Brockett	Council on Aging of Buncombe County
Rebecca Chaplin	Land-of-Sky Regional Council, Area Agency on Aging
Kay Clark	Mission Hospital Elder Clinic
Mark Cornett	Jewish Family Services/Alzheimer's Association
Gaylen Ehrlichman	Buncombe County Health Center
Robert Eidus	Green Transit
Chris Emory	Health Center – Preparedness
Bart Floyd	Western Alliance for Independent Living
Judy Francis	NC Department of Environment and Natural Resources
Alison Gilreath	Jewish Family Services of WNC
Sara Gresko	Community Caregiver
Larry Haas	NC Center for Creative Retirement
Dorothy Herbert	Community Member
Barbara Hinshaw	Land-of-Sky Regional Council, AAA Ombudsman Program
Joleen Huertas	Land-of-Sky Regional Council, Volunteer Services
Cameron Kempson	Executive Director of LightShare, Inc.
Lourdes Lorenz	Mission Hospital
Tom Luzon	OnTrack Financial Education & Counseling
Carol McLimans	Land-of-Sky Regional Council, AAA Family Caregiver Support



Lisa McQueen-Horn	CarePartners
Norma Messer	Better Business Bureau
Rachel Nygaard	United Way's 2-1-1 of WNC
Jennifer Palumbo	VA Medical Center
Susan Poole	NC Center for Creative Retirement
Kelly Reath	UNC School of Social Work, Clinical Associate Professor
Ltn. Gary Rickman	Buncombe County Sherrif's Department
Dee Robertson	Buncombe County EMS
Scott Rogers	Asheville Buncombe County CM
Martha Salyers	Buncombe County Regional Preparedness
Isaac Savage	Home Energy Partners
Cheryl Simcox	DSS – Adult Home Supervisor
Roxann Sizemore	DSS – Adult Protective Services Supervisor
Verdine Spicer	Regional Manager for Social Security
Cathie St.John-Ritzen	Elder law attorney
Dawn Starks	Starks Financial Group
Fran Thigpen	Director of Buncombe County Parks and Recreation
Jen Waite	United Way's 2-1-1 of WNC
Robert Weaver	MAHEC
Sharon West	Buncombe County Health Center
Bill Whalen	Pisgah Legal Service

ACC Implementation Work Team Members

Kay Barrow	Retired from DSS, ACC member
Betsey Bent	Mission Hospitals, COA Board member
Denise Braine	Buncombe County Planning and Development, ACC member
Joe Connolly	Director Area Agency on Aging, ACC member
Charles Dickens	Senior Tar Heel Legislature, ACC member
Alison Gilreath	Jewish Family Services Director, JCC, ACC member
Beth Lazer	Retired, Chair of the ACC Planning Committee
Wendy Marsh	Director Council of Aging of Buncombe County, ACC Chair

Community Members

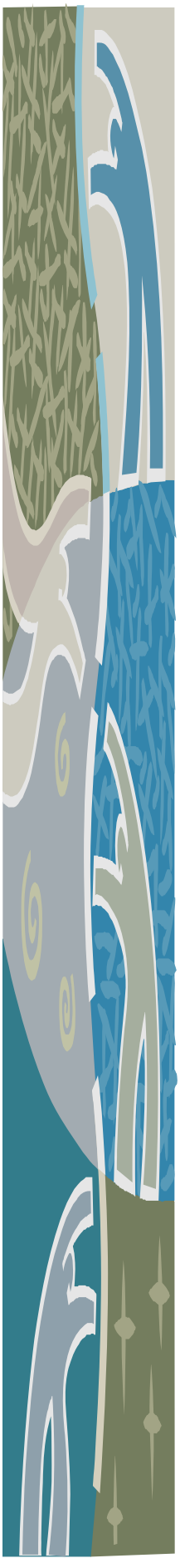
Rev. Donna Painter	First Baptist Church
James Geter	Mount Zion Baptist Church

Community Organizations

Aging Coordinating Consortium
Buncombe County
Land-of-Sky Regional Council
MAHEC
Mission Hospitals
North Carolina Center for Creative Retirement
North Carolina Division of Aging and Adult Services
OnTrack Financial Education & Counseling
United Way
Warren Wilson College

Technical & Administrative Support

Christina Giles	Land-of-Sky Regional Council



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PART IX: APPENDICES

Appendices

- A. Planning Framework
  - Timeline
- B. Task Force
  - Roster
  - Minutes
  - Task Force Notebook
  - Work Team Orientation Packet
- C. Community Meetings
  - Meeting locations
  - Discussion Guide
  - Themes/Summary Notes
- D. Community Survey
  - Survey
  - Survey Results
- E. Service Providers Survey
  - Survey
  - Survey Results
- F. Work Team Reports
- G. Annotated Recommendations
- H. ACC Implementation Work Plan (March 2008)
- I. Power Point Presentations
  - Buncombe County Board of Commissioners (May, 2007)
  - Aging Coordinating Consortium (December, 2007)
  - Buncombe County Board of Commissioners (April, 2008)

APPENDICES AVAILABLE UPON REQUEST FROM THE ACC PLANNING COMMITTEE CHAIR