Whatcom Healthy Aging Initiative
Friday, January 26, 2018
At the Center for Philanthropy

MINUTES

Attending:
Tammy Bennett, Whatcom YMCA
Mary Carlson, Whatcom Council on Aging
Ryan Blackwell, Northwest Regional Council
Marie Eaton, Palliative Care Institute, WWU
Heather Flaherty, RiverStyx Foundation
Carol Nicolay, Health Ministries Network
Sue Sharpe, Chuckanut Health Foundation
Dr. Chao-ying Wu, Chuckanut Health Foundation Board/Family Care Network
Jeanne Brotherton, Health Ministries Network (retired)/Chuckanut Health Foundation Board
April Claxton, Recreation Northwest
Leslie Jackson, Bellingham at Home

Regrets:
Tonja Myers, Christian Health Care Center
Dr. Dave Lynch, Chuckanut Health Foundation Board President/Family Care Network (retired)
Heidi Bugbee, Generations Early Learning & Family Center

Sue welcomed the group, and members introduced themselves. New members described their organizations and programs.

April Claxton, Recreation Northwest. Recreation Northwest is a relatively new organization that promotes being outdoors for activity and enjoyment. It is launching Parkscriptions, a county-wide program that gets health care providers to prescribe time outdoors to patients/clients. Doctors, mental health providers, and the Health Educator at Sea Mar participated in the first year of a two-year pilot (2017-2018). The program is already taking off – rather more quickly than they were expecting!

Leslie Jackson, Bellingham at Home. Bellingham at Home started in 2017, and is under the umbrella of the Whatcom Council on Aging. The goal is to support elders aging in place; it’s based on the Village model, originally out of Boston and now a nationwide movement. Members pay a yearly fee and then have free access to a variety of services provided by volunteers, such as house or yard work, or transportation to appointments.

Ying suggested that it would be valuable to have the business sector represented in this group. He also noted that a member listing that includes photos would be very helpful.

➔ ACTION ITEM: Lara will work on creating a roster with photos.

Guiding Principles

The group reviewed themes discussed on 12/1/17, and draft statements based on those themes.

DRAFT STATEMENT – The whole community.
Whatcom County is our community, and we are intentionally inclusive of all its residents, resisting the tendency to “break down” our community by age, income level, or geographic area.
Discussion:
- Could expand examples of subgroups.
- “The whole community” may be too broad and make it hard to be focused enough to make an impact.
- Perhaps the underlying intent is a commitment to being inclusive of and responsive to different values and approaches.

DRAFT STATEMENT -- Life is a continuum.
We all live, grow, age, and die. We honor the unique wisdom and experience of older people, and seek to create a community that respects and values people along the life continuum.

DRAFT STATEMENT -- Equity.
We strive to increase equity and ensure that all community members have healthy food, safe housing, health care, social support, and community connection regardless of their background or financial resources.

Discussion:
- Cultural awareness and sensitivity is important and could go along with equity.

DRAFT STATEMENT -- Comprehensive approach.
We deliberately consider the many aspects of our community that promote healthy aging, and avoid placing undue importance on health care.

DRAFT STATEMENT -- Community voice.
We are committed to learning from a wide range of community members, truly listening to their perspectives and opinions, even if this makes the work slower or “messy.”

Discussion: What is the purpose of Guiding Principles? How will they serve the group?
- Remind ourselves of what’s important to focus on
- Help figure out the right partners to be involved
- Help make sure we’re moving in the right direction
- Guide decision making, what to work on or prioritize
- Describe how we want to work together
- Act as a “sieve” or a “litmus test”
- Be a set of criteria against which to evaluate decisions and actions

→ ACTION ITEM: Ying, Heather, and Lara will re-work the guiding principles based on this discussion; Lara will schedule a meeting.

Healthy Aging Definitions

Definitions of Healthy Aging from Canada’s National Framework on Aging, the World Health Organization, and Centers for Disease Control were reviewed. The group favored Canada’s definition, with some modifications and clarifications. Highlighted words and phrases were especially resonant.

“A lifelong process of optimizing opportunities for improving and preserving health and physical, social and mental wellness, independence [modify to interdependence], quality of life [relates to spirituality, meaning, purpose] and enhancing successful life-course transitions.”

National Framework on Aging (Canada, 2002)
From WHO and CDC definitions:
- [A person’s capacity to] learn, grow and make decisions; contribute to society; [connects to purpose/meaning]
- ...optimal [BEST, not just functional] physical, mental (cognitive and emotional), spiritual, and social well-being.”

Discussion:
- We need to be clear on what we mean by the word “community.” It could be demographic groups, identity based on culture or ethnicity, social groups, support networks, or other groupings.
- Best to omit language specific to health because it’s so frequently interpreted as synonymous with medical care or medical conditions/disease.
- Healthy aging is what makes “a life worth living.”
- Healthy aging isn’t just living and aging – purpose and meaning are important.
- Staying connected and interconnectedness are key; preventing and/or slowing down isolation and loneliness that can happen in older age.
- Interdependence should be the goal (there can be too much emphasis on independence).
- Definition should be relate-able and easy to say in 30 seconds.

A vision statement was also discussed, and if this is the right stage for this group to create one. Comments included:
- It’s beneficial to have an overarching, “lofty” goal; a “reason why” statement – why are we all here, part of this group?
- A vision statement would be best developed after we’ve learned from the assessment.
- Could draft a vision statement and modify as the work unfolds.
- It’s preferable to keep this stage as generative as possible.

It was agreed that the guiding principles and definitions the group develops will be for use in this first phase of work, the assessment process. They can be revisited later on as the initiative unfolds.

➔ ACTION ITEM: Ying, Heather, and Lara will discuss definitions when they meet about guiding principles? [LW: I don’t actually have a note about this, it’s just my feeling about where the discussion landed.]

Community Assessment

The group reviewed the proposed assessment outline and agreed on four main areas:
1) Demographics of Whatcom County’s older adults
2) Other “Intersecting initiatives”
3) Programs, services, and supports for older adults and their families
4) Priorities, desires, needs, wishes and concerns of older adults and their families.

General Discussion:
- Assessment should also build relationships in addition to gathering information.
- Goal is to identify the opportunities to ensure [healthy aging defined].
- In the absence of data, there is the danger of our personal experiences having undue influence.
- Need to think in terms of older adults and their families.

1. Demographics of Whatcom County’s older adults.
   There is a lot of demographic information in the NWRC Strategic Plan (Ryan shared a handout with some key demographic data), and other data are readily available. Housing status is harder to measure, but would be valuable information because it’s related to the issues of connection and
interdependence. Ryan reported that the City of Bellingham has recently compiled some housing data (for Bellingham only).

**ACTION ITEM:** Ryan, Leslie, Ying and Lara will meet to further discuss data and a plan for compiling them; Lara will schedule this meeting.

2. **Other “Intersecting initiatives.”**
   The purpose of this piece to is be aware of other community-wide or inter-agency efforts related to older adults, in order to recognize complementary or synergistic work, and avoid duplication. An example is NW Life Passages Coalition, which focuses on end-of-life and palliative care issues.

**ACTION ITEM:** Lara will initiate this by email, and members will share their knowledge.

3. **Programs, services, and supports for older adults and their families in Whatcom County.**
   Some information is already compiled, e.g., the Palliative Care Institute’s Whatcom Cares website. We’ll need to decide how broad to make this inventory. Should include eligibility criteria (programs/services may not be available for everyone to access) and utilization of services/programs.

4. **Priorities, desires, needs, wishes and concerns of older adults and their families.**
   It’s important that this learning involve building relationships, not just getting information.

Group members discussed a basic graphic of the assessment process and agreed that learning from older adults and their families should happen throughout the process, rather than as a separate step in a sequence.

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**Wrap up and next steps:**

- Ryan shared information about [HB 2533](#) and [SB 6238](#) concerning long term care. More information is available from [Washingtonians for a Responsible Future](#).
- Ying suggested using [Slack](#) as a way to share information and communicate more effectively. Heather also felt this would be a great tool for the group.

  **ACTION ITEM:** Heather, Ying and Heather will discuss further when they meet.

- Next meeting date to be determined; still trying to find a time that will work for all group members.

  **ACTION ITEM:** Lara will send out another Doodle poll regarding meeting times on the first and second Fridays of the month.