

WAKE COUNTY  
**ACTION  
PLAN**



FOR AGING ADULTS AND  
ADULTS WITH DISABILITIES

2015 – 2019



*Prepared by*  
The GOLD Coalition of Wake County



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# Introduction

In mid-2014 the headlines exclaimed, “Wake County Hits the 1 Million Mark!” With 25,000 new residents moving to the county each year, and disproportionate growth in the 60+ and 85+ age groups, this update of the Wake County Aging Plan comes at a critical time for planning and progress. Expanded emphasis on supporting adults with disabilities has added to the scope of this Plan Update, and is reflected in the Plan’s new title.

This Action Plan for Aging Adults & Adults with Disabilities represents the collaborative work of individual citizens, representatives from the business and nonprofit communities, and service providers from both the public and private sectors.

The reality of the rapidly expanding population of older adults and adults with disabilities is complicated by the fact that we are living longer than ever, and funding for services is not keeping pace with the continued growth. The urgent need for planning to meet the complex needs of this growing population requires deliberate and focused collaboration throughout Wake County, and must include our partners at the state and federal level. No single governmental entity, nonprofit, business or citizen group can be expected to tackle the substantial challenges alone. The Plan provides ample opportunities for every sector and stakeholder to be a part of the progress needed to make positive changes in our community for our target populations.

Seven issue teams were convened in the fall of 2014 to begin this third cycle of the strategic planning process. The development of this plan was heavily influenced by the history of planning efforts in Wake County, plus the burgeoning need in our community that drives us to broaden and strengthen the Plan’s impact.

# Plan History

**A need is identified.** In 2005, the Wake County Human Services Board recognized that Wake County was facing a significant challenge in the coming years in the form of a rapidly growing senior population, many of whom were also economically disadvantaged. Population projections supplied by the Wake County Planning Office indicated that Wake County's over-55 population will increase 62% by 2010, and 161% by 2020, relative to year 2000 US Census data. In view of this challenge, the Wake County Human Services Board recognized that our county's leaders needed to come together in a collaborative and community based effort to plan for the needs of our quickly growing older adult population. Consequently, The Human Services Board established an Aging Services committee and charged it with the task of developing a countywide Aging Services Plan. This committee included government, nonprofit, business and consumer representatives. This group researched the current status of services for seniors in Wake County, and assigned teams to develop recommendations in six issue areas found to be of greatest concern to our older citizens—Transportation, Health, Personal Care, Safety, Housing and Economic Self Sufficiency. Recommendations included in the Aging Plan were designed to guide efforts to be made by Wake County governmental bodies, nonprofit agencies, private sector businesses, and the community as a whole over the next four years, acknowledging that some goals will be ongoing over a longer period.

**The GOLD Coalition.** The Wake County Aging Plan recommended that an ongoing public-private working group, the GOLD Coalition (Growing Older Living with Dignity), would be charged with the responsibility of amplifying, implementing and monitoring the progress of the recommendations made in the initial Plan. This remains the group's primary goal today. The formation of the Coalition was in recognition of the fact that government cannot be expected to solve all problems and meet all needs, and that members of the community must participate in finding solutions to challenges. Members include consumers, representatives from the business and nonprofit communities, the faith community, as well as the human services system. The GOLD Coalition updated the initial Aging Plan for 2010-2014, and the current update is for the period 2015-2019.

**Inclusion of Adults with Disabilities.** Although the Coalition was originally intended to represent older adults, its mission has expanded to include adults with disabilities as well. It was recognized early on that these two groups have many of the same needs and wants and are often served together throughout the long term care continuum. Individuals with physical, intellectual and/or emotional disabilities are intentionally included in the design of the Plan.

# Plan Context & Development

**Renewed focus on action.** The GOLD Coalition is renewing its focus on established Plan priorities. Recognizing that current systems are insufficient to meet the growing needs in our community, we focused on broadening community participation and soliciting community advice. Listening sessions were held at several Senior Centers, and invitations were accepted by more than 70 representatives to undertake the year-long process of researching and developing priority strategies for inclusion in the Plan.

**Plan format change.** The GOLD Coalition developed the new plan around the strategic goals identified in the North Carolina Aging Services Plan. We reviewed multiple successful plans from across the state and made slight changes to better represent the unique circumstances of the capital county. The Coalition hopes that adoption of common priorities will align goals and influence positive change for older adults and adults with disabilities both in Wake County and across North Carolina.

**Work Groups.** Seven issue teams were convened with the objective of creating priority objectives and strategies for the next four-year period. Each team met over a period of six months, researching services, trends, progress and deficits in their specific subject area. The issues studied were: Transportation, Health, Personal Care, Safety, Housing, Economic Self-Sufficiency, and Public Education, Awareness / Advocacy. The objectives and strategies identified in the Plan represent our ideas for ways we can work together more effectively to assure a bright future for Wake County's older adults and adults with disabilities. As has been the case with previous Plans, many issues have remained unchanged or will require ongoing efforts to address service and support shortfalls. For this reason, omission of a particular challenge in the document does not lessen its importance, or indicate that it is not a priority. Considerable focus was placed on challenges where progress can be made with determined and consistent action.

**Focus on populations with special interests.** The planning process prioritized the identification of strategies to meet the special needs and preferences of groups such as ethnic communities; informal or non-family caregivers; religious groups; lesbian, gay, bisexual and transgendered communities; individuals and caregivers dealing with mental illness; veterans; and aging adults with intellectual and other disabilities and their families. Some strategies we have identified pursue action targeted to a specific sub-group, but many do not. It is the intention of the GOLD Coalition and the Plan's contributors that, during Plan implementation, special consideration is included to meet the needs of these individuals. In addition, the Plan may use traditional language such as older adults, adults with disabilities, and caregivers. This simplifies the Plan for readers, but the language is not meant to be exclusive. As an example, "Caregivers" does not include only spouses, children, or paid caregivers; but any person providing care chosen by the care receiver. This may be a life partner, a friend, or "chosen" family – regardless of how the law may view the relationship.

# Demographics & Population Trends

Wake County's increasing number of new residents, at the rate of 25,000 per year, and the growing number of aging baby boomers indicates greater challenges for the county in serving the aging population and adults with disabilities. Understanding the national, state, and county trends will provide valuable input toward designing, implementing, and managing needed support and services to enable older adults and adults with disabilities to remain independent, to age in place, and to reach and maintain their optimal health.

According to the Administration on Aging 2013 report there will be about 72.1 million older Americans in 2030, more than double the number of older Americans in 2000. At the beginning of 2015 about one in every seven Americans, or 14.1% of the population is age 60 or older. Americans ages 65 and older are expected to grow to be 19% of the population by 2030.<sup>1</sup>

In North Carolina in 2014 one in five adults was age 60 and over and by 2033 one in four people will be 60 or older. In the next 20 years, people ages 75-84 will be the fastest growing age group and those ages 85 and older will be the second fastest growing age group in the state.<sup>2</sup>

An estimated 2.4 million baby boomers in North Carolina (those born 1946-1964) have begun to change the aging profile of the state. North Carolina, with an estimated 10 million people, ranks tenth nationally in total population, ninth in the size of the population over age 60 and eleventh in the population 85 and older.<sup>2</sup>

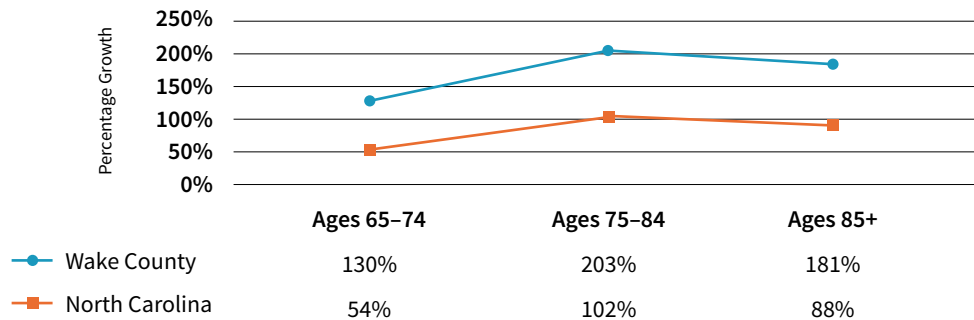
Also of note is the increasing life expectancy of people with lifelong or long-term disabilities. There are almost 5 million individuals with intellectual and developmental disabilities (I/DD) in the United States, and an estimated 154,812 in North Carolina. In parallel with national trends, 72% of individuals with I/DD in our state live with a family caregiver, with 23% (over 25,000) of those individuals living with a caregiver over the age of 60. Only 8% of the families providing caregiving support to individuals with I/DD in North Carolina receive public support from any I/DD agencies. As individuals with I/DD increasingly outlive their family caregivers, our community will be challenged to provide the support they need to maintain their health and greatest degree of independence and to participate meaningfully in the life of the community.<sup>3</sup>

About 80% of long-term care in the United States is provided by unpaid caregivers. The National Center on Caregiving estimates that there are 804,300 informal caregivers in North Carolina, providing approximately 900 million caregiving hours. In Wake County, nearly 11% of the population reports that they provide regular care or assistance to a friend or family member who has a health problem, long-term illness or disability.<sup>4</sup> The prevalence of caregiving also varies among special interest populations. As an example, one in four LGBT adults will become an informal caregiver, compared to one in five heterosexual adults.

# Wake County Trends

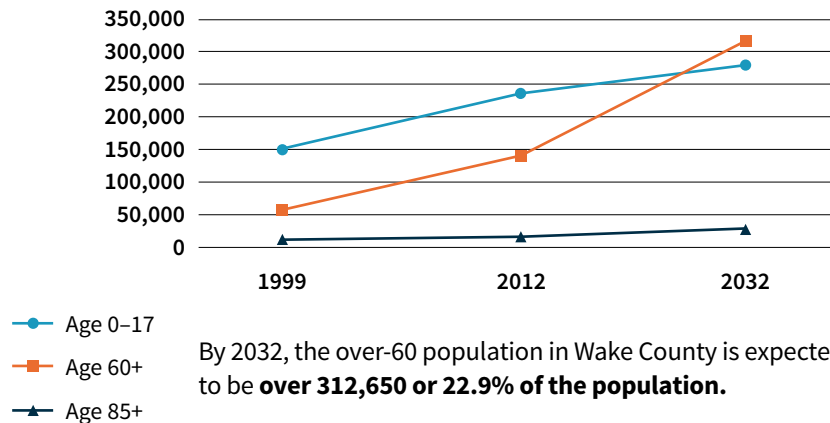
Wake County population reached over 1 million people in 2014 and averages 25,000 new residents every year.<sup>5</sup> In Wake County, over the next twenty years, the projected growth of the population over age 75 is 203% and for people 85 and older the estimate for Wake County is 181%, more than double the state's projected growth of 88%.<sup>2</sup>

**Projected Growth of Older Adult Population by Age (2013–2033)**



Source: Wake Aging Profile<sup>2</sup>  
NC Data Center, Oct 2014

**Wake County Population Change**



Prepared by Swarna Reddy, NC Div. of Aging and Adult Services, Dec 2013  
Source: American Community Survey 2008–2012, NC State Data Center



# Demographics

The life expectancy for persons in Wake County averages 79.3 years for men and 83.4 years for women. Generally women live longer than men, and in the oldest age group, African Americans have a life expectancy that is equal to or greater than whites.<sup>5</sup>

Women ages 65 and older comprise 57% of the older residents in Wake County and men 43%. Wake County is 78% Caucasian, 15% Black or African American, 3% Hispanic or Latino, and 4% of other races. Over 25% of older adults live alone or in group residences, and almost three-quarters of residents ages 65 and older own their homes.<sup>6</sup>

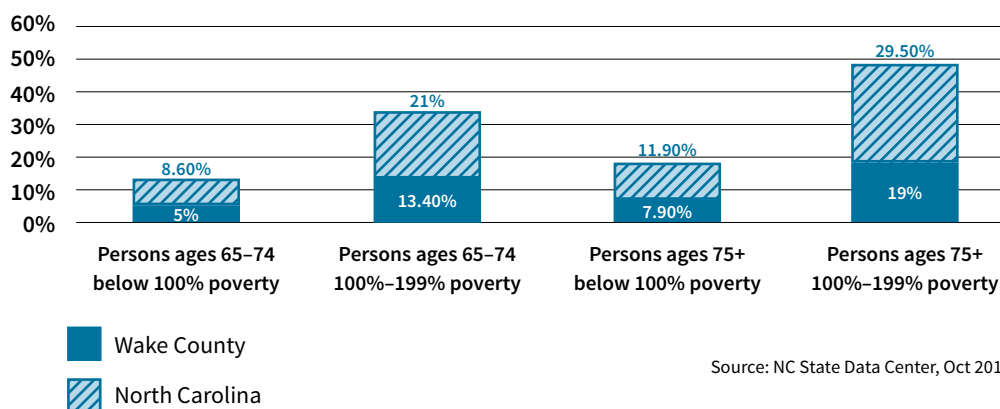
Wake County’s older adults have a higher level of education and income compared to North Carolina as a whole. In Wake County, 37% of older adults have a Bachelor’s degree or higher, as compared to 23% of the older adults in the state.<sup>6</sup>

In North Carolina and Wake County the percentage of veterans ages 65 and older is about the same at 20% of the population.

Sixty-nine percent of older adults in Wake County report living without disabilities; 14% live with one disability, and 17% have two or more types of disabilities.<sup>6</sup>

When you consider adults between the ages of 18 – 64, there are approximately 43,259 adults living in our County with at least one disability. These include disabilities in the areas of hearing, vision, cognition, ambulation, self-care, or independent living. 46% of these adults are males, compared to 54% females.

**Poverty rate increases with age**



## Wake Aging Profile 2014

Characteristics 2014 Adults Ages 65+	% of Older Adults in Wake County	% of Older Adults in North Carolina
<b>Demography</b>		
Men	43%	43%
Women	57%	57%
Veterans	20%	20%
Median age (years)	72.2	72.8
<b>Ethnicity/Race</b>		
White	78%	81%
Black or African American	15%	16%
Hispanic / Latino	3%	2%
Other racial / ethnic identity	4%	1%
<b>Poverty</b>		
Below 100% of the poverty level	6%	10%
100% – 149% poverty level	12%	8%
<b>Employment</b>		
Employed	16%	21%
<b>Education</b>		
Have less than a high school diploma	11%	19%
Have a Bachelor’s degree or higher	37%	23%
<b>Housing (2013 figures)</b>		
Live in their own home	78.20%	81.90%
Live alone	26.30%	27.30%
Live in group quarters	3.00%	3.40%
<b>Disability Status - noninstitutionalized</b>		
Living with any disability	30%	37%
No disability	70%	63%

Source: American Community Survey 2009–2013

In 2013, the percentage of Wake County residents ages 65 and older living 200% below the federal poverty level was approximately 22% compared to 35% across the State. The poverty rate in Wake County for older persons increases with age from 13% for those under age 75 to 19% for residents 75 and older.<sup>5</sup>

Using data such as that reported above, the Plan will focus on increasing accessibility and awareness of resources, programs and services to address the growing demands of our aging residents and persons with disabilities.

# Goals, Objectives, and Strategies



## Goal 1



Empower older adults, adults with disabilities, and their families to make informed decisions and easily access appropriate services and supports

### **Objective 1.1 Increase awareness and accessibility of information about resources, programs and services for older adults and adults with disabilities**

#### Strategies:

1.1.1: Partner with Workforce Center and libraries to host VA.gov information sessions.

1.1.2: Identify Information gaps in services, programs and resources.

1.1.3: Design and implement a Community Outreach Program to provide needed information to both urban and rural populations of older adults, adults with disabilities and their families or chosen caregivers.

1.1.4: Evaluate the role of the Wake County Community Resource Connections for Aging and Disabilities and promote a sustainability plan.

## Goal 2



Enable older adults and adults with disabilities to remain independent and age in the place of their choice with appropriate services and support

### **Objective 2.1 Promote information sharing about existing Housing services and supports**

#### Strategies:

2.1.1: Develop a plan to identify existing housing / home improvement resources in Wake County

2.1.2: Encourage resource entities to collaborate in sharing resource information

2.1.3: Include Housing / Home Improvement resource information in the Community Outreach program (Strategy 1.1.3.)

### **Objective 2.2 Encourage citizens to prepare for their aging years so that they are better able to age with choice in the community**

#### Strategy:

2.2.1: Design and promote an aging preparedness outreach effort to encourage citizens to plan for their retirement years and to challenge negative stereotypes of aging.

### **Objective 2.3. Empower older adults and individuals with disabilities to live more safely in their homes by reducing risks associated with falling, and increasing their knowledge and use of home safety programs**

#### Strategy:

2.3.1: Identify existing resources and promote to community partners across the aging and disability networks to increase participation in fall prevention programs

## Goal 3



### Empower older adults and adults with disabilities to attain and maintain optimal health

#### **Objective 3.1 Promote caregiver education and hands-on training opportunities in the personal care of older adults and adults with disabilities.**

##### Strategies:

3.1.1: Increase public awareness of adult day services, respite (including overnight respite) programs, and caregiving choices through a targeted effort by GOLD Coalition and other community agencies and individuals.

3.1.2: Partner with public and private agencies, businesses and educational institutions to identify and promote programs which provide caregivers with hands-on tools and training in the personal care of older adults or adults with disabilities. Ensure inclusion of diverse populations to reach caregivers and care receivers from different cultures, races, ethnicities, and those with limited English proficiency.

3.1.3: Promote efforts to help caregivers recognize the early warning signs of burnout and the potential repercussions of neglecting self-care.

3.1.4: Promote training and educational opportunities for persons caring for individuals with Alzheimer's Disease or other dementias.

**Objective 3.2 Promote current and developing resources, services, programs and initiatives in Wake County that will improve the health of older adults and adults with disabilities.**

**Strategies:**

3.2.1: Partner with community centers, nonprofit agencies, volunteer groups, local universities/colleges and faith communities to compile community resources that drive positive health outcomes.

3.2.2: Include Healthcare resource information in the community Outreach program (Strategy 1.1.3.) including outreach targeted to health clinics, physician practices, healthcare systems, insurance companies, community organizations and estate planners/financial planners

3.2.3: Advance efforts to expand capacity and enrollment in evidence-based health promotion programs throughout Wake County

3.2.4: Promote collaboration with organizations serving adults with mental illness to improve appropriate referrals and information sharing. Include information specific to supporting individuals with mental illness in the Community Outreach program. (Strategy 1.1.3)

**Objective 3.3 Promote efforts to increase access to care for older adults and adults with disabilities that will respect diverse cultures and needs.**

**Strategies:**

3.3.1: Identify barriers to accessing care that arise from cultural, societal, religious or other perspectives.

3.3.2: Solicit the involvement of organizations and individuals that advocate for the needs of diverse cultures and groups, to inform efforts to best serve those individuals.

## Goal 4



Protect the safety and rights of older adults and adults with disabilities to prevent their abuse, neglect and exploitation

### **Objective 4.1 Maximize collaboration, outreach, and training to prevent abuse, neglect, and exploitation of older and vulnerable adults.**

#### Strategies:

4.1.1: Conduct or promote semi-annual community education events countywide to raise awareness on preventing abuse and neglect of older adults and adults with disabilities, whether living in their own homes or in long-term care facilities.

4.1.2: Monitor and participate in the work of the NC Partnership to Address Adult Abuse, and expand World Elder Abuse Awareness Day activities locally.

4.1.3: Promote efforts of the NC Senior Consumer Fraud Task Force to educate seniors and individuals with disabilities about fraud, scams, and how to avoid becoming a victim by disseminating fraud alerts and information regarding Scam Jams, Shred-a-thons, and other outreach initiatives.

### **Objective 4.2 Strengthen emergency preparedness and response for older adults and adults with disabilities.**

#### Strategies:

4.2.1: Raise awareness of the need for individual emergency planning by promoting tools such as ReadyWake, and by partnering with media outlets, community organizations and public utilities.

4.2.2: Promote participation in Wake County's Alert Notification System by using the Aging and Disability network organizations, senior activity and retiree groups, and disability advocates to obtain new registrations. Identify and promote other successful programs, such as the Wake County EMS Advance Practice Paramedic program, through inclusion in the Community Outreach program.

(Strategy 1.1.3)



**Objective 4.3 Enhance the safety of persons with dementia who are at risk of wandering.**

**Strategies:**

4.3.1. Include information from existing programs, such as Silver Alert, Project Life-saver, and Citizens Well-Check in the Community Outreach Program (Strategy 1.1.3) Encourage community partners to use this information at their Wake County presentations, education conferences and health fairs.

4.3.2. Promote awareness of GPS enhanced and other safety technologies to identify affordable and wearable options for persons with dementia who at risk of wandering.

## Goal 5



Encourage accessible, inclusive communities where older adults and adults with disabilities can live, work and participate

**Objective 5.1 Ensure attention to diversity in Wake County aging, healthcare and disability programs, and in information sharing efforts.**

### Strategies:

5.1.1: Create opportunities through training and education to link older adults and adults with disabilities from diverse populations (i.e. minority, LGBT, refugee and immigrant groups, and faith communities) to community resources.

5.1.2: Solicit participation by organizations and individuals who advocate for diverse populations to identify and overcome barriers to access to community resources.

5.1.3: Promote training and educational opportunities for the aging and disability networks on the unique needs of aging adults with intellectual / developmental disabilities and/or their aging caregivers.

**Objective 5.2 Advocate for the development of a comprehensive Wake County Housing Plan inclusive of all municipalities represented within its geographic borders**

### Strategies:

5.2.1: Identify and share existing housing plans

5.2.2: Advocate for an update to the Wake County Housing Analysis

**Objective 5.3 Support, promote and educate older adults and adults with disabilities on transportation options. Promote alternative and volunteer transportation services and providers.**

**Strategies:**

5.3.1: Identify, assess and disseminate presently available transportation resources which inform and educate seniors and adults with disabilities on their options. Include the information in the Community Outreach program. (Strategy 1.1.3)

5.3.2: Create or support a Senior / Persons with Disabilities Transportation EXPO and “Ride the Bus Day” to provide information on how to use bus routes and integrate public options with private options.

5.3.3: Promote funding expansion and volunteer recruitment to support volunteer transportation programs.

5.3.4: Advocate for alternative and informal transportation providers, such as faith-based networks.

**Objective 5.4 Promote programs that support financial stability and independence for older adults and adults with disabilities.**

**Strategies:**

5.4.1: Expand and promote financial literacy programs for older adults and adults with disabilities.

5.4.2: Increase awareness of employment and training programs for older adults and adults with disabilities as part of the Community Outreach program. (Strategy 1.1.3)

5.4.3: Promote resources that assist older adults and adults with disabilities to access benefit information such as Social Security, Medicare Qualified Beneficiary, Social Security Disability and Supplemental Security Income.

## Goal 6



### Promote and monitor planning, accountability and responsiveness

**Objective 6.1: Advocate as the GOLD Coalition and as members of other organizations for legislative and other interests that support the well-being of older adults and adults with disabilities.**

#### Strategies:

6.1.1: Contact legislators as directed or agreed by GOLD Coalition membership.

6.1.2: Represent the GOLD Coalition at legislative advocacy days.

6.1.3: Seek to expand membership and participation on GOLD in the areas of services for adults with disabilities, including services for adults with mental illness.

**Objective 2: Monitor the implementation and progress of the Plan**

#### Strategy:

6.2.1: Identify action items and monitor progress toward Aging Plan goals as a standing agenda item at each GOLD Coalition meeting

6.2.2: Present wrap-up report annually to GOLD Coalition, documenting progress on plan strategies

# Conclusion

Since the first Wake County Aging Plan was developed in 2005, progress has certainly been made. However, many of the issues facing our community remain the same in 2015. A central concern throughout this document is ensuring that quality resources are available to older adults and adults with disabilities in Wake County.

We are faced with demographic realities which create an urgency to meet the needs of this rapidly and disproportionately growing segment of our population. The funding for programs and services for seniors and adults with disabilities is not keeping pace with the demand.

Wake County is a great place to live, work and thrive. It is the goal of the GOLD Coalition to further the priorities included in this Plan, and to positively impact the lives of thousands of our neighbors. Progress will only be made through a collective effort, and we invite you to join us in accomplishing our vision for the future for older adults and adults with disabilities in our community.

# GOLD Coalition

ARC of the Triangle  
Center for Volunteer Caregiving  
Consumer Education Services  
Meals on Wheels of Wake County  
NAMI / Wake County  
Region J Ombudsmen - TJAAA  
Resources for Seniors, Inc.  
Rex Home Services  
SAS Institute  
Senior Tarheel Legislature  
SHIP

Social Security Administration  
Southeastern Healthcare of North Carolina  
Transitions Guiding Lights  
Transitions Life Care  
Triangle J Area Agency on Aging  
Triangle Transit Authority  
Wake County Community Resource Connection  
Wake County Human Services  
Wake County Human Services / Transportation  
Wake County Southern Regional Center  
Wake County Veterans Services

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