

# Process Proposal for the Development of a Vermont Action Plan for Aging Well

## Introduction

Vermont is one of the oldest states in the nation, with over 170,000 Vermonters (27%) currently over the age of 60. Our aging demographics impact every area of life, and all Vermont sectors must be planning for how to best engage and serve Vermonters as we grow older.

[Act 156](#), the Older Vermonters Act, outlined core principles to guide the State's efforts to ensure that all Vermonters can age well. The Secretary of Administration and Commissioners of the Department of Disabilities, Aging and Independent Living and the Department of Health recognize the value that older Vermonters bring to our communities and the importance of building age-friendly systems of support across the state. One important step in doing this is outlined in the Older Vermonters Act. The Act states that "The Secretary of Administration, in collaboration with the Commissioners of Disabilities, Aging, and Independent Living and of Health, shall propose a process for developing the Vermont Action Plan for Aging Well to be implemented across State government, local government, the private sector, and philanthropies."

The Act further states that the purpose of the Action Plan for Aging Well is to "provide strategies and cultivate partnerships for implementation across sectors to promote aging with health, choice, and dignity in order to establish and maintain an age-friendly State for all Vermonters."

Such a cross-sector public-private effort as described in the Act aligns extremely well with the Governor's priorities to 1) Grow the economy, 2) Make Vermont more affordable, and 3) Protect the vulnerable.

The process proposal for the development of the action plan is due to the legislature by May 1, 2021, must include action steps, an achievable timeline, and potential performance measures, and must engage a broad array of stakeholders in its development.

To accomplish this goal, the Secretary of Administration worked with the Department of Disabilities, Aging and Independent Living and the Department of Health to develop a draft process proposal for the action plan. The draft was shared with a broad range of stakeholders as required by Act 156, including:

- State government agencies via the Agency of Administration
- Older Vermonters and their families via the Aging Services Network, including Area Agencies on Aging, Home Health Agencies, Adult Day Providers and senior centers
- Adults with disabilities and their families via the Designated Agencies and the Vermont Center for Independent Living

- Local government officials via the Vermont League of Cities and Towns
- Health care and other service providers via the Department of Health
- Employers via the Vocational Rehabilitation network of business partners and Associates for Training and Development participating employers
- Community-based organizations via the Area Agencies on Aging
- Foundations via the Vermont Community Foundation’s network
- Academic researchers via the University of Vermont Center on Aging

Approximately 13 representatives of interested organizations, associations and sectors participated in a virtual public comment feedback session on February 10, 2021. Written comments were accepted until March 5, and 20 distinct comments were received via email, many from older Vermonters or direct service providers. The process proposal below has been revised to reflect the feedback received from stakeholders.

## **Process Proposal**

The Agency of Administration, Department of Disabilities, Aging and Independent Living and Department of Health are pleased to put forward the process proposal below. The proposal includes the following action steps which will be described in more detail below:

1. Research Other States’ Processes and Plans and Analyze Resource Needs
2. Establish an Advisory Committee
3. Conduct a Baseline Assessment
4. Develop the Plan
5. Disseminate and Promote the Plan
6. Implement the Plan and Monitor Progress
7. Engage Stakeholders Throughout Process

## **ACTION STEPS**

### **Research Other States’ Processes and Plans and Analyze Resource Needs**

In February 2020 the SCAN Foundation presented to Vermont legislators about the State of California’s development of a “Master Plan on Aging,” including its purpose and process for development, which in part influenced the language included in Act 156 for the development of such a plan in Vermont. Additional states such as Massachusetts, Colorado, Minnesota, and Texas have also developed master plans.

In 2020 the SCAN Foundation did a review of states’ master plans or those in development and identified key elements for a successful plan<sup>1</sup>:

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<sup>1</sup> <https://www.thescanfoundation.org/publications/building-a-master-plan-for-aging-key-elements-from-states-planning-for-an-aging-population/>

- Decisive leadership: Governor and legislators are invested.
- Rational: Priorities are ranked and data driven.
- Comprehensive: Includes services, financing, workforce, caregiver support, housing transportation and more.
- Stakeholder Involvement: consumers, providers and policymakers work together.
- Accountability: Reporting timelines are clear with measurable outcomes.

They also identified cross-cutting themes that impact a successful plan implementation, including intentionally addressing equity at the start, applying and maintaining a person-oriented focus, addressing aging across the life span as we all are aging, and developing cross-sector collaborations (i.e., private, public, and independent).

Before Vermont embarks too far into the development of a plan, there may be insights and lessons learned from other states' processes and plans that can inform our work, and so as a first step in the process, state leaders will seek to learn from other states' experiences by reaching out to State Units on Aging in those states named above.

As described above, one element of a successful plan is resource investment. As part of this research effort, other states' leaders will be asked about what resources were needed to develop and implement their plans and if their states invested funds in resources such as staffing. Vermont leaders will do a careful analysis of staff resources used to date and anticipated going forward in order to estimate resource needs for successful plan development, inclusion of health equity and transparent stakeholder engagement.

### **Establish an Advisory Committee**

With approval to move the process forward, the next step is to establish an Advisory Committee for the Vermont Action Plan for Aging Well to provide guidance and oversight of the development, implementation and monitoring of the plan.

The committee must include representation from a broad range of stakeholders, which may include representatives similar to those identified in Act 172 for the Older Vermonters Act Working Group, such as a representative from: (in alphabetical order)

- AARP
- Area Agencies on Aging
- Businesses/Employers
- Community of Vermont Elders (COVE)
- Designated Agencies
- Government agencies (state and local)
- Healthcare providers
- Home Health Agencies
- Housing providers/SASH
- Long-term care facilities

- Transit Providers
- Veterans' organization
- Vermont Chamber of Commerce
- Vermont Legal Aid
- University of Vermont Center on Aging

In addition, Vermonters with lived experience, including older Vermonters, older veterans, Vermonters with disabilities, and family caregivers should be members of the Advisory Committee. The committee should also include, at minimum, a representative from the BIPOC (Black, Indigenous, Person of Color) community and/or a person from the New American community.

The process for creating the committee should be clear and transparent for the public.

Best practice from other states' processes indicates that Administration leadership is key to success. It is recommended that the committee be led by the Agency of Administration with support from the Department of Disabilities, Aging and Independent Living and Department of Health and that the committee meet at least quarterly. One task of the committee will be to continually analyze the resource needs for the development and implementation of the plan.

### **Conduct a Baseline Assessment of Resources and Needs**

Using the Older Vermonters Act Principles to guide areas of focus, which align with the Age-Friendly State "domains of livability,"<sup>2</sup> Vermont will conduct an assessment of current resources and needs of older Vermonters.

The Older Vermonters Act Principles set forth a vision for a Vermont in which our communities thrive because Vermonters of all ages are valued, supported and able to live our best lives. The eight principles below are outlined in detail in Appendix A.

1. Self-Determination
2. Safety and Protection
3. Coordinated and Efficient System of Services
4. Financial Security
5. Optimal Health and Wellness
6. Social Connection and Engagement
7. Housing, Transportation and Community Design
8. Family Caregiver Support

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<sup>2</sup> <https://www.aarp.org/livable-communities/network-age-friendly-communities/info-2016/8-domains-of-livability-introduction.html>

The baseline assessment of current resources and needs will use existing research and best available data as much as possible. Additional research or data collection will be conducted if funding is allocated and as resources allow, using best practices in methodology and design, which could include surveys, focus groups, interviews, community forums, etc. and ideally is conducted by an independent contractor. The assessment will note limitations where data is not available.

The assessment must also pay particular attention to equity, with a focus on assessing the resources and needs of historically underrepresented and/or underserved older adults including but not limited to racial and ethnic minorities, Native Americans, New Americans, Limited English Proficient older adults, older adults with developmental, intellectual or physical disabilities and LGBTQ+ older adults, in addition to priority populations identified in the State Health Improvement Plan.

### **Develop the Action Plan**

Following the assessment, the Advisory Committee will review the results of the assessment and work collaboratively with the State to develop the Vermont Action Plan for Aging Well. The plan must include:

1. Goals and objectives related to the eight principles above that address key identified needs and gaps from the assessment. Note that Act 156 requires that the plan specifically address the additional needs and concerns of older Vermonters and their families in the event of a public health crisis, natural disaster, or other widespread emergency situation in this State, and thus, at least one goal or objective must address this requirement.
2. Strategies for implementation of the goals/objectives. Strategies to be considered will be those that are most impactful, but also those that will be measurable, achievable and realistic.
3. Performance measures, benchmarks and timelines. Performance measures and benchmarks will be developed in categories that align with the Principles outlined above and will be specific to the objectives and strategies developed in the plan, taking into account available data across Vermont. Timelines may vary based on each strategy.
4. Per Act 156, a review of the Medicaid reimbursement rates paid to home- and community-based service providers if not already conducted by the State, is also required.

Given the breadth and depth anticipated in the development and implementation of the plan, it is recommended that the timeframe for the plan be approximately 10 years, with

opportunity to make content revisions periodically as the plan is monitored for progress. This aligns with best practice identified by the SCAN Foundation.

### **Disseminate and Promote the Plan**

The Vermont Action Plan for Aging Well can function as an important vehicle in communicating broadly with Vermonters about the State's vision and provide a comprehensive blueprint that connects the efforts across sectors and agencies. Because so many different entities are involved in efforts to include and support older Vermonters, having these efforts connected through this visionary plan will help all Vermonters engage in this conversation more fully.

Once completed, the Agency of Administration in collaboration with the Department of Disabilities, Aging and Independent Living, the Department of Health and the Advisory Committee will develop a dissemination and promotion plan that seeks to raise awareness across Vermont of the Action Plan and this collective effort.

As an example of how another state has begun promoting their Master Plan on Aging, see California's website for its plan: <https://www.engageca.org/>. The extent of Vermont's promotion will depend on available resources.

### **Implement the Plan and Monitor Progress**

Because the Vermont Action Plan for Aging Well will be a broad, visionary plan that will engage multiple sectors, public and private, state and local, implementation will need to be coordinated with leadership provided by the Administration.

As described above, the plan will include performance measures, benchmarks and timelines that will dictate when and how the plan will be monitored.

Key performance measures will be incorporated into the State's Performance Scorecards (exactly where to be determined) to provide for public transparency and accountability.

The Advisory Committee will continue to play an important role in monitoring the progress of the plan and will meet twice a year to review progress and recommend any modifications, including any additional resources needed to continue to make progress.

### **Engage Stakeholders Throughout Process**

It will be critical to engage stakeholders at many points in the development and implementation of the plan. Act 156 identifies stakeholders for this current process proposal. These same stakeholders will have important feedback for the actual plan. Stakeholders will be engaged during the baseline assessment, during public comment on the draft plan, for help with dissemination and promotion of the finalized plan, and during

the monitoring of the plan’s progress. Given the breadth of the plan, engaging a broad array of stakeholders will be ideal, including those engaged via Act 156 for this proposed process:

- State government agencies: Agency of Administration, Agency of Human Services, Agency of Commerce and Community Development, Agency of Transportation, Department of Labor, Department of Public Safety, Attorney General’s Office, Vermont Emergency Management, etc.
- Older Vermonters and their families
- Adults with disabilities and their families
- Local government officials, such as town managers, select boards, etc.
- Health care and other service providers
- Employers
- Community-based organizations, including those providing core services to older Vermonters
- Foundations
- Academic researchers
- and other interested stakeholders

**Timeline for Action Steps**

This process proposal is required to include a timeline for the above action steps. Below is a proposed and estimated timeline:

Action Step	Timeframe
Approval of Proposed Process	May – June, 2021
Research Other States’ Processes and Plans and Analyze Resource Needs	May – August, 2021
Creation of Advisory Committee	July – August, 2021
Conduct Baseline Assessment	September 2021 – July 2022
Develop Action Plan for Aging Well*	July 2022 – June 2023
Disseminate/Promote the Plan	July 2023 – December 2023
Implement the Plan and Monitor Progress	July 2023 – July 2033
Engage Stakeholders	Throughout Steps Above

\*Note that the Department of Disabilities, Aging and Independent Living (DAIL) will be drafting the next required State Plan on Aging in 2022. The Vermont Department of Health (VDH) and DAIL will be collaboratively developing a State Plan on Alzheimer’s in 2022. In addition, VDH will be preparing for the next State Health Improvement Plan (SHIP) in 2023. Alignment of all the plans where possible will be a key goal.

## **Additional Considerations for the Legislature**

The undertaking of the development and implementation of the Vermont Action Plan for Aging Well is a significant body of work added on to the workload of state staff across multiple agencies who have very limited bandwidth for additional work. To ensure the long-term success of this important plan in support of all Vermonters, it is recommended that there be resources allocated within the state budget to manage the development and implementation of the plan. While it is not yet determined exactly what additional resources may be required, and that analysis is built into the above process, it is anticipated that at least one (1) FTE will be needed to successfully complete the development of the plan, its dissemination, and promotion and evaluation of its use.

Act 156 did not outline a specific role for the legislature in the further development of the Action Plan for Aging Well. The legislature may want to consider what role it would like to play going forward with the plan.



Older Vermonters should be able to direct their own lives as they age so that aging is not something that merely happens to them but a process in which they actively participate. Whatever services, supports, and protections are offered, older Vermonters deserve dignity and respect and must be at the core of all decisions affecting their lives, with the opportunity to accept or refuse any offering.

## Appendix A

**Self-Determination**

**Safety and Protection**

Older Vermonters should be able to live in communities, whether urban or rural, that are safe and secure. Older Vermonters have the right to be free from abuse, neglect, and exploitation, including financial exploitation. As older Vermonters age, their civil and legal rights should be protected, even if their capacity is diminished. Safety and stability should be sought, balanced with their right to self-determination.

**Coordinated and Efficient Systems of Services:** Older Vermonters should be able to benefit from a system of services, supports, and protections, including protective services, that is coordinated, equitable, and efficient; includes public and private cross-sector collaboration at the State, regional, and local levels; and avoids duplication while promoting choice, flexibility, and creativity. The system should be easy for individuals and families to access and navigate, including, as it relates to major transitions of care. The system should be designed to address the needs and concerns of Older Vermonters and their families during normal times and in the event of a public health crisis, natural disaster, or other widespread emergency situation in this State.

**Financial Security:** Older Vermonters should be able to receive an adequate income and have the opportunity to maintain assets for a reasonable quality of life as they age. If older Vermonters want to work, they should be able to seek and maintain employment without fear of discrimination and with any needed accommodations. Older Vermonters should also be able to retire after a lifetime of work, if they so choose, without fear of poverty and isolation

**Optimal Health and Wellness:** Older Vermonters should have the opportunity to receive, without discrimination, optimal physical, dental, mental, emotional, and spiritual health through the end of their lives. Holistic options for health, exercise, counseling, and good nutrition should be both affordable and accessible. Access to coordinated, competent, and high-quality care should be provided at all levels and in all settings.

**Social Connection and Engagement:** Older Vermonters should be free from isolation and loneliness, with affordable and accessible opportunities in their communities for social connectedness, including work, volunteering, lifelong learning, civic engagement, arts, culture, and broadband access and other technologies. Older Vermonters are critical to our local economies and their contributions should be valued by all.

**Housing, Transportation and Community Design:** Vermont communities should be designed, zoned, and built to support the health, safety, and independence of older Vermonters, with affordable, accessible, appropriate, safe, and service-enriched housing, transportation, and community support options that allow them to age in a variety of settings along the continuum of care and that foster engagement in community life.

**Family Caregiver Support:** Family caregivers are fundamental to supporting the health and well-being of older Vermonters, and their hard work and contributions should be respected, valued, and supported. Family caregivers of all ages should have affordable access to education, training, counseling, respite, and support that is both coordinated and efficient.