

Age Well San Diego Action Plan

Building & Implementing Practices for San Diegans to Age in their Community



May 2018



Contents

Executive Summary	2
Introduction	4
Age Well San Diego Journey	10
Age Well San Diego Action Plan	13
Themes:	
Health & Community Support	14
Housing	18
Social Participation	22
Transportation	26
Dementia-Friendly	30
Next Steps	34
References	36
Acknowledgements	37
Appendix	41

Executive Summary

Communities across the world are looking for ways to accommodate the growing population of older adults. Due to longer lifespans and decreasing birth rates, older adults make up a larger percentage of the population than ever before. In San Diego County, seniors over the age of 65 will make up an estimated 21% of the population by 2030, up from 13% today.¹ While many of these seniors will remain active and independent members of their communities, a growing number will also suffer from Alzheimer’s disease and related dementias (ADRD). In order to best meet the needs and leverage the strengths of both independent older adults and those with ADRD, in 2016 the San Diego County Board of Supervisors (Board) joined the AARP® Network of Age-Friendly communities, as well as the Dementia Friendly America network. In joining these networks, the County of San Diego (County) committed to a five- year process of assessing needs and working with community partners to develop, implement, and evaluate an action plan. Together, age-friendly and dementia-friendly efforts are called Age Well San Diego (Age Well). Age Well efforts align with the broader goals of *Live Well San Diego*, the county’s vision of supporting residents to be healthy, safe, and thriving. Through Age Well, the County joins forces with The San Diego Foundation, AARP®, and numerous community partners to work toward making our communities even better places to age across the lifespan.

This report outlines the process of developing the Age Well plan. Through robust community engagement efforts, the voices of hundreds of older adults and professionals helped to shed light on what is working well in our communities, what needs improvement, and areas of opportunity to address gaps. With the help of livable communities expert Mark Fenton, more than 100 professionals and community partners worked together during a series of planning meetings to build the Age Well plan. The planning team identified four priority theme areas based on community feedback: Health & Community Support, Housing, Social Participation, and Transportation. In addition, the topic of dementia rose to the surface as another priority area, with Dementia-Friendly identified as the fifth theme. The team developed goals and recommended action steps for each of the five theme areas (see next page). Dementia-friendly concepts were also incorporated across the other four themes.

With the conclusion of Year 2 of the five-year journey in spring 2018, the planning phase of Age Well is now complete. As Year 3 begins, the County and community partners are starting the process of implementing plan goals. Theme teams have been created for each of the five focal theme areas to guide implementation, monitor progress on the plan, and assist with evaluation activities over the next three years.

As part of our commitment as a member of the AARP® Network of Age-Friendly Communities, the County will submit this report to AARP®. It will also be shared with Dementia Friendly America. During the next three years, the County will work with community partners, professionals, government officials, older adults, and interested stakeholders to implement the plan goals outlined in this report. Together, we are working to build a brighter future for people of all ages.



Age Well Plan – Theme Goals



Health & Community Support

1. Create a comprehensive, pro-active, inclusive, culturally appropriate outreach, education and engagement plan to increase awareness of existing resources.
2. Utilize and further develop access to, and best practices with, technology.
3. Encourage the development of village-like community support systems.



Housing

1. Implement zoning ordinances and design requirements that create accessible, mixed-use villages with a variety of housing types and services.
2. Implement policies and programs to prevent and overcome homelessness.
3. Institutionalize a coordinated approach to creating and financing affordable housing stock.
4. Develop comprehensive supports associated with housing for successfully aging in community.



Social Participation

1. Create policies and practices that facilitate intergenerational engagement and the development of shared spaces for intergenerational activity.
2. Implement and expand recreational and educational programming that is safe, dementia-friendly, and diverse.
3. Create and implement a targeted social support outreach, engagement, and education plan especially for those who are isolated.
4. Develop leadership and empowerment opportunities for aging adults, including intergenerational opportunities.



Transportation

1. Implement the Complete Streets policy and design approach as routine practice in jurisdictions across the region. This approach emphasizes safe accommodation of bicyclists, pedestrians, transit riders, and drivers.
2. Institute regional planning policies to promote smart growth.
3. Set transportation split-mode goals and allocate funds accordingly.
4. Implement a comprehensive regional transit policy.
5. Develop a coordinated, innovative rideshare mobility system for all users which provides specialized transportation for older adults and those who are disabled.



Dementia-Friendly

1. Incorporate dementia-friendly elements into each of the other four Age Well San Diego theme teams' work.
2. Promote concepts and tools provided by Dementia Friendly America.
3. Coordinate with The Alzheimer's Project roundtables to identify opportunities to maximize the impact of each group's efforts.

Introduction

Across the United States and much of the world, communities are experiencing a new phenomenon: being home to a large, robust older adult population. San Diego County is no different. As of 2015, there were 431,699 older adults 65 and over, approximately 13% of the county's population. By 2030, this number is expected to increase to 754,606, over a fifth of the population (21%).^{1,19} As the population ages, we are also seeing increases in the number of older adults living with Alzheimer's disease and related dementias (ADRD). These conditions are characterized by a decline in thinking skills, memory loss, and reduced ability to perform everyday activities, and currently there is no cure.² As of 2015, an estimated 84,405 San Diegans 55 and older were living with ADRD, accounting for 11% of the 55 and older population.³ If current trends continue, by 2030 just over 115,000 residents 55 and older are projected to be living with some form of dementia.⁴ A variety of challenges will accompany these shifts in demographics, with concerns about housing, transportation, and medical care at the forefront. However, older adults bring great strength to our communities too, and play an essential role in their vibrancy and cohesiveness.

In order to create a region that supports, nurtures, and leverages the strengths of the increasing older adult population, the County of San Diego (County) embarked on a journey to become an age-friendly and dementia-friendly community. In 2016, with guidance from AARP® and support from The San Diego Foundation, the County joined the AARP® Network of Age-Friendly Communities, as well as the Dementia Friendly America network. These efforts are collectively known as Age Well San Diego (Age Well) and involve a five-year process of assessing needs, developing an action plan, implementing change in our communities, and evaluating success.



LIVEWELLSD.ORG



LIVE WELL
SAN DIEGO

In alignment with *Live Well San Diego*, the county's recognized regional vision, Age Well is a unique lens that helps place a spotlight on the needs of older residents. Adopted by the San Diego County Board of Supervisors (Board) in 2010, *Live Well San Diego* aligns the efforts of County government, community partners, and individuals to help all San Diego County residents be healthy, safe, and thriving. The vision includes three components.

Building Better Health, adopted on July 13, 2010, focuses on improving the health of residents and supporting healthy choices; *Living Safely*, adopted on October 9, 2012, focuses on protecting residents from crime and abuse, making neighborhoods safe, and supporting resilient communities; and, *Thriving*, adopted on October 21, 2014, focuses on cultivating opportunities for all people to grow, connect and enjoy the highest quality of life.

Age Well is a marriage of two important global initiatives: age-friendly and dementia-friendly communities. In an age-friendly community, policies, services, settings, and structures support and enable people to age actively by optimizing opportunities for health, participation, and security. Such communities strive to be accessible to, and inclusive of, people with diverse capabilities, resources, and needs.

While the age-friendly communities framework aims to focus on the needs of a broad and diverse group of older adults, the dementia-friendly communities movement

narrows in on the specific needs of people living with dementia and their caregivers. Furthermore, the dementia-friendly movement has a major focus on the social and environmental elements that can positively impact the daily lives this population. Communities are encouraged to engage and educate different community sectors, from banks to libraries, to take steps to make life easier and safer for those living with ADRD and their caregivers. People living with dementia are supported to be as independent as possible, and have opportunities to continue to be vital, involved members of their communities.

By incorporating the dementia-friendly communities framework along with age-friendly concepts, Age Well augments important ongoing work focused on ADRD that the County and community partners are pursuing through The Alzheimer's Project. Launched in 2014, The Alzheimer's Project is an unprecedented regional initiative that is advancing clinical research, improving health care delivery systems, educating residents, and providing support for patients and caregivers. Dementia-friendly efforts provide a different angle from which to improve the quality of life for individuals living with dementia and thus are an important complement to The Alzheimer's Project.

When possible, AARP® recommends that communities coordinate their age-friendly and dementia-friendly initiatives. Coordination allows for a more efficient planning process, less duplication and potential confusion, and an opportunity to leverage resources and the efforts of community partners. The Age Well plan is stronger and more inclusive due to its coordination of age- and dementia-friendly concepts.

This report is the culmination of a two-year planning process and presents for our community the Age Well plan—the goals and action steps that the community planning team identified and committed to addressing. The pages that follow contain more detail on age-friendly and dementia-friendly communities, information on the San Diego County region and our older adult population, the complete Age Well San Diego plan, and ways to be involved in the implementation.

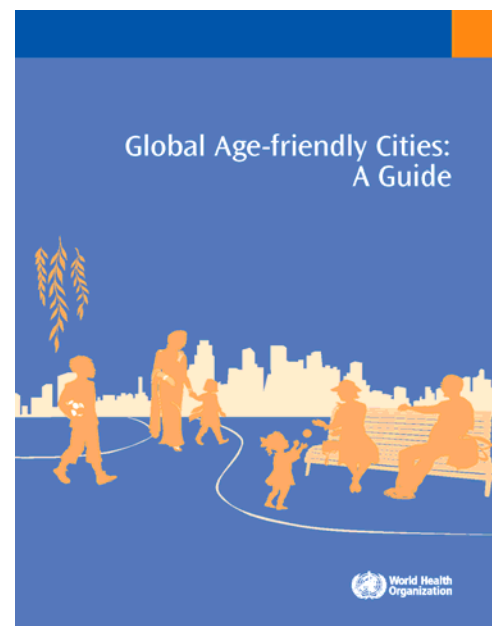
As part of our commitment as a member of the AARP® Network of Age-Friendly Communities, the County will submit this report to AARP®. It will also be shared with Dementia Friendly America. During the next three years, the County will work with community partners, professionals, government officials, older adults, and interested stakeholders to implement the plan goals outlined in this report. Together, we are working to build a brighter future for people of all ages.



Age-Friendly Cities and Communities Movement

Across the globe, older adults are living longer. Increasing life expectancies and decreasing birth rates are leading to unprecedented demographic shifts, with older adults comprising a greater proportion of the population than ever before. In the United States, by 2030 one out of every five people will be 65 years or older. In addition, populations are becoming increasingly urbanized and most older adults reside in cities rather than rural areas.

In June 2005, in recognition of changing demographics worldwide, world leaders and experts convened at the World Congress of Gerontology and Geriatrics in Rio de Janeiro, Brazil to discuss ways to help communities prepare for increasing numbers of older adults. The World Health Organization (WHO) embarked upon a research project to hear from older adults in diverse communities worldwide about their experiences of living in their respective cities. From this feedback, WHO issued a report, *Global Age-Friendly Cities: A Guide*, which is a blueprint for communities looking to make improvements that will support their residents as they age.



In 2010, the WHO Global Network for Age-friendly Cities and Communities was established to connect communities worldwide that are focused on making positive local changes for older adults. Currently, the network includes 541 cities and communities in 37 countries. In the United States, the AARP® Network of Age-Friendly Communities is an affiliate of the WHO Age-Friendly Cities and Communities Program. Entities wishing to join the network commit to a five-year process of assessing needs, developing and implementing a plan, and evaluating success.

Age-Friendly Communities

Age-friendly cities and communities are places that encourage active aging by enhancing the quality of life for people as they grow older. They are places that embrace and leverage the strengths of older adults: their wisdom, experience, and contributions to family, social, and economic systems. Age-friendly communities also recognize that with an aging population there will be an increase in the number of people with age-related illness and disability. These communities provide appropriate supports and opportunities for people to be actively involved regardless of limitations. In recognition that an age-friendly community is one that is beneficial for all ages, AARP® also uses the term “livable communities” to refer to their age-friendly efforts, pointing out that an age-friendly community is simply a livable community for all ages. Active aging is a lifelong process and people across the lifespan benefit from improvements such as more walkable neighborhoods, transportation options, and opportunities to get involved in the community.



Dementia-Friendly Communities

As Americans are living longer, there has been a rise in the number of Americans with dementia. Communities are looking for ways to assist those with dementia to maintain the greatest possible level of independence and a high quality of life. Increasingly, communities are also looking for ways to meet the needs of caregivers who assist those living with dementia.



The Dementia Friendly America (DFA) initiative involves more than 35 national organizations that are working together to create a movement so that Americans with dementia and their care partners are better supported in their communities. Communities that join the dementia-friendly community network commit to a process that fosters adoption of dementia-friendly practices in all parts of the community. DFA provides a toolkit that guides communities through the process.

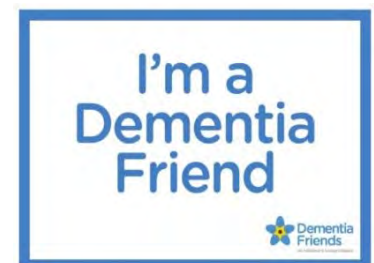
Dementia-Friendly Sector Guides

DFA has created guides for different community sectors to help them make adjustments to better serve individuals with dementia and their care partners through policy, system, and environmental changes. For instance, banks and other businesses are encouraged to provide an environment that includes quiet places for people to sit and relax, well-lit hallways, and easy to read signage. Another common element is training for workers in the sectors on how to best interact and communicate with people with dementia in these settings. Sector guides currently available include: bank and financial services, neighbors and community members, legal and advance planning services, local government, health care, libraries, faith communities, businesses, community-based services and supports, residential and specialty care, and hospitals. To access DFA resources, visit: www.dfamerica.org.



Dementia Friends USA

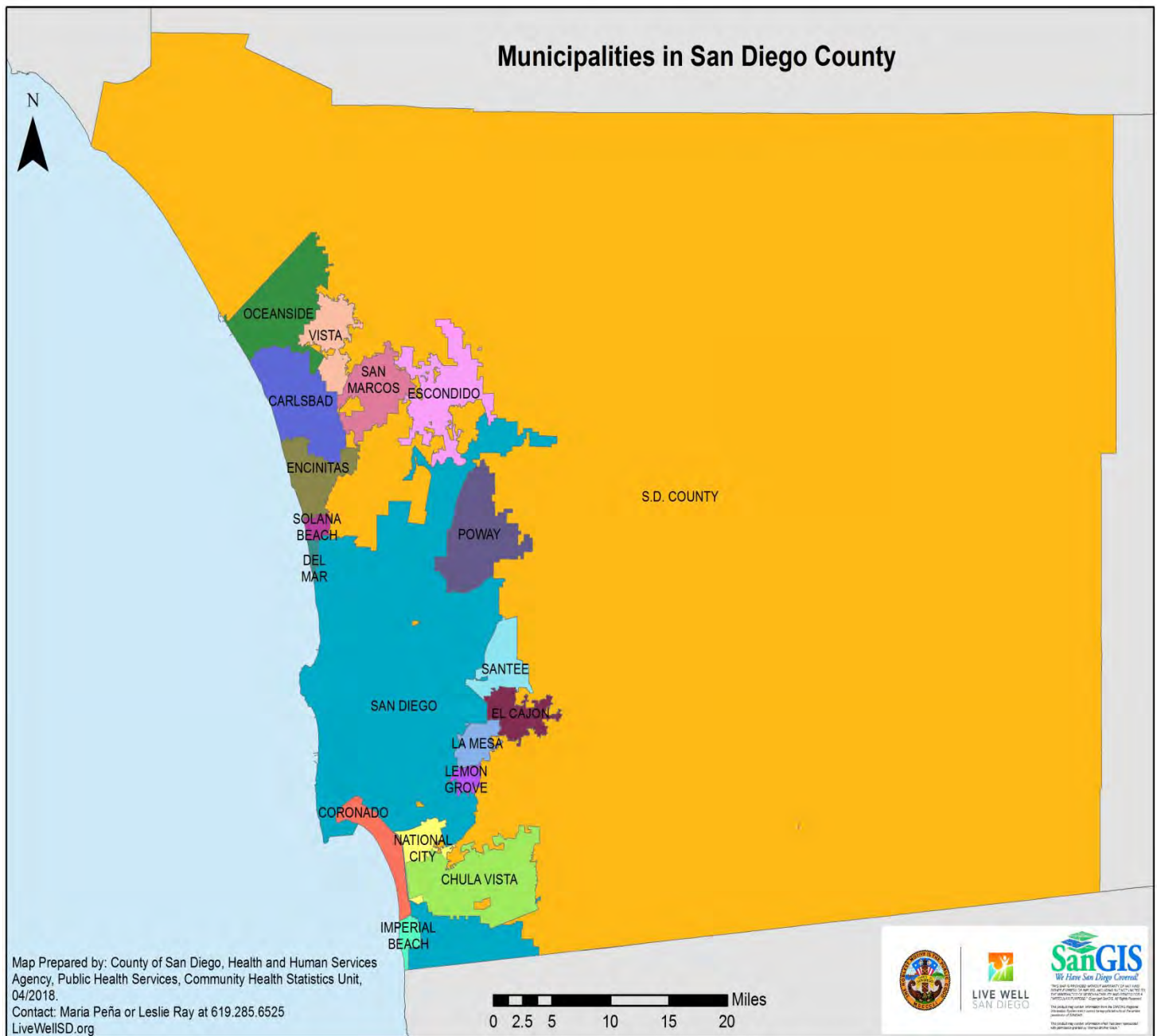
In addition to these community-based approaches, Dementia Friends USA offers complimentary resources to individuals through their international Dementia Friends movement as part of the DFA initiative. This global program seeks to inform community members what dementia is, how it affects people, and how each of us can make a difference in the lives of those affected by dementia. Individuals can become a "Dementia Friend" by watching a series of online videos that educate viewers on what it is like to live with dementia, and then committing to positive action: sharing the information they learned, helping someone who is living with dementia, or any other activity that helps spread awareness or lends support to those who are affected. People of all ages can participate. Visit dementiafriendsusa.org to learn more or become a Dementia Friend.



Dementia-friendly communities have both organizations with dementia-friendly policies and practices, as well as individual community members who are well informed and can communicate effectively with people living with dementia.

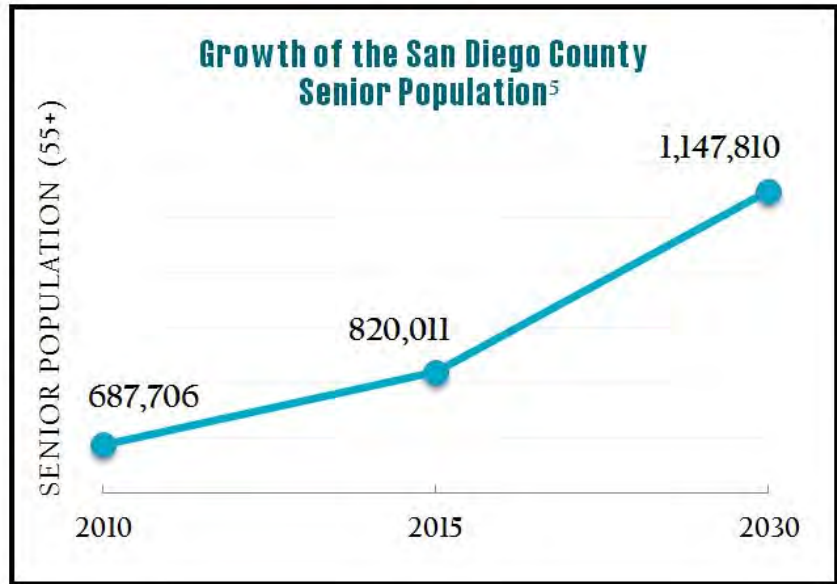
Our Region: San Diego County

San Diego County covers 4,526 square miles, an area approximately the size of the state of Connecticut. With 3.3 million residents, our population exceeds that of the entire state of Iowa. In addition to the unincorporated areas of the county, there are 18 cities, all of which are subject to their own local governance. San Diego is the largest city within the county, with 1.3 million residents. With over 511,000 residents, the unincorporated areas of the county make up the second largest jurisdiction by population. Areas of significant urban density do exist within the city of San Diego and other major cities, but many communities are lower in population density. A system of major interstate freeways and highways connects the region's many communities. The region boasts diverse topography, including beaches, canyons, mountains, and deserts, as well as bustling urban areas and quiet rural communities.



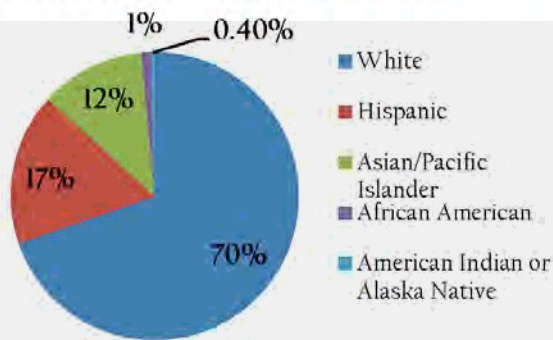
Older Adults in San Diego County

Of the 3.3 million people residing in San Diego County, as of 2015, 820,011 were adults age 55 or older.⁵ By 2030, the number of seniors 55 years and older in San Diego County is expected to increase to 1,147,810.⁵ The fastest growing age group, those 85 years and older, is projected to increase from 54,429 in 2015 to 102,313 in 2030.⁵ The county is also home to the second-largest population of veterans in the state with over 230,000 veterans, many of whom are older adults.⁶ The snapshot below highlights some interesting facts about the older adult population in San Diego County.

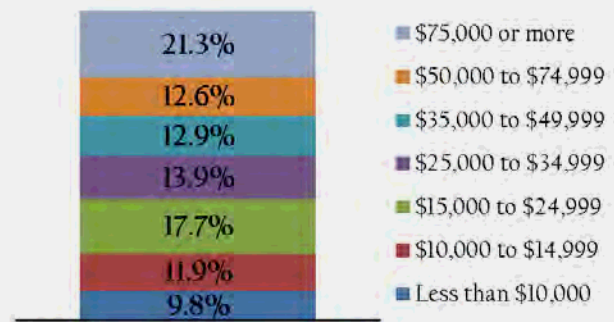


SNAPSHOT: SENIORS IN SAN DIEGO COUNTY

Race/Ethnicity for Adults Age 65 and Older, San Diego County, 2015⁷



Annual Household Income for Adults Age 65 and Older, San Diego County, 2015⁸



84,405

San Diegans 55 and older were living with Alzheimer's or a related dementia in 2015.⁴

214,300

San Diegans providing unpaid care for people living with dementia in San Diego County in 2015.⁴



73.1%

reported good to excellent health in 2015⁹



51.8%

have a disability⁹



18.1%

remained in the labor force¹⁰



72.8%

own their own home¹¹

Age Well San Diego Journey

Since the Age Well journey began in 2016, over 1,000 older adults and professionals had the opportunity to share their thoughts on what an age-friendly and dementia-friendly community could look like. With support from AARP® and The San Diego Foundation, the County of San Diego Health and Human Services Agency, Aging & Independence Services (AIS), hosted listening sessions and other events to garner feedback from the public. These community members shared their concerns, as well as areas they perceived as assets. Below is a timeline of the Age Well Journey thus far.

February-April 2016

Community voiced their support for age-friendly and dementia-friendly concepts at AIS Area Plan public feedback sessions



June 2016

Hosted Aging Summit 2016: Livable Communities for All Ages and collected feedback on priorities



April 2016

San Diego County accepted into AARP® network; receives support from The San Diego Foundation for planning activities

2016

March 2016

San Diego County Board of Supervisors directed the County to join AARP® Age-Friendly Communities & Dementia Friendly America networks



June 2016

San Diego County accepted into World Health Organization Global Network of Age-Friendly Cities and Communities



World Health Organization

Age Well Community Engagement

7
public feedback
sessions

3,000
attendees at Aging
Summit 2016

8
targeted focus
groups

771
completed
surveys

10
community listening
sessions

4
planning
meetings

January-April 2017

Began sharing Age Well San Diego information with various community groups, including *Live Well San Diego* regional leadership teams and SANDAG working groups



October 2017
Completed analysis
of data collected

December 2017-February 2018

With support from The San Diego Foundation and AARP®, four planning meetings facilitated by Mark Fenton were held to create Action Plan

2017

2018

November 2016-July 2017

Community feedback gathered via survey, listening sessions, and targeted focus groups with special older adult populations

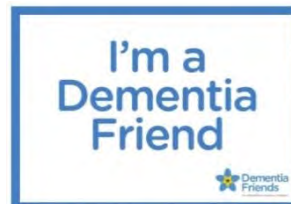
November 2017

Community partners and professionals attended Age Well San Diego sessions facilitated by livable communities expert Mark Fenton at the 2017 *Live Well San Diego* Advance



May 2017

Began conducting Dementia Friends presentations



Developing the Action Plan



More than 100 professionals from diverse fields, community partners, and older adults worked together to develop the Age Well San Diego Action Plan through a series of planning meetings facilitated by livable communities expert Mark Fenton. By examining community feedback concerning the eight Age-Friendly domains identified by the WHO and AARP®, the planning team identified four priority themes: Health & Community Support, Housing, Social Participation, and Transportation. The Age Well action plan focuses on these four theme areas, along with dementia-friendly as a fifth theme.

The four age-friendly domains that are not explicitly identified as a theme area in the Age Well plan—civic engagement and employment, communication and information, respect and inclusion, and outdoor spacing and buildings—are all woven into and represented within the other five priority theme areas. For instance, the housing theme touches on outdoor spaces and buildings through its goal of encouraging mixed-use neighborhoods, as does transportation with its goal of implementing “Complete Streets” that plan for pedestrian users in addition to cars. Similarly, the dementia-friendly theme encompasses all eleven sectors that are identified by Dementia Friendly America. Dementia-friendly concepts are also woven into the Health & Community Support, Housing, Social Participation, and Transportation goals.

The planning team developed a vision for each of the five themes, along with goals and action steps to achieve these goals. An overview of the goals and key action steps for each theme is on the pages that follow. Refer to the Appendix for the complete Age Well action plan which includes all action steps, timelines, and metrics to measure success.

Each of the five themes has a “theme team” consisting of County staff and community partners to implement the action steps to reach the goals. As you read this report, we invite you to consider how you might want to help reach these goals. Refer to the “Next Steps” section for more information on how you can get involved.



Housing



**Health &
Community Support**



Age Well San Diego Action Plan



Transportation



**Social
Participation**



Dementia-Friendly



Health & Community Support

Vision

A livable community for all ages recognizes that good mental and physical health are highly valued. When changes and challenges in health occur, access to healthcare and community support is important. Needs may include help with everything from assistance with activities of daily living to support to overcome poverty, food insecurity, and homelessness. If we, or people we love, become less independent, we expect that resources, support, and care planning will be available to ensure safety and allow us to thrive.

Community Feedback

Through listening sessions and focus groups, older adults in San Diego County generally reported that they have appropriate access to quality healthcare. Some, however, are unable to access affordable dental care. Service providers, in particular, noted that supportive community services are essential for older adults who live alone. Many older adults are not aware of the variety of services available to them, or to primary information and assistance (I&A) referral mechanisms such as 2-1-1 or the AIS Call Center.

Older adults who live alone are sometimes



reluctant to ask family members for help, as noted by several focus group participants. Others reported not having a local family support system. Some older adults noted that village-like community support systems, such as the Tierrasanta Village, create a sustainable model for older adults who may be living alone to continue to remain independent, when other types of support are not available. Others noted that technological solutions could help support older adults to continue to age in community for as long as possible.

Current Status

San Diego is home to several major hospitals, health care systems, and a network of community clinics. The County of San Diego also provides the public with connections to mental health treatment, vaccinations, and a variety of programs to help people stay healthy or manage chronic health conditions.

The region is rich in non-profit organizations and programming that supports older adults and others to live as self-sufficiently as possible. 2-1-1 San Diego is the region's primary connection to more than 6,000 community, health, and disaster support services and is available to the public online at www.211sandiego.org or by dialing 2-1-1. Trained representatives are available 24 hours a day, speak more than 200 languages, and connect callers to the most appropriate community resources. In addition, the AIS Call Center (1-800-510-2020) provides information and assistance to callers looking for resources for older adults and persons with disabilities. However, many older adults and others are not aware of 2-1-1 or the AIS Call Center and therefore may miss opportunities to be connected to resources they need.

“There are a lot of resources out there that people don’t know about...people complain about lack of transportation, but no one seems to know what is available.”

– John, Older Adult Resident

Increasingly, older adults are looking to one another to provide needed support, such as rides, yard work, or assistance with obtaining meals after a hospital stay. The Village Movement is making this possible. The concept began in the Beacon Hill community of Boston in 2001. The Beacon Hill community formed a “village”—a membership-based, grassroots, non-profit organization that supports its members to age in community for as long as possible by coordinating access to affordable or volunteer-based services. Today there are over 200 villages nationwide, with another 150 in development. In San Diego County, the Tierrasanta Village is a thriving example of a community coming together to support its members to age with dignity and connection.





Recommendations & Action Steps

The following three goals and their respective action steps will help to expand access to health resources and community support that will meet the health challenges of an aging population.

Health & Community Support Goal 1

Create a comprehensive, proactive, inclusive, culturally-appropriate outreach, education and engagement plan to increase awareness of existing resources.

Key Action Steps

- Conduct an assessment of the current knowledge and awareness of 2-1-1 and the AIS Call Center as information and assistance (I&A) resource hubs.
- Create an outreach campaign targeting communities with a lower baseline level of awareness.
- Ensure health and community support organizations that address the needs of individuals with dementia and their caregivers are listed in 2-1-1 and AIS databases.
- Incorporate 2-1-1 registration as part of the process for qualified organizations to come on board as *Live Well San Diego* partners.

Health & Community Support Goal 2

Utilize and further develop access to, and best practices with, technology.

Key Action Steps

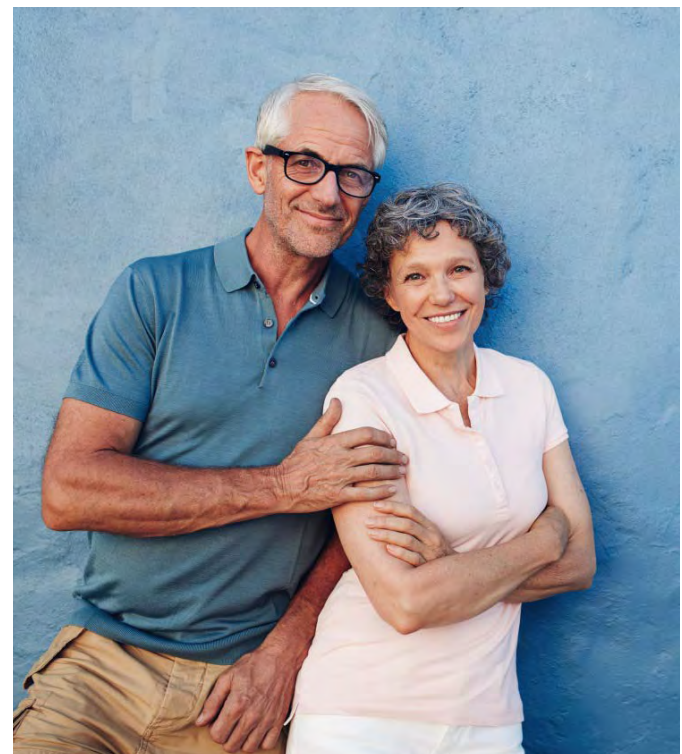
- Create an inventory of tested, effective technologies related to aging/disability/dementia that support aging in community.
- Conduct focus groups around the use of existing and needed technology via a public/private partnership.
- Conduct a pilot project to assess the effectiveness, satisfaction, and other outcomes regarding selected technology.
- Promote policies that would provide access to technology for people in need via working groups for at least two possible policy areas related to adaptive technology.

Health & Community Support Goal 3

Encourage the development of village-like community support systems.

Key Action Steps

- Assemble or create educational materials about villages and co-ops.
- Educate various communities/stakeholders.
- Work with an interested community to develop a pilot project.
- Identify stakeholders to invest in public/private partnerships to support the pilot project.
- Incorporate dementia-friendly concepts into trainings conducted for new or existing village organizations' staff and volunteers.





Measuring Our Success

The following indicators are a subset of the measures that will help to gauge progress. For a complete list of outcome measures, refer to the Appendix.

- Increased percentage of older adults who are aware of 2-1-1 and AIS I&A resource hubs
- Completion of a pilot project on technology with results reported on effectiveness
- Increase in number of age 50+ households currently in, or accessing, “village” community support systems



Housing

Vision

A livable community for all ages includes housing that is safe, affordable, and near goods and services such as grocery stores, medical care, parks, and more. It offers opportunities for multi-generational social engagement, is smoke-free, supports active lifestyles, and allows people to age in their community.

Community Feedback

Many older adults own their own home and, for these individuals, affordability was not reported

as a primary concern. Homeowners were more likely to express concerns over living in their homes as they aged due to the presence of stairs or the need for home modifications that could support mobility. In addition, many older adults' homes are located in residential communities that are largely dependent upon cars for transportation to essential services.

For renters countywide, affordability is a pervasive problem—especially for those living on a fixed income. Not only was it reported that affordable housing is hard to find, but the environments of these affordable housing units are uncomfortable to live in, and may be located in less safe areas of



the community. To cope with high housing costs and rising rents, many participants live with other family members. Many older adults reported experiencing a lack of privacy or a feeling of being burdensome when residing with family members. Unfortunately, some participants were currently homeless or on the brink of homelessness.

“We need affordable senior communities where you have services close by – food, entertainment. We have to think about our communities differently.”

– Bill, Older Adult Resident

Current Status

In San Diego County, nearly three-quarters of older adults own their own homes. Of the 27.2% of seniors age 65 and older who rent, over 60% spend more than 30% of their income on housing.¹¹ As with many regions in California, the cost of housing is high. As of 2016, the median cost of rent in San Diego County was \$1,557.¹³ At the end of 2017, the average median home price stood at about \$540,000.¹⁴ The waitlist for Section 8 subsidized housing is over 10 years long and an insufficient number of affordable housing units exist to meet the need. According to the U.S. Department of Housing and Urban Development, San Diego County has the fourth highest population of homeless people, and seniors are among those living without permanent shelter.

The County of San Diego Health and Human Services Agency, Housing & Community Development Services offers assistance to residents in need of more affordable housing solutions. These entities, along with community partners, are pursuing strategies to address affordable housing in the region. In addition, government and community organizations are looking for ways to create mixed-use, mixed-income neighborhoods that allow residents to access needed services close to home.

Older adults looking to cut housing costs are increasingly exploring solutions such as shared housing. Local nonprofit ElderHelp offers one such program that matches individuals looking to rent a room with older adult homeowners looking to supplement their incomes or offer housing in exchange for help around the house.

DID YOU KNOW?

- 72.8% of those age 65 and older own their own home and 27.2% rent; 60.6% of renters age 65 and older spend 30% or more of their income on rent.¹¹
- 40% of San Diego County seniors live alone.¹¹
- According to the 2017 Regional Taskforce on Homelessness Point-In-Time Count, 1,561 (28%) individuals who were unsheltered were between the ages of 55-74; approximately 37 (1%) were over the age of 75.¹²

“I live in an apartment on the second floor. I’m scared to go down the stairs because it is dangerous, but when I looked for another place to live, everything was too expensive.”

– Focus Group Participant



Recommendations & Action Steps

The following four goals and their respective action steps will help to promote affordable housing and improve the ability of older adults to successfully age in community.

Housing Goal 1

Implement zoning ordinances and design requirements that create accessible, mixed-use villages with a variety of housing types and services.

Action Steps

- Develop model language for zoning ordinances that will meet the needs of the unincorporated county areas.
- Include language to allow for/encourage memory care and other assisted living facilities to be included within mixed use zones.
- Implement new mixed-use model ordinance through the community planning process and then promote successful implementation models.

Housing Goal 2

Implement policies programs to prevent and overcome homelessness.

Action Steps

- Analyze and compare policies that are proven to prevent/reduce senior homelessness, including policies on affordable rental housing.
- Develop model policy language and share lessons learned with municipalities.



Housing Goal 3

Institutionalize a coordinated approach to creating and financing affordable housing stock.

Action Steps

- Educate the public on zoning and funding for affordable housing.
- Provide technical assistance to developers on viable pathways to affordable housing development.
- Launch a campaign to encourage homeowners associations to support accessory dwelling units, such as “granny flats.”
- Explore and pursue options to increase the amount of affordable housing in the region.

Housing Goal 4

Develop comprehensive supports associated with housing for successfully aging in community.

Action Steps

- Create a training on accessory dwelling units and home retrofits for homeowners and homeowners’ associations to learn strategies that would allow seniors to age in their homes. Accessory dwelling units include garden apartments, granny flats, and other supplemental living spaces.
- Add to the County Community Planning Process information on best practices to allow older adults to age in community.



Measuring Our Success

The following indicators are a subset of the measures that will help to gauge progress. For a complete list of outcome measures, refer to the Appendix.

- Number of community plans incorporating “age-friendly” zoning suggestions
- Number of homeless seniors
- Percentage of seniors spending > 30% of their income on housing
- Number of new affordable units added
- Increase in the number of Accessory Dwelling Units



Social Participation

Vision

A livable community for all ages places value on respect and social inclusion, and recognizes the importance of opportunities for employment, civic engagement, volunteer work, and chances to engage in intergenerational activities.

Community Feedback

Older adults in San Diego County reported the existence of many social opportunities. Many reported active involvement in their faith communities. However, it was noted that there

are few activities appropriate for those with dementia. Also, older adults expressed a desire for more opportunities to connect with younger generations. Those who do not speak English reported a hard time finding appropriate venues to give their time through volunteer work.

DID YOU KNOW?

- 28% of those age 65 and over volunteered in 2015.¹⁶



Current Status

There are a variety of opportunities for social engagement and enrichment available in San Diego County. With more than three dozen senior centers, over 60 library branches, and a rich network of universities, community colleges, and continuing education programs, active older adults have access to numerous opportunities to connect with others and pursue enrichment activities.

There is no shortage of volunteer opportunities in the region, too. AIS manages the Retired and Senior Volunteer Program (RSVP) and Senior Volunteers in Action, programs that match older adults with volunteer placements based on their interests, skills, and availability.



The County of San Diego has a long history of supporting programs and activities that bring together people of different generations, even creating five dedicated Intergenerational (IG) Coordinator positions. Along with community partners, these IG Coordinators look for ways to foster intergenerational connection. Although there is a wealth of opportunity in the region for active older adults to be socially involved, those who are less independent, lack transportation, or have dementia have fewer options. In addition, there is significant age segregation, so a concerted effort must be made to foster intergenerational connections.

“There’s lots of wisdom we have and teaching we can do—and many younger people don’t have older people they can learn from.”

– Toby, Older Adult Resident

DID YOU KNOW?

- 30% of the population age 65 and older in San Diego County speaks a language other than English.¹ Of those, 41% speak English “not well” or “not at all.”¹⁵



Recommendations & Action Steps

The following four goals and their respective action steps will help to increase opportunities for people of all ages and abilities to engage in social participation and civic engagement.

Social Participation Goal 1

Create policies and practices that facilitate intergenerational engagement and the development of shared spaces for intergenerational activity.

Key Action Steps

- Identify existing programs and successful models that create physical and cultural environments that encourage intergenerational activities.
- Identify policies that facilitate intergenerational opportunity.
- Adopt policies that support intergenerational engagement at the County level that can be replicated by other jurisdictions.
- Initiate at one pilot intergenerational activity in each of the six HHSA service regions.

Social Participation Goal 2

Implement and expand recreational and educational programming that is safe, dementia-friendly, and diverse.

Key Action Steps

- Develop a recreational and educational programming toolkit that includes ways to make programming dementia-friendly.
- Develop training and offer it in the community to promote tools and resources identified in the toolkit.

Social Participation Goal 3

Create and implement a targeted social support outreach, engagement, and education plan, especially for those who are isolated.

Key Action Steps

- Convene a workgroup of community partners to strategize ways to reach isolated older adults, including those with dementia.
- Develop a marketing and outreach campaign, including an easily shareable toolkit and ensure development/ translation of campaign materials.
- Identify, support, and engage volunteers to promote opportunities for target population.

Social Participation Goal 4

Develop leadership and empowerment opportunities for aging adults.

Key Action Steps

- Draft model policy language to encourage the inclusion of older adults on community boards and advisory committees.
- Develop seminar events and trainings to engage seniors in successful community engagement.
- Educate the broader community and promote the message that aging adults are a vital part of our community and continue to give back.





Measuring Our Success

The following indicators are a subset of the measures that will help to gauge progress. For a complete list of outcome measures, refer to the Appendix.

- School department policies that support use of existing spaces and programs for IG activities during and after school hours
- Number of new programs developed
- Number of ambassadors and advocates trained
- Number of isolated adults reached by new programming efforts
- Number of organizations that adopt model policies encouraging older adult participation on boards and advisory committees



Transportation

Vision

A livable community for all ages has transportation that is accessible for all ages, abilities, and disabilities; safe; and is affordable and reliable for non-drivers.

Community Feedback

Many older adults in San Diego County reported concern about transportation options. Although most participants in listening sessions were still able to drive, many worried about how they would get around when they were no longer able to drive. Some participants, particularly those

older adults who lived in urban hubs, were able to use public transportation. However, affordability was an issue for some. Others reported a lack of convenience as multiple bus routes were often needed for them to arrive at their desired destination. Some noted that their barrier for using public transportation or for walking was the lack of benches at bus stops and along sidewalks. Older adults were interested in seeing a more robust system of volunteer driver programs and ridesharing solutions.

Current Status

San Diego County covers a large geographic area



and contains many suburban and rural communities. Most communities are connected by an extensive system of interstate and state highways. Most older adults rely on cars for transportation; however, those who are unable to drive or cannot afford a car have fewer options.

With the exception of a few other pockets of high population density, many of San Diego County's communities are suburban and rural. Because of this, local transit systems are often unable to meet the needs of older adults who live outside urban centers. Older adults who do not drive and for whom transit is not accessible or practical, are increasingly looking to use volunteer driver programs or transportation options such as Uber and Lyft.

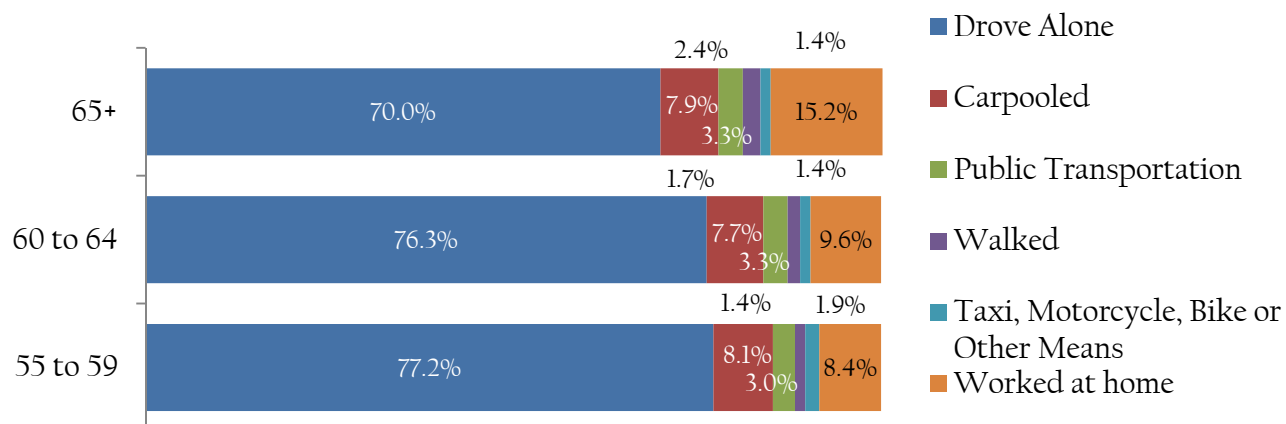
DID YOU KNOW?

- In 2008, only 45% of housing in San Diego County was within a ½ mile of transit. By 2050, 64% of housing will be within ½ mile and transit service miles in the region will be doubled.¹⁷
- The 2050 Regional Growth Forecast dedicates \$3.8 billion to regional and local bicycle and pedestrian projects.¹⁷

The San Diego Association of Governments (SANDAG) is the regional transportation planning agency for San Diego County. It provides funding to the two public transportation entities in the region, the Metropolitan Transit System (MTS) and the North County Transit District (NCTD). SANDAG works with the community to explore transportation solutions and ways to increase access for all users, including older adults and persons with disabilities. This agency also supports the non-profit organization Full Access and Coordinated Transportation (FACT), which operates a brokerage service to help individuals who are unable to use public transportation, due to disabilities or location, to access affordable rides.

Some neighborhoods within San Diego County are conducive to walking or bicycling, while others lack sidewalks and bike lanes. Increasingly, there is interest in improving the walkability of neighborhoods, and transforming streets so that they are safer for bicyclists. Circulate San Diego is a regional grassroots organization that is working to advance mobility choices in the region by promoting active transportation, such as walking and biking, as well as the use of public transportation.

Mode of Transportation to Work for Adults Age 55 and Older¹⁸





Recommendations & Action Steps

The following five goals and their respective action steps will help make transportation more accessible to older adults and will allow for a greater variety of transportation options for San Diegans of all ages.

Transportation Goal 1

Implement the Complete Streets policy and design approach as routine practice in jurisdictions across the region. This approach emphasizes safe accommodation of bicyclists, pedestrians, transit riders, and drivers.

Key Action Steps

- Form a task force to assess Complete Streets policies.
- Work with SANDAG/Circulate San Diego to develop a best practices toolkit.
- Adopt National Association of City Transportation Officials (NACTO) guidelines and provide technical assistance to communities that are implementing Complete Streets policies.

Transportation Goal 2

Institute regional planning policies to promote smart growth.

Key Action Steps

- Complete a mobility assessment for the region and convene an interdisciplinary forum for land use planning and permitting that includes transportation and public health considerations.
- Implement the Regional Bike Plan Early Action Program (EAP) and Downtown Mobility Plan (DMP), two initiatives that provide for safer, easier, and more attractive biking opportunities.



Transportation Goal 3

Set transportation mode-split goals and allocate funds accordingly.

Key Action Steps

- Convene a workgroup to assess the current allocation of funds to different modes of transportation.
- Set mode-split goals that take social equity and health concerns into consideration.
- Set funding levels proportionately in accordance with mode-split goals.

Transportation Goal 4

Implement a comprehensive regional transit policy.

Key Action Steps

- Research best practices and explore concepts such as transportation demand management.
- Implement pilot projects that take into account best practice findings.
- Propose new transportation improvement plan (TIP) scoring factors and performance measures to SANDAG.
- Expand successful pilot projects.
- Educate transit system staff on dementia-friendly concepts, such as dementia-friendly signage (e.g., high contrast, simple images) and communication basics for servicing riders with dementia.
- Work with community partners to provide training for drivers in various rideshare programs (e.g., Uber, Lyft, and volunteer driver programs).

DID YOU KNOW?



FACTTM
Facilitating Access to Coordinated Transportation

FIND A RIDE

Search San Diego's network of transportation providers or search public transit

Door-to-Door | Bus or Train

Your Pick Up Location

Enter a ZIP, City, Address, Hospital, or Facility

Going To

Enter a ZIP, City, Address, Hospital, or Facility

Find a Ride >

[Browse all service providers](#)
[Need help planning your trip?](#)
[FAQs](#)

Facilitating Access to Coordinated Transportation (FACT) is an organization that coordinates public, nonprofit, and other transportation services in San Diego County. FACT assists individuals such as seniors and persons with disabilities who are unable to access public transportation due to special needs or their distance from transit services. FACT operates a ride brokerage and helps connect callers to ride providers as well as subsidized fares.

www.factsd.org | 888-924-3228

Transportation Goal 5

Develop a coordinated, innovative rideshare mobility system for all users.

Key Action Steps

- Create standardized definitions of ride types and other service measures for rideshare programs that will allow consumers to compare available options and SANDAG to assess baseline data on utilization and performance.
- Support and expand the Regional Transportation Plan.
- Work with community partners to pilot innovative networks and approaches, such as village-style and member-based rideshare systems.
- Provide training to rideshare drivers to learn how to provide dementia-friendly service.

Measuring Our Success

The following indicators are a subset of the measures that will help to gauge progress. For a complete list of outcome measures, refer to the Appendix.

- Adoption of NACTO guidelines (at the local and regional level)
- Miles of new or existing roadway that have been designed/retrofitted as complete streets
- Population/developed acreage ratio (increased density)
- Percentage of funds on a mode/mode share
- Increase in the percentage of funds going to public/active transportation
- Percentage of population in walking distance of transit
- Number of rides utilized



Dementia-Friendly

Vision

A livable community for all ages provides appropriate support to individuals living with dementia so they can live as independently as possible. People with dementia are encouraged and welcomed to participate in community life and are supported by neighbors, businesses, faith communities, and the healthcare system. Caregivers have access to resources and supports to allow them to fulfill their caregiving responsibilities, while also tending to their own physical, emotional, social, and financial wellbeing.

Community Feedback

Older adult participants were eager for information on brain health and steps they can take to potentially reduce their risk of dementia. In addition, they voiced concerns about caregiving and the need for more support, in particular more access to affordable respite care. Professionals noted that older adults with dementia who do not have a support system are a particularly vulnerable population, as they are unable to advocate for their own health and social service needs. Professionals and community members alike noted the need for more social



opportunities for individuals with dementia, as well as resources to help support individuals to live in the community safely for as long as possible.

Current Status

In 2015, an estimated 84,405 San Diegans age 55 years and older were living with ADRD. Countywide, this population is expected to increase to just over 115,000 residents living with Alzheimer’s disease and related dementias by 2030.³

Some risk factors for ADRD, such as age and genetics, cannot be controlled or prevented. However, several studies have suggested that it may be possible to delay or prevent the onset of ADRD by practicing brain health strategies. Many of the recommendations for maintaining physical health can also promote brain health, such as eating a balanced diet, managing chronic conditions, and being physically active. The County and organizations throughout the community offer classes and resources to support older adults to maintain brain-healthy lifestyles.

Many individuals with ADRD rely on the help of unpaid caregivers. In 2015, over 214,300 caregivers provided unpaid care for the 84,405 people living with ADRD in San Diego County. These caregivers provided over 244 million hours of unpaid care, valued at just over \$3 billion dollars.³ Although rewarding, caregiving can be stressful and impact a caregiver’s physical and emotional health, ability to maintain other social relationships, and financial situation. Fortunately, a variety of organizations in San Diego provide support and assistance to caregivers and those living with Alzheimer’s and dementia, including Alzheimer’s San Diego, the San Diego/Imperial Chapter of the Alzheimer’s Association, Southern Caregiver Resource Center, Jewish Family Service of San Diego, and the George

DID YOU KNOW?

- Alzheimer’s disease and related dementias was the 3rd leading cause of death among San Diego County residents in 2015.³
- The City of San Diego had the highest number of people living with dementia in 2015 and is projected to have the highest number as the years progress, with an approximate 42% increase by 2030.⁴

“Self-advocacy is no longer possible as dementia progresses, so who can speak to the needs of the person with dementia? How will they seek support and services?”
 – Local Senior Service Provider

“Isolation is a part of dementia, it causes further problems. Having early intervention services is important.”
 – Older Adult Resident

G. Glenner Alzheimer’s Family Centers, among others. In 2014, the San Diego County Board of Supervisors made addressing ADRD in our community a primary concern by launching The Alzheimer’s Project. To date, the Project has been successful in creating new screening tools for physicians, supporting research efforts aimed at finding a cure, educating the public on the disease, and increasing the safety of those with dementia who might wander with the Take Me Home program. In addition, the Project CARE program is helping to support vulnerable adults who live alone, including those with mild dementia, with brief case management, referral to services, and periodic check-in calls.



Recommendations & Action Steps

The following three goals and their respective action steps will help people living with dementia to remain connected within their communities, have appropriate support to maximize their independence and wellbeing, and be treated with respect by other community members who have a greater understanding of their needs.

Dementia-Friendly Goal 1

Incorporate dementia-friendly elements into each of the other Age Well San Diego theme teams' work (Health & Community Support, Housing, Social Participation, and Transportation).

Key Action Steps - Health & Community Support

- Ensure health and community support organizations that address the needs of individuals with dementia and their caregivers are listed in 2-1-1 and AIS databases.
- Create an inventory of tested, effective technologies related to aging/disability/dementia that support aging in community.
- Incorporate dementia-friendly concepts into trainings conducted for new or existing village organizations' staff and volunteers.

Key Action Steps - Housing

- Ensure that the model mixed-use zoning language created by the Housing theme team allows for and encourages assisted living facilities, including memory care.

Key Action Steps - Social Participation

- Develop a recreational and educational programming toolkit for service providers. The toolkit will include a focus on how to create programs that are dementia-friendly and culturally diverse and supportive for caregivers and older adults.
- Share this toolkit with interested community partners so that they can implement new programs.
- Convene a workgroup of community partners to reach isolated older adults, including those with dementia.
- Develop a marketing and outreach campaign, including a focus on dementia needs.

Key Action Steps - Transportation

- Identify opportunities to educate transit system staff on dementia-friendly concepts, such as dementia-friendly signage (e.g., high contrast, simple images) and communication basics for serving riders with dementia.
- Work with community partners to provide training for drivers in various rideshare programs (e.g., Uber, Lyft, and volunteer driver programs).





Dementia-Friendly Goal 2

Promote concepts and tools provided by Dementia Friendly America.

Key Action Steps

- Conduct a train-the-trainer workshop on Dementia Friends concepts for interested community partners.
- Train *Live Well San Diego* partners on dementia-friendly best practices relevant to their sector.
- Work with local Chambers of Commerce to educate businesses on dementia-friendly best practices, such as the Purple Tables restaurant reservation program.



Dementia-Friendly Goal 3

Coordinate with The Alzheimer's Project roundtables to identify opportunities to maximize the impact of each group's efforts.

Key Action Steps

- Add dementia-friendly concepts to The Alzheimer's Project presentations.
- Include links to local dementia-friendly activities and resources on The Alzheimer's Project website (www.sdalzheimersproject.org).



Measuring Our Success

The following indicators are a subset of the measures that will help to gauge progress. For a complete list of outcome measures, refer to the Appendix.

- Number of businesses, community organizations, and *Live Well San Diego* recognized partner organizations that have received training on dementia-friendly best practices
- Number of new Dementia Friends
- Number of older adults with dementia who access programming

Next Steps

Working Together to Build a Community for All Ages

We are now entering the third year of the five-year Age Well San Diego initiative. The County will work with AARP®, The San Diego Foundation, and community partners to implement the action plan. Documenting progress, assessing outcomes, and ensuring sustainability will be significant elements as we continue on the Age Well journey. At the conclusion of the Age Well initiative, by the year 2021, we expect to see substantial progress towards plan goals and the broader aim of supporting older adults and people of all ages and abilities to live well within their communities.

Individuals and organizations that would like to take an active role in helping the County and partnering organizations to implement the Age Well action plan goals, are encouraged to consider joining one of the five “theme teams” that correspond with the plan’s five theme areas: Health & Community Support, Housing, Social Participation, Transportation, or Dementia-Friendly. Starting in the late spring of 2018, theme teams will meet regularly. Cities that would like to have more formal involvement in age-friendly and dementia-friendly work are encouraged to learn more about the San Diego Age-Friendly Communities Partnership (see next page).

Organizations, community members and others are all invited to join the effort to make the region a place where older adults, persons with dementia, and all members of our community can live healthy, safe, and thriving lives. Everyone has a role to play in creating a community that supports people of all ages across the lifespan. Whether checking in on an elderly neighbor, participating in neighborhood planning discussions, or becoming a “Dementia Friend” who is informed about the basics of dementia, simple actions can go a long way.



Get Involved!

Do you or your organization have interest in furthering Age Well plan goals in the area of Health and Community Support, Housing, Social Participation, Transportation, or Dementia? If so, join a theme team!

For details on how to become involved or to receive a copy of this report, please call 858-495-5500.

Stay up to date!

Discover the latest information on Age Well at www.aging.sandiegocounty.gov and on the age-friendly movement at www.AARP.org/livable-communities. Regular updates will also be shared in the Aging & Independence monthly bulletin.

Next Steps–Municipalities

About The San Diego Foundation Age-Friendly Communities Program:

The San Diego Foundation is supporting our region’s efforts to build age-friendly communities. The Age-Friendly Communities Program at The San Diego Foundation was initiated in 2015 as a strategic response to our region’s rapidly aging demography. Building on more than five years of research and operational learning in service delivery to vulnerable older adults throughout San Diego County, The San Diego Foundation, in partnership with Del Mar Healthcare, developed the Age-Friendly Communities Program to take a systems-level approach in improving opportunities for successful aging. This work involves working directly with local jurisdictions to provide support and technical assistance in designing and implementing accessible built environments, supportive systems, and inclusive practices to benefit people of all ages across their lifespans. The San Diego Foundation’s Age-Friendly Communities Program acts as the hub for the Regional Age-Friendly Initiative, working to convene stakeholders, facilitate cross-sector data-sharing, and align age-friendly efforts to mobilize resources and inform public policy.

About the San Diego Age-Friendly Communities Partnership:

The San Diego Age-Friendly Communities Partnership (Partnership) originated through a collaboration between The San Diego Foundation, Del Mar Healthcare, AARP®, and the County of San Diego. The City of Chula Vista is the first municipal partner to join in 2017. The Partnership aims to improve the livability of communities in San Diego County for all ages. In order to do this, the Partnership will work to:

- (1) Bring more attention to the Age-Friendly Communities Initiative and the benefits such communities have for people of all ages;
- (2) Increase policies, practices, and programming that advance age-friendly communities throughout the region, including the adoption of municipal age-friendly action plans; and
- (3) Provide technical assistance and resources to groups, organizations, and local governments formalizing their commitment to age-friendly values.

For more information about the Age-Friendly Communities Program or the San Diego Regional Age-Friendly Communities Partnership contact:

Maritza Maksimow
The San Diego Foundation
Manager, Age-friendly Communities Program
619-814-1307
maritza@sdfoundation.org



References

1. U.S. Census Bureau. 2015 American Community Survey 5-Year Estimates, Table S0101. U.S. Census Bureau website. <https://www.census.gov/acs/www/data/data-tables-and-tools/data-profiles/2015/>. Accessed April 30, 2018.
2. Alzheimer's Association. 2017 Alzheimer's Disease Facts and Figures. *Alzheimer's & Dementia*. 2017; 13: 325-373. https://www.alz.org/documents_custom/2017-facts-and-figures.pdf. Accessed 12/10/2017.
3. County of San Diego Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2018. *Alzheimer's Disease and Related Dementias in San Diego County*. https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/phs/CHS/Reports/FINAL_2018_ADRD_Prevalence_4.13.2018.pdf. Accessed 5/2/2018.
4. County of San Diego Health and Human Services Agency, Aging & Independence Services The Alzheimer's Project: San Diego Unites for a Cure and Care, Annual Report April 2018. [http://www.sdalzheimersproject.org/content/dam/alzheimers/TO%20CPS%20FOR%20PRINT%20%20-%202018%20Annual%20Report_AlzProject_2018April16%20FINAL%20\(kc\).pdf](http://www.sdalzheimersproject.org/content/dam/alzheimers/TO%20CPS%20FOR%20PRINT%20%20-%202018%20Annual%20Report_AlzProject_2018April16%20FINAL%20(kc).pdf). Accessed April 30, 2018.
5. State of California, Department of Finance. P-2: County Population Projections (2010-2060). <http://www.dof.ca.gov/Forecasting/Demographics/Projections/>. Accessed April 30, 2018.
6. County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit. 2016 Demographic Profiles: San Diego County. https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/phs/CHS/demographics/FINAL_2016_Demographic_Profiles_1.30.18.pdf. January, 2018. Accessed 4/30/18.
7. U.S. Census Bureau. 2015 American Community Survey 5-Year Estimates, Table S0102. <https://www.census.gov/acs/www/data/data-tables-and-tools/data-profiles/2015/>. Accessed April 30, 2018.
8. U.S. Census Bureau. 2015 American Community Survey 5-Year Estimates, Table B19307F. <https://www.census.gov/acs/www/data/data-tables-and-tools/data-profiles/2015/>. Accessed April 30, 2018.
9. UCLA Center for Health Policy Research. California Health Interview Survey, 2014-2015. www.chis.ucla.edu. Accessed April 30, 2018.
10. U.S. Census Bureau. 2015 American Community Survey 1-Year Estimates, Table S0103. <https://www.census.gov/acs/www/data/data-tables-and-tools/data-profiles/2015/>. Accessed April 30, 2018.
11. U.S. Census Bureau. 2016 American Community Survey 1-Year Estimates, Table S0103. <https://www.census.gov/acs/www/data/data-tables-and-tools/data-profiles/2015/>. Accessed April 30, 2018.
12. San Diego County Regional task Force on the Homeless. 2017 We All Count Annual report. <http://www.rtfhsd.org/wp-content/uploads/2017/07/comp-report-final.pdf>. Accessed March 6, 2018.
13. U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates. Table B25064.
14. Molnar P. San Diego home median reaches \$540K, second highest of the year. *The San Diego Union Tribune*. December 28, 2017. <http://www.sandiegouniontribune.com/business/real-estate/sd-fi-corelogic-median-20171228-story.html>. Accessed April 30, 2018.
15. U.S. Census Bureau. 2015 American Community Survey 5-Year Estimates, Table B16004. <https://www.census.gov/acs/www/data/data-tables-and-tools/data-profiles/2015/>. Accessed April 30, 2018.
16. Corporation for National and Community Service. San Diego-Carlsbad-San Marcos, CA, based on Volunteering and Civic Life in America. Volunteering by age group – rates, 65 and over, 2015. <https://data.nationalservice.gov/Volunteering-and-Civic-Engagement/San-Diego-Carlsbad-San-Marcos-CA/aq54-8qhj/data>. Accessed March 6, 2018.
17. SANDAG. 2050 Regional Transportation Plan. http://www.sandag.org/uploads/2050RTP/F2050rtp_all.pdf. Accessed April 30, 2018.
18. U.S. Census Bureau. 2015 American Community Survey 5-Year Estimates, Table B08101. <https://www.census.gov/acs/www/data/data-tables-and-tools/data-profiles/2015/>. Accessed April 30, 2018.
19. State of California, Department of Finance. P-3: State and County Projections Dataset. <http://www.dof.ca.gov/Forecasting/Demographics/Projections/>. Prepared by: County of San Diego, Health & Human Services Agency, Public Health Services, Community Health Statistics Unit, 2017.

Acknowledgements

The following organizations and people were involved in the four Age Well San Diego community planning sessions held between December 2017 and February 2018 and/or assisted in the development of this Action Plan.

AARP®

Joe Garbanzos, AARP® California, Executive Council (also with Aging & Independence Services Advisory Council)
Bob Prath, AARP® California, Livable Communities Advisory Team (also with Aging & Independence Services Advisory Council)
Kimberly Smith, AARP® California, Associate State Director

Aging & Independence Services Advisory Council

Ellen Arcadi
Rosemarie Bahmani
Judi Bonilla
Georganne Grotey
Ted Kagan
Bijou Lulla
Kathy Randall
Lorelei Taylor
Susan Valoff

City of Chula Vista

Stacey Kurz, Healthy Chula Vista & Age-Friendly Communities Initiatives
Nicholas Paúl, Healthy Chula Vista & Age-Friendly Communities Initiatives
Tanairi Romano, Healthy Chula Vista & Age-Friendly Communities Initiatives

City of La Mesa

Susan Richardson, Community Services Department

City of Vista

Donna Meester, Senior Citizens Affairs Commission

Community Members

Rosa Alcaraz
Hazell Belvin
Robert Bettinger
Mary Birdine
Michael Eckmann
Jean Fisher
Susan Gates
Stu Gross
Nancy Hartley
Alison Jae
Vicky Karlflores
William Kelly
Monty Kroopkin
Bill Lawrence
Veronica Mitchell
Carol Orton
Fred Orton
Betty Owen

Community Members, continued

Miriam Plotkin
Carol Powell
Paul Segraves
Sharon Singer
Kathy Tinsley

Community Organization Representatives

Don Ambrose, Del Mar Healthcare
Joaquin Anguera, California Commission on Aging
Christopher Bearss, Big Sky Medicare
Hazell Belvin, American Lung Association
Mary Benson, RI International
Sarah Bilyeu, San Diego County Credit Union
Khalisa Bolling, University of California, San Diego Research in Environments, Active Aging and Community Health (REACH)
Judi Bonilla, Advocates for Aging
Brenda Bothel-Hammond, Jewish Family Service of San Diego
Elizabeth Bustos, Be There San Diego
Carol Cannizzo, IKOR-La Jolla
Damon Carson, Neighborhood House Association
D. Chavez, San Diego Health Connect
Preston Chipps, Industrial Workers of the World
Liliane Choney, ReVisions Resources
Katie Crist, University of California, San Diego Research in Environments, Active Aging and Community Health (REACH)
Breanna Davila, Maxim Healthcare Services
Burton Disner, North Coast Home Health Products
Ali Duarte, Meals on Wheels San Diego County
Mark Fenton, Tufts University, Friedman School of Nutrition Science & Policy
Tanya Finnerty, Homewatch CareGivers
Melinda Forstey, Serving Seniors
Joseph Gavin, Serving Seniors
Nina Ghatan, San Diego Community Health Improvement Partners (CHIP)
Andrew Gonzalez, Champions for Health
Federico Guerrero, Operation Samahan Health Centers
Manolo Guillen, Institute for Public Strategies
Maria Gutierrez, Aetna Better Health of California
Agnes Hajek, Union of Pan Asian Communities (UPAC) – Elder Multicultural Access and Support Services (EMASS)
Cheryl Hassoldt, Meals on Wheels San Diego County
Patrick Hyde, IKOR-La Jolla
Leticia Ibarra, Community Health Group
Alana Kalinowski, 2-1-1 San Diego
Nichole Keith, Poway OnStage
Sydney Kennedy, Time to Move Care Placement, Inc.
Cherianne Kestner, Olivewood Gardens and Learning Center
Amelia Knezevich, Davis Family YMCA
Robert Labelle, RI International
Leticia Leal, City Heights Community Development Corporation
Carol Lewis, El Cajon Callaborative
Mariani Lisa, Aetna Better Health of California
Jun Lu, Embrace Healthwear Inc.
Lucilia Lu, HandsOn San Diego
Bijou Lulla, Smaart House
Mary Lyndon, Housing You Matters
Hala Mandanat, San Diego State University, Graduate School of Public Health
Debbie Marshall, State Council on Developmental Disabilities

Community Organization Representatives, continued

Maritza Maksimow, The San Diego Foundation
Brian Midkiff, Meals On Wheels San Diego County
Meredeth Morgenroth, Jewish Family Service of San Diego
Daniel Murphy, Maxim Healthcare
Tamara Myers, Neighborhood House Association & San Diego County Black Infant Health Program
Mark Nanzer, Retired Employees of San Diego County
Julia Nava, Silver Sneakers
Eva Navarrete, Neighborhood Healthcare
Laura Nunn, San Diego Housing Federation
Heather Paeton, Winona House
Evelyn Parada, Union of Pan Asian Communities (UPAC)
Martha Plazola, Salud+Health Info Magazine
Frank Placone-Willey, Summit Unitarian Universalist Fellowship
Holly Pobst, Hospice of the North Coast
Freya Probst, University of California, San Diego
Janai Quintana, Windward Life Care
Martha Rañon, Southern Caregiver Resource Center
Allan Rappoport, California State University, San Marcos (CSUSM)
Jane Rappoport, California State University, San Marcos (CSUSM)
Lisa Rodman, Agua Hedionda Lagoon Foundation
Letitia Rogers, Music & Memory
Viviana Salazar-Sherman, Legal Aid Society of San Diego
Mario Sanguinet, San Diego Community College District & Southwestern Community College District
Nancy Sasaki, Alliance Healthcare Foundation
Ellen Schmeding, St. Paul's Senior Services
Kellie Scott, San Diego State University-San Diego/Imperial Geriatric Education Center
Christina Selder, Consumer Advocates for RCFE Reform (CARR)
Liz Silverman, Retired Employees of San Diego County
Prabha Singh, San Diego Human Dignity Foundation
Yasmin Shah, San Diego Senior Alliance & Village Movement California
Solana Sloat, Heritage Senior Care Inc.
Ron Stark, Mental Health Systems, Inc.
Catherine Thibault, Circulate San Diego
Erik Tilkemeier, City Heights Community Development Corporation
Dan Tomsy, Global Institute for Public Strategies
Simona Valanciute, San Diego Oasis
Angel Westerman, Dependable Daughter
Cindy Wilson, Heritage Senior Care, Inc.

County of San Diego Community Services Group (CSG)

Nadia Moshirian Binderup, Executive Office

County of San Diego Health and Human Services Agency (HHSA)

Jennifer Bransford-Koons, Aging & Independence Services
Kat Casabar, Aging & Independence Services
Janet Castanos, East Region
Dalija Dragisic, Aging & Independence Services
Lana Findlay, Office of Strategy and Innovation
Dale Fleming, Office of Strategy and Innovation
Nancy Garcia, Aging & Independence Services
Connie German-Marquez, Behavioral Health Services
Adrienne Gilleran, Public Health Services
Illisa Goldman, North Central Region
Ariel Hamburger, Public Health Services

HHS, continued

Melissa Hernandez, Aging & Independence Services
Danielle Isola, North County Regions
Sarah Jackson, Aging & Independence Services
Katherine Judd, East & North Central Regions
Anabel Kuykendall, Aging & Independence Services
Louise Lecklitner, Behavioral Health Services
Chiara Leroy, North County Regions
Brooke Lunquist, North County Regions
Chuck Matthews, Aging & Independence Services/North County Regions
Jeselle McLaurin, Aging & Independence Services
Penny Moore, Aging & Independence Services
Lina Nasr, Aging & Independence Services
Jennifer Navala, East & North Central Regions
Daniel Palomino, Office of Strategy and Innovation
Matthew Parcasio, Aging & Independence Services
Kimberly Pettiford, Public Health Services
Pam Plimpton, Aging & Independence Services
Delia Price, Aging & Independence Services
Hazel Quinones, Aging & Independence Services
Robin Ramirez, Housing and Community Development Services
Leslie Ray, Public Health Services
Kyra Reinhold, Aging & Independence Services
Jill Reiss, Integrative Services
Carey Riccitelli, North County Regions
Melina Rivera, Central & South Regions
Shelley Saitowitz, Public Health Services
Holly Salazar, Behavioral Health Services
Mark Sellers, Public Administrator/Public Guardian/Public Conservator
Renee Sherrill, Aging & Independence Services
Jennifer Sinnott, Aging & Independence Services
Caroline Smith, Aging & Independence Services
Kristen Smith, Aging & Independence Services
Martha Solorzano, North County Regions
Samantha Sonnich, Aging & Independence Services
Floyd Willis, Aging & Independence Services
Katrina Wyatt, Aging & Independence Services
Adrienne Yancey, Aging & Independence Services
Katie Zahm, Aging & Independence Services

County of San Diego Land Use and Environment Group (LUEG)

Jill Bankston, Parks & Recreation
Richard Chin, Department of Public Works
Robert Efird, Planning and Development Services
James Inglis, Executive Office
Kathleen Keehan, Air Pollution Control District
Eric Lardy, Planning and Development Services
Joanne McGhee, Parks & Recreation

County of San Diego Public Safety Group (PSG)

Marlene Tutt, San Diego County Sheriff's Department

San Diego Association of Governments (SANDAG)

Brian Lane
Audrey Porcella
Lisa Madsen

Appendix

Age Well San Diego Action Plan: HEALTH & COMMUNITY SUPPORT (HCS)

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics (Ways to Measure Success)
<p>HCS1. Create a comprehensive, pro-active, inclusive, culturally appropriate outreach, education and engagement plan to increase awareness of existing resources.</p>	<p>1. Determine levels of awareness:</p> <ol style="list-style-type: none"> Assess current knowledge and awareness, especially among underserved communities, of 2-1-1 San Diego and the AIS Call Center and website as the regional resources for information and assistance (I & A) regarding existing health and community support resources. Identify baseline level of community awareness, and identify if there are disparities in awareness among different communities. Plan for reassessment to track increases in awareness among community members, clients/patients, and patient advocates. <p>2. Increase outreach regarding Information and Assistance resources:</p> <ol style="list-style-type: none"> Ensure health and community support organizations are in the 2-1-1 and AIS resource database, and ensure periodic updates. Secure and/or create 2-1-1 and AIS Call Center/website outreach materials (e.g., brochures, print ads, social media ads, videos, promotional items, and PowerPoint presentations). Ensure that outreach materials about I&A services include information about the scope of resources available. Increase dissemination of the materials/ads/presentations in the communities identified as having awareness gaps in the baseline assessment. Utilize the network of <i>Live Well San Diego</i> partners, community members, clients/patients, patient advocates, and community based organizations (CBO's), with a particular focus on non-traditional entities such as schools, businesses, and chambers of commerce. Identify opportunities for public-private partnerships to expand reach. Incorporate 2-1-1 registration as part of the process for qualified organizations to come on board as <i>Live Well San Diego</i> partners. <p><u>Note:</u> For any community needs that are discovered in the course of completing action steps 1 and 2, document those needs and convey the information to organizations conducting relevant community needs assessments and community health improvement plans.</p>	<p>1. June 2019</p> <p>2a. June 2019</p> <p>2b. Dec. 2019</p> <p>2c. June 2020</p> <p>2d. June 2020</p>	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> Baseline measure of awareness of I&A services (2-1-1 and AIS Call Center) Identification of gaps in awareness Number of materials disseminated, ad views, and participants reached in presentation and community events. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> Step added to <i>Live Well San Diego</i> partner engagement process <p><u>Long Term:</u></p> <ul style="list-style-type: none"> Increased percentage of older adults who are aware of 2-1-1 and AIS I&A systems.
<p>HCS2: Utilize and further develop access to, and best practices with, technology.</p>	<ol style="list-style-type: none"> Create inventory of tested, effective technologies related to aging/disability/dementia that support aging in community. Analyze technology inventory; develop criteria for how to focus efforts Conduct focus groups around the use of and potential barriers to use of existing and needed technology. Conduct a pilot project to assess effectiveness, satisfaction, and other outcomes 	<p>1. Sept. 2018</p> <p>2. Dec. 2018</p> <p>3. June. 2019</p> <p>4. Dec. 2019</p>	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> Inventory of available technologies created and categorized. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> Focus groups conducted; recommendations reported. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> Pilot project planned and implemented with results reported

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics (Ways to Measure Success)
	<p>regarding selected technology.</p> <p>5. Promote policies that would provide access to technology for people in need via working groups for at least two possible policy areas related to adaptive technology (e.g., modify building codes to include adaptive technology for aging, pursue Medicare coverage of effective assistive devices).</p>	5. June 2020	<p>(will include effectiveness measures such as reduced health risk factors, health care utilization, and costs).</p> <ul style="list-style-type: none"> • Medicare coverage of technology if its use results in positive health outcomes.
<p>HCS3: Encourage the development of village-like community support systems.</p>	<ol style="list-style-type: none"> 1. Assemble or create educational materials about villages and co-ops. 2. Educate various communities/stakeholders (e.g., non-profit organizations, residents, funders, local government leaders, and others). 3. Work with an interested community to develop a pilot project. 4. Incorporate dementia-friendly concepts into trainings conducted for new or existing village organizations' staff and volunteers. 5. Identify stakeholders to invest in public/private partnerships to support the pilot project. 	<ol style="list-style-type: none"> 1. Sept. 2018 2. Dec. 2018 3. June 2019 4. June 2019 5. June 2020 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Village "promising practices" summary created, with prioritized list of keys to success. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> • Create baseline measure of age 50+ housing units currently in or accessing "village" arrangements. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Increased number of age 50+ households currently in or accessing "village" community support systems.

Age Well San Diego Action Plan: HOUSING (H)

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics
<p>H1. Implement zoning ordinances and design requirements that create accessible, mixed-use villages with a variety of housing types and services.</p>	<p>1. Develop model language for zoning ordinance based off preexisting municipality's zoning ordinance that meet the needs of unincorporated county areas and could be used by municipalities.</p> <ol style="list-style-type: none"> Provide AARP® research to County Planning & Development Services. Identify model language for mixed use (MU) zoning ordinances based on preceding county Form Based Code/Village Core language. Ensure that language allows for and encourages assisted living/memory care facilities. Draft amendment to SD County Zoning Ordinance and submit Board Letter to seek approval of Zoning Ordinance amendments. <p>2. Implement the mixed use village zoning ordinance through the community planning process.</p> <ol style="list-style-type: none"> Identify 3-4 blighted, vacating, or failing properties (Failing retail centers, big box store, resorts, etc.), in village candidate areas. Evaluate each property for benefits and barriers – cost to repurpose as mixed use village. Conduct 7-10 charrettes to choose property and move forward with design plan for village-mixed use development. <p>3. Share lessons learned with municipalities.</p>	<p>1a. Dec. 2018 1b. March 2019</p> <p>1c. June 2019</p> <p>1d. June 2019</p> <p>2. Dec. 2019</p> <p>3. June 2020</p>	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> Model zoning language developed. Model zoning language adopted by the County of San Diego. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> Number of municipalities exposed to new zoning language <p><u>Long Term:</u></p> <ul style="list-style-type: none"> Number of new projects utilizing new zoning. Number of municipalities that the evaluation was distributed to. Number of municipalities that implement new zoning language.
<p>H2. Implement policies and programs to prevent and overcome homelessness.</p>	<p>1. Analyze and compare policies that are proven to prevent/reduce senior homelessness.</p> <ol style="list-style-type: none"> Review and compare policies on affordable rental housing. <ul style="list-style-type: none"> Monitor result of Costa-Hawkins Repeal Initiative. Based on review and ballot initiative result – brief AIS Advisory Council <p>2. Identify and promote programs that provide assessment and counseling to seniors who are homeless or at risk of becoming homeless.</p> <p>3. Develop model policy language.</p> <p>4. Share lessons learned with municipalities.</p>	<p>1a. Oct. 2018 1b. Feb. 2019</p> <p>2. Feb. 2019</p> <p>3. Sept. 2019</p> <p>4. June 2020</p>	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> Completion of analysis on senior homelessness prevention List of resources for homeless <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> Number of older adults who access homeless services Percentage of older adults who experience homelessness <p><u>Long Term:</u></p> <ul style="list-style-type: none"> Percentage of senior population that spends > 30% of income on housing (through various disparity lenses)

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics
<p>H3. Institutionalize a coordinated approach to creating and financing affordable housing stock.</p>	<ol style="list-style-type: none"> 1. Identify and stimulate activity that is already in place to create and finance affordable housing. 2. Identify best practices and roadblocks. <ol style="list-style-type: none"> a. Create a pool of experts who could assemble best practices to share. b. Identify best practices in other regions and within San Diego County. c. Identify land zoned for high density development. d. Identify zoning strategies and incentives for real estate developers, builders, and landlords, including creative uses of blighted land. e. Identify champions currently involved and showcase these efforts. f. Compile best practices into a briefing document. 3. Educate voters and businesses to gain more support for affordable housing. 	<ol style="list-style-type: none"> 1. Mar. 2019 2. June 2019 3. Sept. 2019 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Completion of inventory of current efforts underway to create and finance affordable housing. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> • Completion of best practices briefing document. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Number of new affordable units added to housing stock.
<p>H4. Develop comprehensive supports associated with housing for successfully aging in community.</p>	<ol style="list-style-type: none"> 1. Create training for homeowners and homeowners associations on Accessory Dwelling Units (ADUs) and home retrofits that would allow seniors to age in their homes. 2. Conduct training for homeowners' associations on ADUs. 3. Add to the County Community Planning Process information for planning groups, builders' information, and suggestions on how to create housing in communities to enable aging in place/community. 	<ol style="list-style-type: none"> 1. Sep. 2018 2. Mar. 2019 3. Mar. 2019 - ongoing 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Training materials created. • Number of trainings conducted. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> • County planning process modified. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Increase in the number of accessory dwelling units.

Age Well San Diego Action Plan: SOCIAL PARTICIPATION (S)

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics (Ways to Measure Success)
<p>S1. Create policies and practices that facilitate inter-generational engagement and the development of shared spaces for intergenerational activity.</p>	<ol style="list-style-type: none"> Identify existing programs and successful models that create physical and cultural environments that encourage intergenerational activities. Document best practices. Identify policies that facilitate intergenerational opportunities. Document findings. Develop and disseminate a survey tool to be shared with targeted community partners to assess their or their clients' interest in participating in intergenerational activities, and/or adopting IG friendly policies. Survey tool will be shared with at least 12 potential pilot sites. Provide technical assistance to community partners (such as school districts) that are interested in adopting policies and procedures that promote intergenerational activity. Initiate one pilot intergenerational activity in each Health and Human Services Agency Region (Central, East, North Central, North Coastal, North Inland and South). Share community successes and project updates for ongoing engagement via at least two annual blog stories on the <i>Live Well San Diego</i> website and/or articles in the <i>Aging & Independence Services (AIS)</i> monthly newsletter. 	<ol style="list-style-type: none"> August 2018 Sept. 2018 Nov. 2018 May 2019 June 2019 January 2020 Ongoing- May 2020 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> Creation of best practices report. Survey results on current adoption and interest in IG programs and policies. Survey should include an estimate of actual IG-friendly spaces in County by municipality (Provides baseline info). <p><u>Medium Term (2 years):</u></p> <ul style="list-style-type: none"> Number of pilot programs and policies actually adopted by June 2020. Actual change in IG programs, policies and spaces since baseline survey. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> Creation of zoning ordinances which encourage intergenerational housing development and inclusion of shared social space (gardens, pathways, performance spaces) that can host IG programming. Creation of transportation policies that provide all ages access to such shared and IG-friendly spaces Creation of organizational (e.g., school district) policies that create spaces/ support use of existing spaces (community gardens, community room) and programs for IG activities during school hours.
<p>S2. Implement and expand recreational and educational programming that is safe, dementia-friendly, and diverse.</p>	<ol style="list-style-type: none"> Create and/or promote a list of resources including membership organizations, volunteer opportunities, events and classes for all ages (including programs for isolated individuals). Research and report on best practices. Develop a recreational and educational programming toolkit for service providers. The toolkit will include a focus on how to create programs that are dementia-friendly and culturally diverse and supportive for caregivers and older adults. 	<ol style="list-style-type: none"> Dec. 2018 Dec. 2018 June 2019 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> Baseline number of programs. Best practices report completed. Toolkits completed. List of programs completed. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> Number of toolkits distributed to community organizations (at least 25 by June 2019).

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics (Ways to Measure Success)
	<p>4. Distribute toolkit to staff at recreation centers, educational settings from pre- schools to universities and at other multigenerational gathering spots such as churches and libraries, so that they can implement new programs.</p>	<p>4. Dec. 2019</p>	<ul style="list-style-type: none"> • Number of organizations offering existing programs <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Number of new programs developed
<p>S3. Create and implement a targeted social support outreach, engagement, and education plan, especially for those who are isolated.</p>	<ol style="list-style-type: none"> 1. Convene a workgroup of community partners to strategize ways to reach isolated older adults, including those with dementia. 2. Develop a marketing and outreach campaign, including an easily shareable toolkit and ensure development/translation of campaign materials. <ol style="list-style-type: none"> a. Require that materials be culturally and linguistically competent. This can be achieved by having representation on development team from various target populations. 3. Identify, support, and engage volunteers to promote opportunities for target population (using outreach campaign materials). <ol style="list-style-type: none"> a. Identify and train ambassadors/advocates. 	<p>1. Dec. 2018</p> <p>1. June 2019</p> <p>2. Dec. 2019</p>	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Current number of isolated adults being served by coalition partners (baseline). • Campaign developed. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> • Number of ambassadors and advocates trained. • Number of outreach events. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Change in number of “isolated” adults successfully engaged and served.
<p>S4. Develop leadership, advocacy and empowerment opportunities for aging adults (including intergenerational opportunities).</p>	<ol style="list-style-type: none"> 1. Form a coalition to bring together representatives of groups with volunteer opportunities for older adults and representatives of groups that have such individuals, to facilitate more effective cooperation and focus on diversity. <ol style="list-style-type: none"> a. Coalition will assess the current landscape regarding: <ul style="list-style-type: none"> • Participation of older adults and representatives of diverse groups on organizational advisory boards and other decision-making bodies. • Language, policies, and procedures that support diverse leadership and participation on organizational advisory boards and decision-making bodies. b. Coalition will craft model policy language regarding age/ethnic diversity for boards, committees, steering groups. 2. Draft model language regarding the inclusion of older adults on advisory boards and other decision making bodies. Share with organizations. 3. Create a “get involved” seminar for diverse older adults on how to find and serve in leadership roles (serving on boards, committees, commissions). 4. Utilizing the Resident Leadership Academy (RLA) model, schedule a training for older adults on strategies and steps to be effective change advocates in their communities. 	<p>1. Sept. 2018</p> <p>2. March 2019</p> <p>3. June 2019</p> <p>4. Dec. 2019</p>	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Completion of baseline survey of target boards and organizations for language, policies, and practices that support diverse leadership and participation. • Model language drafted. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> • Measure change in number of boards implementing such language, policies, and practices. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Increase in the number of diverse older adults (age, gender, race) serving as members of targeted boards and leadership groups.

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics (Ways to Measure Success)
	5. Create a media campaign to educate the public on the significance of older adults and identify opportunities to educate the public that aging adults are a vital part of our community and continue to give back.	5. June 2020	

Age Well San Diego Action Plan: TRANSPORTATION (T)

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics
<p>T1. Implement the Complete Streets policy and design approach as routine practice in jurisdictions across the region. This approach emphasizes safe accommodation of bicyclists, pedestrians, transit riders, and drivers.</p>	<ol style="list-style-type: none"> 1. Develop a regional Complete Streets Task Force/Oversight Committee. 2. Assess current Complete Streets policies in each region/municipality. 3. Coordinate with SANDAG to prioritize funding for communities/jurisdictions with most need. 4. Conduct technical assistance (TA) to propose implementation approaches like adding to routine paving program. 5. Adopt National Association of City Transportation Officers (NACTO) guidelines and requirements that all routine repaving and maintenance programs are put through complete streets assessments. 6. Implement policy to prioritize Active Transportation Program (ATP) funds/public resources for comprehensive complete streets policies, permitting, and implementation. 7. Work with SANDAG/Circulate San Diego to develop and distribute a best practices toolkit (based on existing best practice resources) for jurisdictions to implement Complete Streets policy, including small-scale neighborhood programs. 	<ol style="list-style-type: none"> 1. Sep. 2018 2. Jan. 2019 3. Ongoing 4. Dec. 2019 5. Dec. 2019 6. Jan. 2020 7. Jan. 2020 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Creation of task force. • Assessment completed. • Number of TA events. • Number of jurisdictions that adopt, implement, and measure NACTO guidelines and requirements for routine repaving and maintenance. <p><u>Medium Term (2 yrs.):</u></p> <ul style="list-style-type: none"> • Number of toolkits distributed. • Number of miles of on-street bike lanes. • Number of miles protected bike lanes/trails. • Number of miles of road with full sidewalks. • Number of miles of bike boulevard. • Number of miles per street mile. • Number of miles per capita. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Reduction in annual traffic volume. • Reduction in annual traffic crashes. • Increases in bike/pedestrian trips (i.e., mode split).
<p>T2. Institute regional planning policies to promote smart growth.</p>	<ol style="list-style-type: none"> 1. Use existing data sources to identify current mobility trends (walk, bike, transit) in different areas and map with/ground-truth municipal development plans. 2. Leverage existing SANDAG community workgroups to propose potential regional planning best practices/policies. 3. Facilitate and convene an “interdisciplinary coordination” forum with lead decision makers including land use and public health. 4. Implement the Regional Bike Plan Early Action Program (EAP) and Downtown Mobility Plan (DMP), two initiatives that provide for safer, easier, and more attractive biking opportunities. 	<ol style="list-style-type: none"> 1. Fall 2018 2. Fall 2018 3. Jan. 2019 4. June 2018 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Creation of mobility map. • Number of policy proposals. • Number of interdisciplinary forums. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> • Number of jurisdictions that adopt policies. • EAP and DMP implemented. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Air quality.

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics
T3. Set transportation split-mode goals and allocate funds accordingly.	<ol style="list-style-type: none"> 1. Make the case for target setting <ol style="list-style-type: none"> a. Research best practices from MPOs/cities b. Create recommendations and present to Age Well Tech Working Group (AWTWG) 2. Collect better data <ol style="list-style-type: none"> a. Assemble AT stakeholders (transit/senior/ paratransit) in addition to AwTWG. b. Scan existing data, identify gaps and set baseline, once funding is identified. c. Install equipment, counters, surveys. d. Develop <i>State of AT Commute</i> for region. 3. Set mode share goals for AT and transit consistent with Sustainable Communities Strategy (SCS). <ol style="list-style-type: none"> a. As part of Regional Transit Plan (RTP), adopt mode share targets that are equitable, ambitious and funded. 4. Recommend funding levels proportionate to mode share goals as part of RTP. 	<ol style="list-style-type: none"> 1. Dec. 2018 2a. Jun. 2019 2b. Dec. 2019 2c. Dec. 2019 3. Dec. 2019 4. Date TBD 4a. Date TBD 4b. by 2020 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Development of best practice portfolio. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> • Updated survey questions for data collection. • Number of counters on bike/pedestrian hand counts executed. • <i>State of AT Commute</i> published. • Percentage increases in AT goals. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Percentage of funds spent on pedestrian projects/ mode share for pedestrians • Percentage of funds on bike/ mode share bike • Percentage of funds transit/ mode share transit
T4. Implement a comprehensive regional transit policy.	<ol style="list-style-type: none"> 1. Research best practices in peer communities: <ol style="list-style-type: none"> a. Smart trips (e.g., Portland, OR). b. Unified Fare Card (integrated bus, rail, bike/ride share). c. Transportation Improvement Program (TIP) project prioritization (Nashville, TN). d. Development ordinances. <ol style="list-style-type: none"> i. Parking policy. ii. Transit Oriented Development (TOD)/transit proximity. iii. Mobility hubs. iv. Reward/require Transportation Demand Management (TDM) [showers, bike parking/ sharing, transit passes, market rate parking, shuttles, van pool, telework. v. Business TDM incentives/ transport mgt. districts. 2. Launch pilots. <ol style="list-style-type: none"> a. TDM (member-funded pilot district). b. TOD (overlay ordinance). 3. Propose new TIP scoring factors & performance measures to SANDAG (health, income, car ownership, land use, etc.). 4. Take pilots to scale (TDM/TOD ordinance). 	<ol style="list-style-type: none"> 1. June 2019 2. June 2020 3. June 2022 4. June 2023 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Findings & Recommendations Report • Number of pilots launched • Number of TIP scoring and performance recommendations adopted by SANDAG <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> • Number of pilots taken to scale • Number of TDMs launched • Low car ownership/income • Land use/network density • Percentage of population w/in walking distance of transit <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Transit mode split (percentage of total trips not involving single occupancy car rides) • Health measures (obesity) • Air quality

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics
	<ol style="list-style-type: none"> 5. Launch more TDMs. 6. Educate transit system staff on dementia-friendly concepts, such as dementia-friendly signage (e.g, high contrast, simple images) and communication basics for servicing riders with dementia). 	<ol style="list-style-type: none"> 5. Ongoing 6. June 2019 	
T5. Develop a coordinated, innovative rideshare mobility system for all users (specialized transportation for disabled, older adults).	<ol style="list-style-type: none"> 1. Create standardized definitions of ride types and other service measures for rideshare programs that will allow consumers to compare available options and SANDAG to assess baseline data on utilization and performance. 2. Encourage cities to adopt/expand on the Regional Transportation Plan. <ol style="list-style-type: none"> a. Evaluate vehicle repurpose (MTS) paratransit (i.e. earlier release retirement). b. Model best practices. 3. Expand existing systems to be more comprehensive and innovative, including village style/member-based, rideshare programs. 4. Provide training to rideshare drivers to learn how to provide dementia-friendly service. 	<ol style="list-style-type: none"> 1. Jan. 2019 2. June 2019 3. June 2020 4. Dec. 2019 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Creation of definition dictionary. • Number of jurisdictions adopting the Regional Transportation Plan. <p><u>Medium Term:</u></p> <ul style="list-style-type: none"> • Number of rides utilized. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Improvement in air quality.

Age Well San Diego Action Plan: DEMENTIA-FRIENDLY (D)

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics (Ways to Measure Success)
<p>D1. Incorporate dementia-friendly elements into each of the other Age Well San Diego theme teams' work (Health & Community Support, Housing, Social Participation, and Transportation).</p>	<ol style="list-style-type: none"> 1. Health & Community Support <ol style="list-style-type: none"> a. Create an inventory of tested, effective technologies related to aging/disability/dementia that support aging in community. b. Ensure health and community support organizations that address the needs of individuals with dementia and their caregivers are in the 2-1-1 and AIS databases. c. Incorporate dementia-friendly concepts into trainings conducted for new or existing village organizations' staff and volunteers. 2. Housing: <ol style="list-style-type: none"> a. Ensure that the model mixed use zoning language created by the Housing theme team explicitly allows for and encourages assisted living facilities, including memory care. 3. Social Participation <p><i>Expanding Programming</i></p> <ol style="list-style-type: none"> a. Develop a recreational and educational programming toolkit for service providers. The toolkit will include a focus on how to create programs that are dementia-friendly and culturally diverse and supportive for caregivers and older adults. b. Share this toolkit with interested community partners so that they can implement new programs. <p><i>Outreach to isolated older adults</i></p> <ol style="list-style-type: none"> c. Convene a workgroup of community partners to reach isolated older adults, including those with dementia. d. Develop a marketing and outreach campaign, including a focus on dementia needs. 4. Transportation: <ol style="list-style-type: none"> a. Identify opportunities to educate transit system staff on dementia-friendly concepts, such as dementia-friendly signage (e.g. high contrast, simple images) and communication basics for serving riders with dementia. b. Work with community partners to provide training for drivers in various rideshare programs (e.g. Uber, Lyft, and volunteer driver programs). 	<p>1a. Dec. 2018</p> <p>1b. June 2019</p> <p>1c. June 2019</p> <p>2a. Dec. 2018</p> <p>3a. June 2019</p> <p>3b. Dec. 2019</p> <p>3c. Dec. 2018</p> <p>3d. June 2019</p> <p>4a. June 2019</p> <p>4b. Dec. 2019</p>	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Health & Community Support: Completion of baseline assessment regarding 2-1-1/AIS awareness • Housing: Development of model mixed use zoning language • Social Participation: Development of toolkit • Transportation: Development of a strategy to reach rideshare drivers to provide training. • Transportation: Number of transit system staff trained on dementia. <p><u>Medium Term (2 years):</u></p> <ul style="list-style-type: none"> • Health & Community Support: Incorporation of 2-1-1 database registration for new <i>Live Well San Diego</i> partners. • Housing: Number of municipalities exposed to new zoning language. • Social Participation: Number of toolkits distributed to community organizations. • Social Participation: Launch of marketing/outreach campaign. • Transportation: Number of transit system and rideshare program staff trained on dementia-friendly concepts. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Health & Community Support: Increased public awareness of 2-1-1/AIS information and assistance systems. • Housing: Number of new assisted living/memory care facilities in mixed use zones. • Social Participation: Percentage of older adults considered "isolated" in the community. • Social Participation: Number of older adults with dementia who are accessing programming. • Transportation: Dementia-friendly concepts infused into transit system and rideshare program standard operations (e.g. for training).

Goal	Specific action steps (What will happen?)	Target dates (By when?)	Metrics (Ways to Measure Success)
D2. Promote concepts and tools provided by Dementia Friendly America.	<ol style="list-style-type: none"> 1. Conduct a train-the-trainer workshop on Dementia Friends concepts for interested community partners. <ol style="list-style-type: none"> a. Train Live Well San Diego partners on dementia-friendly best practices relevant to their sector. b. Work with local Chambers of Commerce to educate businesses on dementia-friendly best practices, such as the Purple Tables restaurant reservation program. 	<ol style="list-style-type: none"> 1. June 2019 1a. Dec. 2019 1b. Dec. 2020 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Creation of train-the-trainer workshop on Dementia Friends <p><u>Medium Term (2 years):</u></p> <ul style="list-style-type: none"> • Number of Live Well San Diego partners trained. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Number of businesses trained. • Number of new dementia-friendly best practices implemented by local businesses.
D3. Coordinate with The Alzheimer's Project roundtables to identify opportunities to maximize the impact of each group's efforts.	<ol style="list-style-type: none"> 1. Add dementia-friendly concepts to The Alzheimer's Project presentations conducted by AIS staff. 2. Include links to local dementia-friendly activities and resources on The Alzheimer's Project website (www.sdalzheimersproject.org). 	<ol style="list-style-type: none"> 1. Dec. 2018 2. Dec. 2020 	<p><u>Short Term:</u></p> <ul style="list-style-type: none"> • Completion of updates to Alzheimer's presentations. <p><u>Medium Term (2 years):</u></p> <ul style="list-style-type: none"> • Completion of updates to The Alzheimer's Project website. <p><u>Long Term:</u></p> <ul style="list-style-type: none"> • Increase in traffic to The Alzheimer's Project website.

