



SOCIAL & ECONOMIC FACTORS THAT AFFECT HOW WE EXPERIENCE AGING

Recommendation 1 - Help Older Adults Retain More Financial and Material Resources To Support Healthy Aging

Strategy 1 - Help More North Carolinians Plan and Save for Retirement

- a. The North Carolina Office of State Human Resources should identify opportunities to assist state employees with comprehensive pre-retirement education and planning related to finances, housing, and transportation needs for aging.
- b. The North Carolina General Assembly should establish a state-facilitated program to help businesses offer paycheck deductions for retirement savings if they are currently not offering a retirement plan.

Strategy 2 - Increase Employment Opportunities for Older Adults

- a. The Department of Commerce (including the NCWorks Commission), North Carolina Chamber of Commerce, local Chambers of Commerce, North Carolina Community Colleges System, University of North Carolina System (including Schools of Business and lifelong learning programs), and local Workforce Development Boards should collaborate to identify best practices and provide education to business owners and employers about:
 - i. Benefits and methods of attracting and retaining older adult employees, and
 - ii. Opportunities to retool the skills of older adults to meet employment needs.
- b. The North Carolina Division of Aging and Adult Services and other administrators of the Senior Community Services Employment Program (SCSEP) should work with partners and organizations where older adults become connected to SCSEP to reach the capacity of the program.
- c. Unite Us should work to develop connections with senior services providers to increase the use of the NCCARE360 statewide resource network to support older North Carolinians in areas like employment and income assistance.

Strategy 3 - Update Tax Policy to Help Older Adults with Lower Incomes

The North Carolina General Assembly should review and update income and property tax policies related to older adults to provide tax relief for those most in need. Tax policies to be reviewed include the Homestead Property Tax Exclusion, Circuit Breaker Tax Deferral, Refundable Earned Income Tax Credit, and the income and age brackets currently in place for older adults.

Strategy 4 - Increase Uptake of Food and Nutrition Services

- a. North Carolina philanthropies should provide additional financial support for outreach contractors to increase awareness of the eligibility and enrollment process for Food and Nutrition Services (also known as SNAP), particularly in historically underserved communities. Financial support should also include sensitivity and cultural awareness training for outreach contractors on methods to reduce stigma for consumers accessing Food and Nutrition Services.
- b. Outreach contractors should consult with the North Carolina Division of Social Services, Division of Aging and Adult Services, County Departments of Social Services, and Area Agencies on Aging on effective outreach methods in North Carolina's diverse communities to ensure all eligible individuals have the opportunity to enroll in the program.

c. The North Carolina Department of Health and Human Services should increase staff capacity to more quickly ensure that the Division of Child and Family Well-Being, Food and Nutrition Services Section is able to complete transition from the 1-year client recertification period to a 3-year client recertification period for FNS/SNAP as soon as possible.

d. The North Carolina Department of Health and Human Services should provide guidance on establishing partnerships between the health and medical community and health care payers to promote food prescription programs, the Senior Farmers' Market Nutrition Program, Commodity Supplements (senior boxes), and food programs for veterans and military families.

Strategy 5 - Reduce the Costs of Health Care Coverage

The North Carolina General Assembly should increase access to health insurance and reduce costs to older adults with lower incomes by:

- a. Using its authority to reduce eligibility requirements for income and assets for the Medicare Savings Programs for lower income adults.
- b. Increasing funding for outreach to inform consumers of opportunities for Medicare Savings Programs and the Part D "Extra Help" benefits for those with limited incomes, particularly in underserved communities and those where distrust of government programs or lack of knowledge about them may be more common.
- c. Supporting outreach to older adults who are newly eligible for Medicaid due to the state's expansion of Medicaid eligibility.

Strategy 6 - Increase Awareness of and Protections from Fraud for Older Adults

The State Attorney General's Office should continue collaboration with the North Carolina Division of Aging and Adult Services and the North Carolina Senior Consumer Fraud Task Force to:

- a. Work with the North Carolina Bankers Association, Carolinas Credit Union League, and North Carolina Retail Merchants Association to promote education and training of bank and retail employees on identification of possible victims of fraud and how to intervene in potential instances of fraud.
- b. Evaluate what groups of older adults may be most vulnerable to fraud and identify opportunities for additional outreach.

Recommendation 2 - Ensure Safe and Affordable Housing For Older Adults

Strategy 7 - Ensure Statewide Focus on Housing Availability, Affordability, and Supports for Older Adults

a. The North Carolina Department of Health and Human Services should fulfill the recommendation of the Governor's Advisory Council on Aging to conduct, or identify another entity to conduct, a statewide comprehensive needs assessment of 1) current and future housing needs and 2) programs to address home building and home modification for older adults. The review should identify differences in the availability and cost of housing by race, ethnicity, disability status, geography, and income. The review should also consider and discuss variations in cost of utilities among these groups, adequacy of public funding for home modification and repair services, challenges related to falls prevention for homeowners vs. renters, and opportunities for increasing social connections for older adults through planned community/housing environments. The review process should include representation from community members and advocacy groups most impacted by housing issues to provide input on context and important considerations.

b. The North Carolina General Assembly, the Office of the Governor, and the North Carolina Housing Finance Agency should work together to:

i. Review results of the housing needs assessment recommended in 7a and appoint a task force to:

- 1.** Identify policy options to address a) inadequate supply of housing, b) access to home modifications, and c) disparities in access to safe and affordable housing.
- 2.** Identify effective incentives (e.g., inclusionary zoning, density bonuses) for home builders and buyers to develop and purchase homes built with universal design characteristics and increase available tax credits for home modifications to help older adults stay in their homes regardless of their income.
- 3.** Identify opportunities to increase the service area for Centers for Independent Living across the state to support stable housing options for people with disabilities.

ii. Increase funding to support and sustain the North Carolina Housing Trust Fund.

Strategy 8 - Enhance Learning Opportunities Related to Housing Programs and Services

a. The North Carolina Falls Prevention Coalition should partner with statewide and local housing organizations to host annual summits rotated to different regions that include education for interested and responsible parties and consumers about what can be done to reduce the risk of falls in the home and community. The summits should include a focus on housing considerations and issues for people in rural areas, people with physical and sensory disabilities, people who live in public or rental housing, and other groups who may be underserved.

b. The North Carolina Division of Aging and Adult Services and Area Agencies on Aging should identify opportunities to support learning and opportunities to enhance efficiencies for older adult community service providers about possible uses for Home and Community Care Block Grant (HCCBG) funds when there is an increase in funding availability, other funding sources, and available community resources to help ensure safe and affordable housing for older adults (e.g., home modification programs). All trainings/presentations/efforts should include a focus on housing considerations and issues for people in rural areas, people with disabilities, people who live in public or rental housing, and other groups who may be underserved.

c. The North Carolina Statewide Independent Living Council, local Centers for Independent Living, and state and local housing coalitions should partner to develop education opportunities for local Housing Authorities and Housing Choice Voucher Program (formerly known as Section 8) landlords on the needs of older adults and people with disabilities related to home modifications and how universal design features can support the aging population and people with physical and sensory disabilities.

Recommendation 3 - Ensure Digital Equity for Older Adults

Strategy 9 - Increase Access to Broadband Internet across the State

In developing and implementing digital inclusion plans, local governments should work with community partners – including senior centers, libraries, faith-based groups, health care providers, and university and community college facilities (among other possible partners) – to ensure community members and smaller organizations serving older adults have access to

reliable and affordable broadband internet service. Strategies may include increasing uptake of subsidized internet services and expanding programs that provide low-cost access to internet services and devices that are appropriate for the needs and abilities of older adults.

Strategy 10 - Increase Digital Literacy for Older Adults

The North Carolina Division of Aging and Adult Services should work with aging services partners and funders to:

- a.** Identify opportunities to sustain the work that will be done through the digital literacy grant along with other grantees of the North Carolina Department of Information Technology's Division of Broadband and Digital Equity.
- b.** Increase awareness of digital literacy services offered at various community locations (e.g., senior centers, libraries, cooperative extensions, local school systems, community colleges, and programs that pair youth with older adults for mutual mentorships).

PROMOTING A CULTURE OF AGING ACROSS THE LIFESPAN

Recommendation 4 - Create a Community Culture that Supports Healthy Aging

Strategy 11 - Promote Aging in All Policies

The Office of the Governor, the North Carolina Department of Health and Human Services, in collaboration with organizations such as the UNC Institute of Government, the North Carolina Association of County Commissioners, the North Carolina Coalition on Aging, North Carolina Community College System, and AARP NC should work together to educate policymakers at all levels on promoting an "Aging in All Policies" framework similar to "Health in All Policies."

Strategy 12 - Grow Age-Friendly Communities with Support from Local Government and Community-Based Organizations

- a.** Local governments should support and fund the development of age-friendly communities by:
 - i.** Working directly with community leaders and residents of communities to identify opportunities for intergenerational community connections; opportunities to celebrate aging and the contributions of older adults; and opportunities to maximize the experience, talents, and interests of older adults.
 - ii.** Including perspectives and representation from older adults most affected, including older adults who represent the racial and economic diversity of communities and advocates for people with disabilities, in aging planning processes.
 - iii.** Ensuring a "healthy aging ambassador" is responsible for applying the "Aging in All Policies" approach to county- and municipal-level policymaking, planning, and program development.
- b.** AARP NC, the North Carolina Department of Health and Human Services, Hometown Strong, and the UNC School of Government, and other units of the UNC system should collaborate to:
 - i.** Develop educational opportunities for local government officials—especially city, county, and regional planners—to learn about the "Aging in All Policies" framework and best practices in age-friendly community development with considerations for issues such as pedestrian safety, transportation, zoning, etc.



- ii. Identify an entity to host a learning collaborative of communities working to be designated as age-friendly to discuss best practices, lessons learned, and opportunities for sharing their experiences with other communities interested in becoming age-friendly.
- iii. Identify funding needs and potential sources of funding for this work.

Strategy 13 - Help Older Adults Improve or Maintain Their Physical Activity, Strength, Endurance, Flexibility, and Balance

Local parks and recreation departments should convene and partner with senior centers, local health departments, Senior Games, faith-based organizations, other community activity organizations (e.g., YMCAs), local business representatives, health care payers, local planning entities, Senior Health Insurance Information Programs (SHIIP), and Food and Nutrition Services (also known as the Supplemental Nutrition Assistance Program - SNAP) Education -implementing agencies to:

- a. Learn from and engage with older adult community members about their preferences and needs for activities to improve or maintain their physical activity and strength.
- b. Identify and increase implementation and use of programs and services to encourage physical activity and the maintenance of strength across different levels of physical ability among older adults, including evidence-based fall-prevention programs. This work should include an examination of how accessible and welcoming programs are for different groups within the community based on income, race, ethnicity, and physical and sensory disability status.
- c. Identify safety concerns and access considerations for older adults to engage in physical activity in the community (e.g., community safety, access to sidewalks, fall risks on streets and sidewalks, indoor and outdoor activity options, and virtual exercise programs) and partner with local government leaders and planners to develop options to address concerns.

Recommendation 5 - Collaborate to Encourage Actions that Support Healthy Aging across the Lifespan

Strategy 14 - Dedicate Resources to Answering Important Research Questions and Developing Data on Aging Services

- a. The UNC System General Administration and North Carolina Community College System should undertake or arrange for a study that includes:
 - i. Identification of existing Gerontology and Geriatric Medicine programs, curricula, and resources on campuses across the UNC and Community College systems;
 - ii. Assessment of the adequacy of the existing programs and curricula and the interaction of these programs across the systems; and
 - iii. Recommendations for enhancing research, education, training, and continuing education to respond to North Carolina's aging demographic, promote healthy aging, and address the workforce needs in serving an aging population.
- b. The North Carolina Division of Aging and Adult Services and aging partners should evaluate the outcomes and lessons learned from the additional funding for aging services programs that was available through the American Rescue Plan Act and identify:
 - i. Innovations and programs that should warrant state support,
 - ii. Opportunities to sustain effective programs and whether this requires modification of existing state policies and rules, and

- iii. The most relevant and accessible outcome measures that can be collected from these programs to facilitate their continued support.

Strategy 15 - Address Cultural Stigmas of Aging

State and local agencies and partners should increase opportunities for intergenerational community interactions by:

- a. Redeveloping/growing programs like Senior Education Corps, AmeriCorps Seniors (Foster Grandparent and other programs), AARP Foundation Experience Corps, and NC Education Corps.
- b. Pursuing philanthropic support for resources/collaboratives to help parks and recreation, arts, Senior Games/Silver Arts, cooperative extensions, senior centers, schools, libraries, faith-based partners, etc., to develop intergenerational programming.

Strategy 16 - Ensure Legislative Attention to Aging Issues

- a. The North Carolina General Assembly should ensure that legislative committee structures promote discussion and review of policy that impacts older adults, family caregivers, and aging across the lifespan.
- b. The North Carolina Division of Aging and Adult Services, in collaboration with AARP NC and the North Carolina Coalition on Aging, should convene an annual meeting of representatives from state agencies involved in aging issues (e.g., Division of Public Health, Division of Services for the Blind, Division of Services for the Deaf and Hard of Hearing, Commerce), the Governor's Office, Governor's Advisory Council on Aging, North Carolina Senior Tar Heel Legislature, NC Association on Aging, NC Association of Area Agencies on Aging, UNC-Asheville Center for Health and Wellness, Disability Rights NC, and NC Falls Prevention Coalition to discuss priorities and identify opportunities for alignment.

COMMUNITY SERVICES AND PROGRAMS

Recommendation 6 - Strengthen Existing Programs and Services

Strategy 17 - Strengthen North Carolina's Local Senior Centers

- a. The North Carolina General Assembly should uphold and strengthen the skill and ability of senior centers to provide vital social connections, activities, exercise, and other programs integral to the lives of older adults and their families by:
 - i. Supporting the 2023-2024 Senior Tar Heel Legislature priority to "Increase Recurring Funding for Senior Centers by \$1.26 Million"

Senior Tar Heel Legislative Priorities for 2023-2024 - Increase the Senior Center General Purpose Appropriation by \$1,265,316 in recurring funds.

Senior Center General Purpose funding is currently \$1,265,316, which is not meeting the demands of a growing population.

- ii. As part of this funding increase, the General Assembly should also request a study of the current senior center certification program to evaluate effectiveness and identify opportunities for strengthening certification to ensure that needs of older adults are being met, that centers are serving a population representative of the community with regard to race, ethnicity, and disability of older adults, and to evaluate how funding can meet the goal of incentivizing certification.

b. The North Carolina Division of Aging and Adult Services should conduct the analysis of the senior center certification program recommended in Strategy 17

i. To identify strengths and weaknesses and opportunities for improvement. This process should include Area Agencies on Aging, a representative sample of senior centers and participants, and representatives of the Senior Tar Heel Legislature and Governor's Advisory Council on Aging.

Strategy 18 - Increase Access to the Program of All-Inclusive Care for the Elderly

a. NC Medicaid should help to increase access to the Program for All-Inclusive Care for the Elderly (PACE) through improved eligibility and enrollment processes.

b. The General Assembly should help to increase access to PACE by fulfilling the recommendation of the Governor's Advisory Council on Aging to expand program availability throughout the state, including providing additional resources to the Division of Health Benefits for program administration.

Recommendation of Governor's Advisory Council on Aging:

Continue the phased expansion of the PACE (Program of All-Inclusive Care for the Elderly) managed care model statewide and provide additional resources to support the administration of the PACE program by the NC Division of Health Benefits.

Strategy 19 - Increase Knowledge about and Prevalence of Current Programs and Supports

The North Carolina Department of Health and Human Services should work with Offices and Divisions within the Department and Area Agencies on Aging to develop:

a. An outreach strategy and identify partners at the state and local levels (e.g., faith leaders, libraries, local government, regional AHECs) to increase knowledge and use of existing services and programs. This includes but is not limited to Home and Community Care Block Grant funding, adult protective services, guardianship, 211, NCCARE360, FNS/SNAP, falls prevention programs, transportation assistance, food prescription programs, and the 988 Suicide and Crisis Lifeline. Special attention should be paid to accessibility of programs for different groups based on income, race/ethnicity, and disability status.

b. Recommendations and strategies to increase funding for and number of programs such as CAPABLE, A Matter of Balance, Handy Helpers, CHAMP (Community Health and Mobility Partnership), community paramedicine, Regional Falls Prevention Coalitions (to connect all counties), programs employing community health workers, programs that help older adults with health literacy, medication access, and Medication Therapy Management (MTM, e.g., Senior PharmAssist), and other programs to address the needs of older adults aging at home and the needs of family caregivers.

Strategy 20 - Conduct Research and Evaluation on Current Programs to Increase Access to Services

a. The North Carolina General Assembly should fund:

i. A study to understand the adult day health program landscape, how to expand in rural areas, what the funding landscape is now (i.e., adequacy, range of rates from different funding sources), and how to ensure equitable access for populations who are lower-income, historically marginalized, and/or experiencing physical or sensory disabilities.

ii. The UNC General Administration System to support research and evaluation studies, with input from the North Carolina Division of Aging and Adult Services, that would inform future aging service planning and development and the promotion and support of "Aging in All Policies" (also see Strategy 14).

b. The North Carolina Department of Transportation should work with relevant partners, such as the Division of Aging and Adult Services, Area Agencies on Aging, local departments of health and social/human services and health/medical providers to identify innovative ridesharing and transportation-hailing solutions that are demand-responsive (e.g., RideSheet), streamlined, and consumer-friendly and seek funding for additional program implementation and advertising across the stat.

c. The North Carolina Department of Health and Human Services should identify Division representatives and other partners to review terminology used in human services program applications, systems, and other data collection sources and make recommendations about inclusive methods of collecting gender, race/ethnicity, family status, and other demographic information.

d. The Governor's Highway Safety Program, in collaboration with the North Carolina Department of Health and Human Services and the UNC Highway Safety Research Center, should develop training materials for relevant aging services providers on how to screen for fitness to drive and make appropriate referrals to medical providers.

Strategy 21 - Increase and Modernize the Home and Community Care Block Grant

The North Carolina General Assembly should:

a. Fulfill the Senior Tar Heel Legislature's recommendation to increase recurring state funding for the Home and Community Care Block Grant (HCCBG) by \$8 million.

Senior Tar Heel Legislative Priorities for 2023-24 – Allocate an additional \$8M in recurring funds for the Home and Community Care Block Grant.

The Home and Community Care Block Grant is the primary funding source for community-based programs that support people 60 and older and current funding is insufficient to meet the need. The current state appropriation is \$36.9M.

b. Fund the North Carolina Division of Aging and Adult Services to:

- 1.** Study and update HCCBG policies that impact how local providers can use funds.
- 2.** Improve provider reimbursement to streamline data-sharing and increase capacity for evaluation.
- 3.** Modernize the Aging Resources Management System (ARMS) as a tool for provider reimbursement and program planning and evaluation.

Strategy 22 - Strengthen Adult Protective Services

a. The North Carolina General Assembly should work with Adult Protective Services (APS) at the state and local levels and advocates for older adult to evaluate the current state statute for APS to identify opportunities for modernization and funding.

b. Fulfill the 2023-2024 Senior Tar Heel Legislature priority of increasing recurring funding for APS by \$8 million.



Senior Tar Heel Legislative Priorities for 2023-24

Allocate an additional \$8M in recurring funds for Adult Protective Services (APS) to address staff shortages.

In SFY 21, APS received 32,075 reports across the state, compared to 14,001 reports in SFY 2005-2006, reflecting an increase of 129% in 17 years.

Recommendation 7 - Include Aging in Local Public Health & Hospital Community Health Assessments

Strategy 23 - Ensure Integration of Age-Related Issues in Community Health Assessments and Action Planning

- a. The Division of Public Health, North Carolina Institute for Public Health, and North Carolina Healthcare Association should help to increase inclusion of aging-related issues in the work of local public health and hospitals by providing these entities with education and technical assistance related to aging priorities and services and supports to include falls prevention, senior nutrition, mobility, accessibility, transportation planning, and social isolation in community health assessments.
- b. Local health departments and nonprofit hospitals should ensure aging-related issues are included in community health assessments and should grow partnerships with aging-related community organizations.

Recommendation 8 - Connect Health Care with Aging Issues

Strategy 24 - Identify and Address Health Issues Related to Getting Adequate Nutrition

- a. The North Carolina Oral Health Collaborative should work with partners to identify standards and improve awareness of oral health for older adults by:
 - i. Collaborating with the North Carolina Academy of Nutrition and Dietetics, North Carolina Medical Society, Old North State Medical Society, Family Physicians Association, North Carolina Nurses Association, and other health care trade associations to build awareness of older adult oral health issues and identify simple screening and referral protocols.
 - ii. Collaborating with the North Carolina Division of Aging and Adult Services, Area Agencies on Aging, state and local public health, and senior centers to identify opportunities and funding to build awareness of older adult oral health issues and ways to connect older adults to dental services, including for those who are homebound and those who otherwise face barriers due to their income, geographic location, or special needs.
 - iii. Developing a recommendation for service frequency and coverage of dental care for older adults.
- b. The North Carolina Healthcare Association (NCHA) should work with experts in food security and nutrition to identify and support a standard evidence-based tool for hospitals to use in the identification of malnutrition. NCHA should also advocate for adequate training of any hospital staff who conduct malnutrition assessments, as well as referral mechanisms for those identified as food insecure and/or malnourished (e.g., NCCARE360).

Strategy 25 - Use Screening and Assessments to Identify Issues of Falls Risk, Fitness to Drive, and Social Isolation

- a. The North Carolina Department of Health and Human Services should:
 - i. Update client intake forms for social services programs to include questions to screen for falls risk and social isolation.

- ii. Partner with the North Carolina Community Health Workers Association to identify training and targeted outreach opportunities for community health workers to educate about and screen for falls risk, fitness to drive, and social isolation at community-based organizations serving older adults (e.g., senior centers).

- iii. Partner with the North Carolina Area Health Education Centers (AHEC), North Carolina Community Health Workers Association, North Carolina Nurses Association, North Carolina Medical Society, Old North State Medical Society, and North Carolina Association of Pharmacists to identify and promote educational opportunities for health care providers and direct care workers on:
 1. Health impacts of social isolation and ways to address this issue with older adults.
 2. Importance of screening and assessments for fitness to drive and available screening tools.
 3. Relevance of vision and hearing changes to risk of falls and social isolation and recommended screenings.
 4. Relationship between polypharmacy and risk of falls and methods to decrease medication burden.
 5. Moving beyond fall-risk screening to assessing specific risk factors for falls to know how to appropriately intervene.

- b. The North Carolina Health Care Association, North Carolina Medical Society, and other health care professional organizations should:
 - i. Promote the inclusion of screening and assessment for falls risk and social isolation on standardized screening for patients, particularly for older adults, and a screening for traumatic brain injury if a patient has experienced a fall.
 - ii. Promote the inclusion of falls prevention and social isolation as topics for community outreach services or events.
 - iii. Work with and help financially support the NC Falls Prevention Coalition and their partners to promote the development or expansion of evidence-based intervention plans and programs for individuals screened as at risk for falls and ensure relevant health care providers are educated on these intervention plans. Intervention plans should include referral pathways to help community-dwelling older adults access an appropriate evidence-based community falls-prevention program.

WORKFORCE TO MEET THE NEEDS OF OLDER ADULTS

Recommendation 9 - Ensure an Adequate Aging Network Workforce for the Future

Strategy 26 - Understand Current Aging Network Workforce Characteristics and Future Workforce Needs

The Department of Labor should partner with the North Carolina Division of Aging and Adult Services and North Carolina Workforce Development Boards, as well as other health care and aging network partners, to evaluate the characteristics of the aging network workforce in North Carolina and projected workforce needs in the coming years. This evaluation should examine variations in workforce capacity and salaries across the state, demographics of the workforce (e.g., age, race, and ethnicity), and use of and access to technology.

Strategy 27 - Respond to Current and Future Needs for Aging Services and Aging Network Workforce

- a. The North Carolina Center on the Workforce for Health should include a focus on sectors and disciplines that care for older adults.
- b. The Division of Aging and Adult Services and Area Agencies on Aging should partner to:
 - i. Develop resources for succession planning for aging network providers. Partners should include representatives from Area Agencies on Aging, senior centers, and other aging network providers.
 - ii. Identify opportunities for partnerships between universities/ community colleges and local aging and adult services to connect with the future workforce, share intergenerational activities, and link to capacity-building opportunities. Partners should include the Food and Nutrition Services Employment and Training Program; rehab training programs including PT, OT, SLP, and others; and the UNC System and NC Community College System, among others.
 - iii. In partnership with NC AHEC, identify opportunities for incorporating retired health care professionals into the aging services workforce for employment.

Recommendation 10 - Ensure a Strong Community Workforce to Serve Older Adults

Strategy 28 - Increase Knowledge and Awareness for Serving Older Adults in the Community

The North Carolina Association on Aging, AARP NC, North Carolina Coalition on Aging, and North Carolina Division of Aging and Adult Services, should partner to identify and prioritize types of professionals who can benefit from greater understanding of needs of older adults (e.g., first responders, transportation workers) and identify opportunities and partnerships to provide education that increases aging-related knowledge and best practices and addresses negative cultural stereotypes of aging and older adults.

Recommendation 11 - Improve the Ability of Community Health Workers to Address the Needs of Older Adults

Strategy 29 - Increase Awareness of, and Sustainable Payment for, Community Health Workers

The North Carolina Community Health Workers Association, North Carolina Association on Aging, North Carolina Coalition on Aging, and relevant partners should collaborate to increase the opportunity for community health workers (CHWs) to be a resource in identifying and addressing needs of older adults and family caregivers in communities by:

- a. Identifying opportunities to increase the number of CHWs serving North Carolina's communities and increase awareness of the role CHWs can have within a health care team and in connection with local aging services providers.
- b. Developing sustainable payment models for CHW services, such as a regional/hub model that would provide funding directly to community-based organizations that employ CHWs.
- c. Creating a learning collaborative and/or opportunities for community-based organizations that deploy CHWs to learn from others about partnerships formed to pay for CHW services. Also, grow educational opportunities and tools to help CHWs be successful in addressing the needs of older adults and family caregivers.

Recommendation 12 - Support Family Caregivers

Strategy 30 - Increase Access to Employment and Well-Being Support for Family Caregivers

- a. The North Carolina General Assembly can support older adult employees and caregivers of older adults, people with disabilities, and children by:
 - i. Implementing paid family and medical leave for all state employees.
 - ii. Adopting policies like Family Medical Leave Insurance and requirements that employers allow employees to earn a minimum number of paid sick or personal leave days and allow them to request flexible work without penalty.
 - iii. Exploring policies that support business owners who want to adopt family-friendly workplace policies.
 - iv. Exploring policies to support counseling and support services for family caregivers.
- b. The North Carolina Division of Aging and Adult Services and Area Agencies on Aging identify opportunities to strengthen support of local outreach efforts for family caregivers to facilitate good nutrition, falls prevention, access to essential transportation, safe housing, and social connectedness.