Meeting Notes

<u>Introductions & Information Sharing</u> (see list of attendees on last page):
- Someone mentioned that Medicare Part D Open Enrollment starts on Tuesday. They recommend comparing current drug plan with newer plans to find what is most cost effective.
- Pedro Altagracia reports that he has been talking with Claire and Alice about advocacy training and public policy work
- As we begin to look at lead paint issues, remember that it may be a concern of older adults begin sharing their homes.

<u>Director's Update:</u>

Alice provided brief update on the following:
- Legislative Breakfast Recap:
  - Plan for advocacy work
- New Dartmouth College Eichler Fellows to work on children's food insecurity and childhood lead poisoning
- Flu Clinics
- CHIP Planning

<u>PHC Presentations and Work Session</u>:

Understanding What the NH Healthy Aging Data Report Tells Us about Aging in the Upper Valley,
Martha Tecca, CommunityCare of Lyme

This report of health status indicators represents a % of older adults, but is not a real measure of health status. It was developed for the NH Alliance for Healthy Aging. Martha walked us through the report and showed us how to use the database to drill down to town-level data.

Martha encourages usage of this data in work. Why important?
- Improved resources for senior health care services, discussion around limitations in the Upper Valley
- Priority due to numbers of "silver tsunami"
- Create healthier places to age -- understand, engage, act.
- Age-Friendly Movement? AARP and WHO define this as framework (AFC) for how we make our communities and make it friendly for all ages. The reframing aging presentation at next month's Annual Meeting will look at this topic.
- NH Report: 235 cities and towns; 166 indicators used; includes infographic; 244 community profiles and state maps
- NH ranks well nationally in terms of being a good place to age. Why? Our rural character?
- There are variations within the data, so see the limitations description.
- The data is about 2 years old and will be updated.
- Relative to the depression data, someone asked about the VA's involvement in the conversation.
- There is nothing in here about volunteerism.
- Data may be provider dependent.
- https://healthyagingdatareports.org/new-hampshire-healthy-aging-data-report/

Should the Upper Valley join the Age-Friendly Movement?
- There is a framework of domains.
- Supported by AARP, CDC, and others.
- AARP Domains of Livability: outdoor spaces and buildings, transportation, housing, social participation, respect and social inclusion, participation and employment, communication and information and community and health services
- Do we think these models are really doing anything? --> how is this being carried out

What can we get from this data?
- Using well-being as a positive outcome that we hope for.
- Focus on experience. Did you get where you need to go? Self-reported data.
- We need to nuance the 65+ where appropriate, what are we really trying to get from this data?

Discussion/Questions:
- This is divided by towns, but we must recognize the interconnectedness in our region. Don't let these town lines get in the way of our efforts.
- We are a mecca for non-profits who work on behalf of everyone with services.

Meeting Attendees (October 18, 2019)
Bridget Aliaga, DHMC All Together & Open Doorways
Mark Boutwell, Senior Solutions
Bill Boyle
Hilary Davis, VNAVNH
Alice Ely, PHC
Rudy Fedrizzi, VT DOH
Janet Lowell, Lebanon Community Nurse
Jeana Newbern, Lake Sunapee VNA
Hilary Schuler, DHMC
Martha Tecca, Community Care of Lyme