

April 2021



# Livable Communities for All Coloradans

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**Note:** This is intended to be a living document and will be updated by the Lifelong Colorado steering committee as needed.



We have a tremendous quality of life here and are lucky to call Colorado our home. Colorado consistently ranks as one of the healthiest states in the country, with a life expectancy in the top 10 nationally. This reality, when combined with our state's shifting demographics, means our communities will grow proportionately older as we look towards the future.

In fact, Colorado is the second fastest aging state in the nation and our state demography office projects that Coloradans aged 60+ will outnumber those aged 18 and younger as soon as 2023. This demographic reality is a first and will become our new normal as generations of Coloradans continue to live long and productive lives. Now is not the time to balk at this emerging reality, but it is a time to plan, prepare, and invest in our communities, so that quality of life is retained across the entire lifespan.

The pandemic has highlighted the importance of individual and community resilience, and as we build Colorado back stronger we must do so in a way that supports Coloradans of all ages. Whether we look towards Larimer County, Boulder County, Colorado Springs, Las Animas, the Roaring Fork Valley, or Fruita, we have wonderful community-specific examples to build upon as we strive for livable, equitable, and healthy communities across our state.

Current and future generations of older Coloradans will provide economic, social, and civic value to our communities for decades to come. We have an opportunity to harness this value through the Lifelong Colorado initiative and embrace the idea that a Colorado well adapted for aging is one where all individuals can thrive - a Colorado for all.

Sincerely,

A handwritten signature in blue ink that reads "Jared Polis".

Governor Jared Polis

A handwritten signature in blue ink that reads "Dianne Primavera".

Lieutenant Governor Dianne Primavera

## Acknowledgements

Thank you to the many individuals who directly or indirectly contributed to this work product. The Lifelong Colorado plan focusing on health equity and livable communities is the result of years of work and many individuals and organizations contributing towards the common goal of communities being prepared to harness the potential and meet the demands of Colorado's growing aging population.

I want to acknowledge Wade Buchanan and Janice Blanchard for creating a pathway to move this work forward. I would also like to acknowledge Lieutenant Governor Dianne Primavera and former State Senator Larry Crowder for their foresight and legislative action resulting in the passage of HB 15-1033, creating the Strategic Action Planning Group on Aging. These current efforts rely heavily on the work laid out by the Colorado Commission on Aging and, subsequently, the Strategic Action Planning Group on Aging.

While it is true that the many individuals, groups, and organizations who have dedicated time to the intersections of population aging, public policy, and health and wellness have taken various avenues, we have all approached this work with a similar intent - supporting individuals, families, and communities as our demographics shift.

I sincerely appreciate the time of the Lifelong Colorado steering committee and their willingness to lend their expertise and perspective in developing this content and providing feedback in order to refine it:

- Bob Murphy, State Director, AARP Colorado
- Roberto Rey, Associate State Director, AARP Colorado
- Andy Hill, Director, Community Development Office, Department of Local Affairs
- Hayley Gleason, Director, Strategic Outcomes Division, Department of Health Care Policy and Financing
- Kara Harvey, Director, Aging and Adult Services Division, Department of Human Services
- Jayla Sanchez Warren, Director, Area Agency on Aging, Denver Regional Council of Governments
- Brad Calvert, Director, Regional Planning and Development, Denver Regional Council of Governments
- Derrick Webb, Regional Planner, Denver Regional Council of Governments
- Jim Collins, Mayor of Las Animas and Director, Lower Arkansas Valley Area Agency on Aging
- Gini Pingenot, Director, Legislative and External Affairs, Colorado Counties Inc.
- Claire Anderson, Executive Director, Innovations in Aging
- Lorye McLeod, Executive Director, Partnership for Age-Friendly Communities in Larimer County
- Chad Federwitz, Senior Services Manager, Pitkin County

## Executive Summary

“A growing aging population impacts every department in the State, from Transportation to Natural Resources.” - Office of State Planning and Budgeting, FY 2020-2021 Budget Request<sup>1</sup>

Colorado spends around \$2 billion annually - including state and federal funds - on a wide range of programs spread across seven departments to address aging issues and provide services to older Coloradans. These aging services are provided through Medicaid, regional Area Agencies on Aging, financial assistance through the old age pension, property tax relief, and protections against fraud, exploitation, and mistreatment. Each of these programs addresses a critical need and is administered by a skilled and dedicated workforce.

Taken together these programs and services do not reflect a clear strategy or set of priorities. Instead, they have been developed over decades to address and react tactically to specific challenges. Lifelong Colorado and the associated livable communities work represent an intentional and coordinated strategy to Colorado’s shifting demographics.

It is important to note that the work through Lifelong Colorado represents more than the focus on livable communities and local approaches. While fundamental, livable communities work does not capture the entirety of the work nor is it only the responsibility of local governments and communities to plan and prepare for Colorado’s aging population. The state has an integral role to play in supporting community investments and advancing broader policy goals. Lifelong Colorado is the logical continuation of the direction laid out by the Strategic Action Planning Group on Aging and Colorado Commission on Aging that involve both state and local strategies.

Livable community efforts are based on the idea that effective and sustainable solutions must include local coordination and involvement. State-level involvement is a critical piece of this puzzle, particularly in the role as a backbone organization providing direction, technical assistance, and organizational support, but community-based efforts and partnerships are equally critical. Local leaders and community-based organizations have an excellent understanding of their community strengths and gaps, and existing, or potential, regional partnerships. Ensuring local involvement in planning processes and implementation must be a priority as our communities age. Without a bottom-up approach, local acceptance, community resiliency, regional perspectives, and empowerment become difficult to ensure. Lifelong Colorado adopts this perspective and puts it into action.

When communities lack the necessary resources, older Coloradans often leave their communities of choice when barriers to remaining become too great - in many cases this restricts mobility, accelerates isolation, and impacts health and wellness. Keeping older Coloradans in their communities of choice is important. Coloradans aged 50+ contribute

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<sup>1</sup> Office of State Planning and Budgeting. FY 2020-2021 Budget Request, page 396.

[https://drive.google.com/file/d/1L1vXTycC0e7iQv-JNaOtaY\\_s2mHzppbP/view](https://drive.google.com/file/d/1L1vXTycC0e7iQv-JNaOtaY_s2mHzppbP/view)

roughly \$10 billion in annual state and local tax revenue and community-based care is far more preferable and affordable than residential care settings.<sup>2</sup>

The challenges associated with keeping older Coloradans in their communities requires bold, community-focused solutions. Lifelong Colorado embraces the diversity of communities across the state, acknowledges their interrelated issues, and encourages decision-making through a local and inclusive strategy.

Colorado's livable community efforts date back to 2012, when the Denver Regional Council of Governments first began their locally driven work. A few years later Larimer County and Colorado Springs got involved, receiving their age-friendly designation in 2016. Since then, state and local partners have continued to build connections and foster collaboration to advance these efforts, ultimately leading to Colorado becoming the third state in the country to become a member of AARP's Network of Age-Friendly States and Communities in 2018.

## Why Livable Communities and Why Now?

“By creating age-friendly communities in Jefferson County people of all ages and abilities will have the opportunity to reside in a safe and enriched environment from birth for their entire lives.” - Donna Mullins, Age-Friendly Jefferson County, Colorado

Colorado is one of the healthiest states in the nation and a wonderful place for adults to engage in encore careers, volunteerism, and various forms of value-driven engagement as they age. Colorado's success in supporting active, healthy lives coupled with advances in public health and medical care mean that more Coloradans are living into later life than ever before. This is good news - current and future generations of older Coloradans will provide economic, social, and civic value to our communities for decades to come.

At the same time, this dynamic demographic shift coupled with ongoing inequities requires an assessment of how our state and communities address a multitude of issues associated with later life. From 2020 to 2050, the Colorado State Demography Office estimates that adults aged 65+ will nearly double in population from roughly 876,000 to more than 1.6 million.

Without livable communities characterized by equitable access to reliable transportation, safe and affordable housing, economic opportunities in later life, social engagement, and access to health care, reducing inequities, improving health outcomes, supporting wellbeing, and reducing health care costs in later life are unattainable goals. Lifelong Colorado is the community-based vehicle for moving forward the development of an age-friendly state made up of livable communities.

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<sup>2</sup> AARP and The Economist. Longevity Economy Outlook: Colorado.

[https://www.aarp.org/content/dam/aarp/research/surveys\\_statistics/econ/2020/longevity-economy-outlook-colorado.doi.10.26419-2Fint.00044.006.pdf](https://www.aarp.org/content/dam/aarp/research/surveys_statistics/econ/2020/longevity-economy-outlook-colorado.doi.10.26419-2Fint.00044.006.pdf)

Keeping Coloradans healthy, engaged, and active participants of their communities in the hopes of preventing, or delaying, the onset of chronic conditions (e.g., diabetes, heart disease, lung cancer) is in the individuals and states best interests. Specifically targeting subsets of the population with health-related social needs (i.e., addressing social determinants of health) is critical to supporting healthy aging and reducing health disparities. It is important to note that most individuals with complex health needs will be able to effectively navigate their communities but increasing accessibility and minimizing functional impairments are valuable goals to strive towards.

### **Chronic Conditions by the Numbers in the United States**

80% of adults aged 65+ living with a chronic condition<sup>3</sup>

68% of adults aged 65+ have two or more chronic conditions<sup>4</sup>

86% of overall health care spending<sup>5</sup>

95% of overall health care spending among adults aged 65+<sup>6</sup>

1% of overall health care spending on prevention and public health<sup>7</sup>

Chronic conditions are the largest cost drivers for healthcare in the United States, as the costs associated with long-term services and supports are remarkably expensive. This is not an effort to overmedicalize livable community efforts, but it acknowledges the reality that health limitations and financial burdens associated with chronic conditions often result in individuals having to leave their community and, in some cases, signals the spending down of resources resulting in reliance on local and state funded services. By focusing on community-level social and economic conditions, we can proactively plan and intentionally develop healthy, equitable, and livable communities. This approach also acknowledges the reality that investing and empowering community-based organizations across Colorado is a critical component to reducing health disparities and supporting healthy aging across the lifespan.

Social determinants of health - sometimes referred to as health-related social needs - are described by the World Health Organization as the conditions in which people are born, grow, work, live and age, and the set of forces and systems shaping the conditions of daily life. **Put simply, equity across the lifespan improves outcomes in later life.** Once considered secondary influences on health, social and environmental factors have been found to initiate the onset of health problems and serve as a direct cause for a number of chronic conditions.<sup>8</sup> The eight domains of livability listed below are building blocks for a livable community and are based on social determinants of health.

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<sup>3</sup> National Council on Aging. Chronic Disease Self-Management Facts.

<https://www.ncoa.org/news/resources-for-reporters/get-the-facts/chronic-disease-facts/>

<sup>4</sup> *Ibid*

<sup>5</sup> National Association of Chronic Disease Directors. Chronic Disease Prevention: The Key to Improving Life and Healthcare.

[https://chronicdisease.org/resource/resmgr/website-2020/wp\\_chronicdiseaseprevention\\_.pdf](https://chronicdisease.org/resource/resmgr/website-2020/wp_chronicdiseaseprevention_.pdf)

<sup>6</sup> National Council on Aging. Chronic Disease Self-Management Facts.

<https://www.ncoa.org/news/resources-for-reporters/get-the-facts/chronic-disease-facts/>

<sup>7</sup> *Ibid*

<sup>8</sup> Cockerham, W., Hamby, B., and Oates, G. 2017. The Social Determinants of Chronic Disease. American Journal of Preventive Medicine, 52(1). <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5328595/>

## The Eight Domains of Livability



Over the past year, the COVID-19 pandemic has significantly impacted all Coloradans and all of our communities. At the same time, we know that the pandemic has been particularly difficult on black, indigenous, people of color, low wage earners, persons with disabilities, and older Coloradans. Social and economic inequities have been exacerbated over the past year and these inequities have a compounding effect on health outcomes over an individual's life. This compounding effect is most clear in later life where we see the gap between health span and life span develop, and we see trends related to chronic disease prevalence become clear.<sup>9</sup> Addressing health and social equity at the community-level was important pre-pandemic, and it should be central to policy planning as we transition to the new normal and retool our communities.

Lifelong Colorado embraces the idea that a Colorado well adapted for aging is one where all individuals can thrive - a **Colorado for all**. With regards to public policy, this involves supporting a high quality of life for Coloradans and their families by promoting health and wellbeing, reducing health disparities, fostering self-sufficiency, creating livable communities, and supporting Coloradans across the life course and into later life.

## Vision and Goals

“A Livable Community is one that has affordable and appropriate housing; adequate transportation and mobility options; accessible health and human services; and workforce, volunteer and community engagement opportunities that enable citizens to thrive across

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<sup>9</sup> Dutchen, S. 2019. From Life Span to Health Span. Harvard Medical School.  
<https://hms.harvard.edu/news/life-span-health-span>



their lifespan. These amenities help to maximize individual independence and quality of life while enhancing the economic, civic and social vitality of the community.” - National Association of Area Agencies on Aging<sup>10</sup>

Colorado is an expansive and diverse state with residents scattered across hundreds of cities and towns, hundreds of unincorporated communities, and two tribal reservations of the Ute Mountain Ute Tribe and Southern Ute Indian Tribe. Acknowledging the uniqueness of Colorado’s communities is at Lifelong Colorado’s core. Accordingly, our vision is an inclusive bottom-up approach. Local control is paramount in Colorado and there are few challenges related to aging and older Coloradans that aren’t already being effectively addressed by someone, somewhere in the state. Intentionally identifying these examples, optimizing opportunities for advancement, scaling their successes with nuanced local implementation, and building upon the state’s existing aging network is central to Lifelong Colorado’s approach.

In order to achieve this vision, Lifelong Colorado adopts the eight guiding goals laid out in 2016 by the Strategic Action Planning Group on Aging:

**Goal 1:** Older Coloradans will be able to live and fully participate in their communities of choice for as long as possible.

**Goal 2:** Older Coloradans will be able to stay engaged in the labor force and volunteer sector for as long as they want or need.

**Goal 3:** Older Coloradans and their families will be more financially secure and prepared to meet the challenges of aging.

**Goal 4:** Coloradans will be prepared for the challenges of caring for an aging loved-one and will be able to do so without endangering their own health or well-being or the health and well-being of the recipient of care.

**Goal 5:** There will be enough skilled, educated and trained workers, paid commensurate with their abilities and training, to meet the needs of the employers and industries serving Colorado’s growing older adult population.

**Goal 6:** Older Coloradans will stay healthier longer through access to quality and affordable person-centered care that aligns with their preferences and values.

**Goal 7:** All levels of government will meet their commitments to support older Coloradans and their families.

**Goal 8:** Colorado will empower and protect older adults from abuse, neglect, and exploitation.

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<sup>10</sup> National Association of Area Agencies on Aging. Best Practices for Livable Communities. <https://www.n4a.org/content.asp?contentid=421>

Led by the Lifelong Colorado committee, collaboration with a diverse set of partners will be central to integrating livable community strategies around the state. Building upon existing relationships is critical to success. Organizational capacity is a constant issue and this reality indicates the necessity of coalition building to expand community and regional capacity to identify strengths, gaps, and opportunities for problem solving. Empowering and investing in communities to take steps in-line with these goals will support all Coloradans.

## Voices from our Livable Communities

Livable communities encourage active lives and healthy aging by optimizing opportunities for intentional community development and coalition building. The built environment - our buildings, transportation systems, and housing stock - contribute to mobility, healthy behaviors, social participation, and independence, or conversely isolation, inactivity, and loneliness. Opportunities for social participation and value-driven work, either paid or unpaid, foster social connectedness and individual empowerment. Empowerment and self-worth are then reinforced through community efforts focused on equity, inclusion, and respect.

Whether we look towards Denver as the first community to embark on this work or to Las Animas as one of the most recent, livable community efforts are applicable to our largest and some of our smallest communities across the state. Below are the “voices” from a few of the leaders of these grassroots efforts around Colorado.

### *Boomer Bond Assessment - Denver Regional Council of Governments*

In 2011, the Denver Regional Council of Governments (DRCOG) launched the Boomer Bond initiative to help prepare local communities, and the Denver region, for the dramatic growth in the older adult population anticipated over future decades. There are two components to support this effort: the Boomer Bond assessment tool and the Boomer Bond resource directory.

With support from AARP Colorado, Tri-County Health Department, and stakeholders from around the Denver region, DRCOG developed the assessment tool to support local governments in their efforts to conduct an evaluation of how their community serves older adults in the areas of: housing, mobility and access, community living, and support services. The assessment tool not only helps document existing conditions, strengths and deficiencies; but also guides local governments as they identify short and long-term priorities and implementation strategies.

DRCOG staff have collaborated with more than 20 communities across the Denver metro area to complete community-wide assessments and identify policies and tools to further support healthy and successful aging in the Denver region.

### *Partnership for Age-Friendly Communities in Larimer County*

The Partnership for Age-Friendly Communities (PAFC) is a grassroots organization that started in 2013. PAFC's uniqueness is volunteerism with over 3300 volunteer hours logged in 2020. PAFC is an innovation hub that brings together stakeholders and community members from throughout the community to determine gaps in services for older adults and corresponding strategic sustainable solutions. As new issues affecting older adults are identified, teams of mostly older adults address the issue in small, short term projects. This takes advantage of the wisdom, time, and skills of these volunteers. At the same time, it provides important social and intellectual opportunities for the members of the community.

By working with community members and stakeholders, we can leverage these efforts. Over the past three years we have launched a Home-Share Program, contributed greatly to a One-Call/One Click rural transportation system, and created Senior Access Points, a resource hub for older adults and caregivers, just to name a few successes. An ongoing project to address social isolation has already created an online Catalog of Virtual Opportunities, Zoom Project to connect older adults to family and friends which included technical training, and an action plan for long term methods to identify and prevent social isolation. PAFC continues to leverage the expertise of older adults and those working in the aging arena to make Larimer County a more livable community for all of us as we age.

### *Age-Friendly Colorado Springs*

In 2015, Innovations in Aging Collaborative, along with Colorado Springs Mayor John Suthers, began the Age Friendly Colorado Springs initiative. Innovations in Aging Collaborative had just released *Aging in the Pikes Peak Region* (Adams, 2015), which profiled the demographic changes predicted in our community, and spurred us on to become a more livable community. From that report, we knew that the population of residents 65 and over was projected to grow by 179% by 2040, and in that same time period, the population of individuals 85 and over was projected to grow by 337%. We knew then it was the time to prepare to ensure our city was prepared to serve all aging residents over the coming years.

With the support of over 100 community members, experts and professionals, we created the Age Friendly Colorado Springs Report and Action Plan, which identified over 100 unique action items to be completed by the end of our five year cycle (2015-2020). We released the Age Friendly Colorado Springs Midway Report at the end of 2018, which detailed our progress "halfway" through the initiative, and the Age Friendly Colorado Springs Final Progress Report at the end of 2020. A few highlights from our first five years of work, were the creation of the Age Friendly Business Certification program at the Better Business Bureau of Southern Colorado, and the development of the Age Friendly Pikes Peak Portal with the Pikes Peak Area Agency on Aging - a comprehensive, user-friendly platform to assist older adults and their caregivers in finding the resources and services they need to grow older successfully in our community.

We know that we are not done, and more progress needs to be made, hence our final "Progress" Report. Innovations in Aging Collaborative, along with the City of Colorado Springs and El Paso County, will begin a second five-year cycle of age friendly work at the

end of 2021 (2021-2026). The Age Friendly Pikes Peak Initiative will extend into some of the more rural and far reaching areas of our community, allowing us to broaden our work to a larger scale, making the Pikes Peak Region a remarkable place to age!

### *Las Animas Age-Friendly Initiative*

As a newly elected local official in 2015, I assumed the seat of the Mayor with all the vigor and enthusiasm expected of a retired military leader and strategic thinker. The first thing I did was to gather the entire team together and accomplish what I then thought was an exceptional 4-year strategic plan. The plan was developed around 5 key focal points that would assess, address, and improve upon the work of the outgoing team. Focal areas included safety and security of citizens; infrastructure sustainment and improvement; economic development; fiscal responsibility and transparency; and finally, citizen engagement and involvement. In order to accomplish broad community support, we included the youth of the community in the plan by appointing a Youth Advisor to the City Council. We really thought we were about to change the dynamics of small town living in Southeastern Colorado.

Fast forward to 2018. Now we were 2 years into this “great plan” and I was offered the position as the Director of the Lower Arkansas Valley Area Agency on Aging. One of the first things on the plate for this new job was completing a listening tour and development of a 4 year plan for the Aging in Place processes for the 6 county region. I devoured every previous plan and study that had been completed and suddenly it hit me like a ton of bricks how bad I had missed the mark with my own City’s plan. While the youth engagement part of the plan was good, the reality was that I hadn’t even considered the fact that the majority of the community was actually AARP eligible by being over 50 years of age. Even more shocking was that a large majority of this demographic was actually over 60 years.

Immediately, after losing a lot of sleep over this significant miss, I decided that one of the best partners I could have was AARP and the Age Friendly Community initiative. Why reinvent the wheel when the wheel that AARP provided was very good and worked for our community? I applied for and was welcomed into the Age Friendly City family and the first step we took was to add a new Senior Advisor on Aging to our City Council. Additionally, I have ensured that at every opportunity I have to speak with locally elected officials I have invited them to become a member of the initiative. My goal is to have all 6 counties in Southeast Colorado become Age Friendly Communities as well as the major cities in the region to be Age Friendly Cities. By doing this, I will be assured that each team of Leaders will take Aging in Place as one of the key focal areas in all policy and implementation decisions they are considering. I am hoping to develop over the next year a cohort team of regional Senior Advisors to Local Leaders through the use of my own AAA advisory council.

While this opportunity to work together may be challenging, I truly believe the work of locally elected officials will be best served to all community members if we take the inclusive route by involving advisors from all walks of life.

### *Roaring Fork Valley Age-Friendly Collaborative*

Lifelong Colorado

For several years, Pitkin and Eagle Counties have worked together to provide robust offerings to older adults in the Roaring Fork Valley, where the two counties meet. Soon after each county became age-friendly communities, they connected with the town of Carbondale, which had also joined the age-friendly network, each recognized by AARP and the World Health Organization as an age-friendly community. This was done to foster collaboration on our efforts. The thought behind creating such a collaborative was to help generate ideas on new programs and policies and to help break down the silos of individual communities or counties tackling the work on their own. The Roaring Fork Age-Friendly Collaborative held its first meeting in January 2020. Thirty members make up the group and come from a variety of organizations that either serve older adults, or have an interest in furthering age-friendly work in their communities. Meetings are held every other month and are focused on one of the Eight Domains of Livability.

Since 2013, Eagle County Public Health, through its Healthy Aging Department, has been addressing the needs of the over-60 population by creating programs and improving systems in areas such as nutrition, transportation, social inclusion and educational opportunities. These programs assist residents in maintaining their health and independence and enable them to thrive as they grow older. As a result of the county's work and accomplishments, it was designated as an age-friendly community in 2017. The county's first Aging Well Plan came out in 2017, with a refreshed plan making its debut in January 2021.

In 2013-2014, Pitkin County's Senior Services Department and community partners undertook an endeavor to create a guiding plan for what it means to "age well" in the county. These efforts manifested to greater heights in 2017, when Pitkin County was recognized as an age-friendly community. In 2019/2020, Pitkin County reinvigorated the original plan so as to be aligned with AARP's Eight Domains of Livability. This plan will serve as a guide as the county strives for inclusion and excellence in its age-friendly work.

Carbondale became an age-friendly community in June 2019. This effort was spearheaded by the Carbondale Age-Friendly Community Initiative (CAFCI), an *ad hoc* caucus of Carbondale's older adults who work on their own and with other organizations to make Carbondale an even better place to live for people of all ages.

#### *Age-Friendly Work in Fruita and the Grand Valley*

After receiving its Age-Friendly Community status in 2017, the City of Fruita created the Livability Commission (an Advisory Board to City Council) to address and make recommendations to City Council pertaining to the Eight Domains of Livability. The commission currently consists of 13 members and a council liaison focused on improving and supporting healthy aging, improved quality of life, economic health, and an active lifestyle.

Over the past several years, the City of Fruita has been undergoing several important planning processes: updates to the Fruita Community Plan (Fruita in Motion) and the Parks, Health, Recreation, Open Space and Trails (PHROST) Master Plan. The community is also currently undergoing a code update. Throughout these important planning processes and

updates, the Fruita Livability Commission has performed a significant role by providing public engagement and feedback on the plans and has also identified several key goals that will not only supplement the Community's goals but that incorporate the principles of the Eight Domains of Livability.

Most recently, and based on the recent planning processes, the Livability Commission has completed Fruita's first Age-Friendly Action Plan and is focusing its future work on five of the Eight Domains: Housing, Multi-Modal Transportation, Communications, Diversity and Inclusion and Health Services and Education.

While the City of Fruita takes the lead locally with new livability efforts, Mesa County has several agencies that address many of the Eight Domains of Livability improving the well-being, satisfaction, and quality of life of all community members. The Area Agency on Aging (AAA) coordinates and offers services that help older adults in Mesa County remain in their home, aided by services such as Meals-on-Wheels, homemaker assistance, and other programs needed to make independent living a viable option. The AAA also contracts services with Hilltop's Aging and Disability Resources program and their evidence-based disease prevention and health promotion program. They also provide legal aid, ombudsman, nutrition, transportation, and State Health Insurance / Medicaid counseling programs.

Mesa County, the Cities of Fruita and Grand Junction, and the Town of Palisade, along with numerous other state and federal governments, and non-profits have been the backbone in the creation of the Riverfront Trail System. This recreational outdoor trail for walking, running, and biking lines the Colorado and Gunnison Rivers to create a continuous thirty-mile path between the City of Fruita, through the City of Grand Junction, to the Town of Palisade. And bike paths abound within the Grand Valley to include the Lunch Loop Bike Park (Grand Junction), Book Cliffs Mountain Biking Trails (Fruita), and the Kokopelli Trail (Loma) - making the entire area a recreation destination for all ages.

## Sustaining Livable Community Initiatives

Sustaining livable community efforts requires more than financial support - it involves establishing productive partnerships, building upon them, and regularly evaluating successes and setbacks along the way. The following principles and strategies build on the basics of organizational sustainability and draw on the experiences of hundreds of programs engaged in livable community efforts.<sup>11</sup> There is no inherent order in which these activities should occur, but they are intertwined.

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<sup>11</sup> Guiding Principles for the Sustainability of Age-Friendly Community Efforts. 2015. Grantmakers in Aging. [https://www.giaging.org/documents/160107\\_Sustainability\\_Principles.pdf](https://www.giaging.org/documents/160107_Sustainability_Principles.pdf)

Principle	Strategies
Build Public Will	<ol style="list-style-type: none"> <li>1) Identify and develop local organizations and individuals as champions</li> <li>2) Foster citizen commitment</li> <li>3) Address misconceptions of aging and later life</li> <li>4) Demonstrate early wins to highlight community benefits</li> <li>5) Develop a robust communication plan engaging traditional and non-traditional partners</li> <li>6) Celebrate community accomplishments</li> </ol>
Engage Across Sectors	<ol style="list-style-type: none"> <li>1) Connect with stakeholders across sectors</li> <li>2) Engage with organizations and initiatives that serve all ages and demographics</li> <li>3) Engage regional and metropolitan planning organizations and councils of governments</li> <li>4) Integrate age-friendly perspectives into local organizations and programs</li> <li>5) Be deliberately inclusive</li> </ol>
Utilize Metrics	<ol style="list-style-type: none"> <li>1) Identify reliable state metrics that capture regional and local trends</li> <li>2) Develop meaningful community metrics that demonstrate progress, or lack thereof based on the eight domains</li> <li>3) Regularly share updates on progress and areas for improvement</li> </ol>
Secure Resources	<ol style="list-style-type: none"> <li>1) Identify a “backbone” organization to drive efforts</li> <li>2) Seek diverse funding sources for start-up and demonstration projects</li> <li>3) Leverage partnerships for capacity building and non-cash resources</li> </ol>
Advance Public Policies, Practices, and Funding Opportunities	<ol style="list-style-type: none"> <li>1) Embed livable community goals and perspective into municipal, regional, state, and federal planning documents</li> <li>2) Be alert to sustainable and creative funding streams</li> </ol>

## The Path Forward

This plan serves as a proactive guiding framework for Colorado’s livable community work through the Lifelong Colorado initiative. It includes a robust set of values, goals, and strategies aimed at addressing social determinants of health through the eight domains of livability, bolstering community resiliency and personal independence, supporting health

equity, and keeping Coloradans in their communities of choice. It is important to note that this is a fluid process, and the paths taken along this journey will ebb and flow.

As our state and country transition out of the COVID-19 crisis, our communities will require intentional assessments and subsequent retooling in order to rebuild stronger and more resilient - this is the perfect opportunity to empower and mobilize our communities through Lifelong Colorado. This effort cannot survive in a silo. Livable communities rely on partnerships and coalitions of leaders ranging from government agencies, local elected officials, faith communities, non-profit organizations, academic institutions, local businesses, and self-directed volunteers.

As the saying goes, it takes a village.



## Appendix A - Lifelong Colorado Matrix and Timeline

**Note:** Target measures will be added once stimulus and agency goals are established to ensure alignment and overlap where appropriate.

Goals	Strategies	Action Steps	Years to Initiate	Key Partners	Indicators
1. Coloradans will be able to live and fully participate in their communities of choice as they age	1a. Implement community planning and design practices that support health equity, wellness, and mobility by addressing social determinants of health  1b. Increase access to community resources, programs, and services  1c. Increase supply of accessible and affordable housing options  1d. Increase access to reliable and affordable broadband internet options	1a. Revise local planning and zoning to foster greenspaces and parks, as well as mixed-use and transit-oriented development that support community access, physical activity, and social engagement	1a. Two years	1a. CDOT, CDPHE, DOLA, CCI, CCAT, and CML	1a. Track legislation, investments, and local zoning efforts related to mixed-use and transit-oriented development
		2a. Improve air quality, traffic congestion, and safety standards	2a. Three years	2a. CDPHE, CDOT, and metropolitan planning organizations	2a. Track efforts related to Greenhouse Gas Roadmap, Transportation Demand Management Plan, and the CDOT Pedestrian Handbook
		3a. Increase awareness of the mobility needs of an aging population and improve access to services and supportive technologies associated with mobility	3a. Two years	3a. CDOT, CASTA, metropolitan planning organizations, and DRMAC	3a. Expand outreach for transportation services and track integrated transit app efforts through CDOT
		4b. Increase service provider capacity and outreach around services at the community level	4b. Two years	4b. CDHS, CDPHE, and Colorado Association of Area Agencies on Aging	4b. Track regional service provider through Area Agency on Aging network and Health Services Corps
		5b. Increase existing funding and develop additional revenue streams for long-term services and supports	5b. Two years	5b. CDHS, CDPHE, and Colorado Association of Area Agencies on Aging	5b. Track appropriations for Area Agency on Aging network and investments through the American Rescue Plan associated with home and community based services
		6c. Expand efforts around affordable housing development	6c. One year	6c. DOLA, Volunteers of America, Habitat for Humanity, and Brother's Redevelopment	6c. Track affordable housing investments and regional focus
		7c. Increase access to options such as	7c. Three years	7c. DOLA, A Little	7c. Track local zoning efforts and home sharing rates through Sunshine Home Share and Silver Nest
			8d. Three years		
			9d. One year		

		<p>co-housing, accessory dwelling units, and village model concepts</p> <p>8d. Explore opportunities related to designating broadband as regulated utility service</p> <p>9d. Implement programs focused on digital literacy, technology training, and adoption of emerging broadband options</p>		<p>Help, Sunshine Home Share, Silver Nest, Volunteers of America, Habitat for Humanity, and Brother's Redevelopment</p> <p>8d. Colorado Broadband Office, OEDIT, DOLA, DORA, and CDOT</p> <p>9d. Office of the Future of Work, Colorado Broadband Office, and Older Adult Technology Services</p>	<p>8d. Track broadband related legislation</p> <p>9d. Track emerging technology and broadband related training efforts</p>
<p>2. Coloradans will be able to stay engaged in the workforce and volunteer sectors as they age</p>	<p>2a. Increase workforce, business development, and volunteer opportunities for older Coloradans</p> <p>2b. Improve institutional readiness and willingness to leverage the skills, abilities, and experiences of older adults</p> <p>2c. Increase workplace protections for older workers</p>	<p>1a. Integrate population aging and demographic shifts into state-level workforce development planning processes</p> <p>2a. Develop and implement retraining programs for adults shifting careers (e.g., digital literacy/technology training)</p> <p>3b. Increase awareness across sectors of the value of age-friendly workplace strategies/intergenerational workplaces and caregiver-friendly policies</p> <p>4c. Strengthen age discrimination laws</p>	<p>1a. One year</p> <p>2a. Two years</p> <p>3b. One year</p> <p>4c. Two years</p>	<p>1a. CDLE, OEDIT, and Colorado Workforce Development Council</p> <p>2a. CDLE, Community College system, and Colorado workforce centers</p> <p>3b. CDLE, Colorado Center for Aging, AARP, and Changing the Narrative</p> <p>4c. DORA, Judicial Department, and Bell Policy Center</p>	<p>1a. Track Office of the Future of Work and CWDC Talent Pipeline Report efforts</p> <p>2a. Track Office of the Future of Work digital literacy and inclusion efforts</p> <p>3b. Collect information from Colorado Center for Aging and Changing the Narrative around annual educational sessions held</p> <p>4c. Track workplace discrimination related legislation</p>

<p>3. Coloradans will be financially prepared to meet the challenges of aging</p>	<p>3a. Increase access to and use of retirement savings plans for all Coloradans</p> <p>3b. Address rising health care costs</p>	<p>1a. Implement Secure Savings Plan and increase awareness around the program</p> <p>2a. Coordinate across sectors to increase awareness around the importance of saving for retirement and costs associated with later life</p> <p>3b. Implement policies that lower health insurance and prescription drug costs</p>	<p>1a. Two years</p> <p>2a. Two years</p> <p>3b. One to three years</p>	<p>1a. Treasury Department, AARP, and Bell Policy Center</p> <p>2a. Treasury Department</p> <p>3b. HCPF, Office of Saving People Money on Health Care, and Colorado Business Group on Health</p>	<p>1a. Track Secure Savings program implementation</p> <p>2a. Track outreach efforts related to Secure Savings program, retirement security, and financial literacy</p> <p>3b. Track efforts related to public option, prescription drug affordability board, and health care purchasing alliance</p>
<p>4. Coloradans will be prepared for the challenges of caring for an aging loved one without endangering their own health or wellbeing</p>	<p>4a. Support ability of family and friends to provide adequate person-centered care without harming earning potential</p> <p>4b. Increase access to respite services and resources that support family caregiving</p>	<p>1a. Increase awareness around the importance of financial, health, and end-of-life planning with family members and/or friends, as well as among employers</p> <p>2a. Implement paid family leave benefit</p> <p>3b. Expand funding to respite programs and target at-risk caregivers</p>	<p>1a. One year</p> <p>2a. Three years</p> <p>3b. Two years</p>	<p>1a. CDHS, HCPF, CDPHE, Treasury, Center for Improving Value in Health Care, CU-Anschutz, and Colorado Gerontological Society</p> <p>2a. Governor's Office and CDLE</p> <p>3b. CDHS, HCPF, Colorado Respite Coalition, and Alzheimer's Association</p>	<p>1a. Track advance care planning and palliative care efforts through CDPHE, Center for Improving Value in Health Care, and CU-Anschutz</p> <p>2a. Track implementation of paid family medical leave state benefit</p> <p>3b. Track funding and programs through Colorado Respite Coalition and efforts recommended by CDPHE through Alzheimer's disease and dementia work</p>
<p>5. Colorado will have enough skilled, educated and trained workers to meet the needs of employers and industries to meet the needs of older adults</p>	<p>5a. Develop Colorado's workforce to meet the demands of population aging across the continuum of non-medical and medical service providers</p>	<p>1a. Increase awareness of career opportunities in industries related to population aging</p> <p>2a. Identify regional gaps in non-medical and medical service provision</p> <p>3a. Improve access to education and training to support the readiness of</p>	<p>1a. Two years</p> <p>2a. One year</p> <p>3a. One year</p>	<p>1a. CDHE, CDE, CDLE, and Colorado Workforce Development Council</p> <p>2a. CDHS, HCPF, CDOT, and Colorado Association of Area Agencies on Aging</p>	<p>1a. Track health care related top jobs as defined by the Colorado Workforce Development Council</p> <p>2a. Track CDHS service provider data for the Area Agency on Aging network and transportation provider data through CDOT</p> <p>3a. Track direct care workforce collaborative progress</p>

		direct care workers		3a. HCPF, CDLE, Home Care Association of Colorado, Colorado Health Care Association, and Leading Age Colorado	
6. Coloradans will stay healthier longer through access to reliable information, affordable person-centered care, and healthy environments	<p>6a. Improve health equity and access to non-medical and medical services</p> <p>6b. Develop and distribute resources that support informed health care decision making</p> <p>6c. Develop programs, built environments, and behaviors known to support wellness and health outcomes</p>	<p>1a. Implement policies and programs that proactively address social determinants of health and resulting disparities</p> <p>2a. Increase access to geriatric health care providers and non-medical service providers</p> <p>3a. Align medical care and end-of-life care with patient preferences and values</p> <p>4b. Increase use and evaluation of evidence-based programs that support aging in the community</p> <p>5b. Develop built environments and promote lifestyles that support physical exercise, mental health, nutrition, oral health, and social interaction</p>	<p>1a. Two years</p> <p>2a. Two years</p> <p>3a. Three years</p> <p>4b. Three years</p> <p>5b. Three years</p>	<p>1a. CDPHE, CDHS, HCPF, CCI, CML, Area Agencies on Aging, and local public health agencies</p> <p>2a. CDPHE, CDLE, CDHE, CDHS, hospital systems, and Area Agencies on Aging</p> <p>3a. CDHPE, CDHS, HCPF, Center for Improving Value in Health Care, Colorado Gerontological Society, and hospital systems</p> <p>4b. CDHS, HCPF, CDPHE, and Colorado Coalition for Aging Research and Education</p> <p>5b. CDPHE, CDOT, CDHS, HCPF, DOLA, Area Agencies on Aging, and AARP Colorado</p>	<p>1a. Track health equity and health disparity work through CDPHE, CDHS, and HCPF</p> <p>2a. Track regional service provider through Area Agency on Aging network, advanced practice providers through the Health Services Corps at CDPHE, and health care Top Jobs as identified by the Colorado Workforce Development Council</p> <p>3a. Track implementation of advance directive registry and palliative care roadmap work through CDPHE</p> <p>4b. Track pilot programs, demonstration projects, and emerging technologies implemented by CDHS, HCPF, and CDPHE</p> <p>5b. Track affordable housing development through DOLA and built environment public health efforts through CDPHE</p>

<p>7. All levels of government will meet their commitments to support older Coloradans and their families</p>	<p>7a. Create and maintain mechanisms for improved coordination and implementation of aging efforts across all sectors and levels of government</p> <p>7b. Address structural imbalances between state revenues and expenditures in a manner that acknowledges Colorado's shifting demographics without undermining support for other state priorities</p> <p>7c. State and local governments will coordinate public resources through collaborative, innovative, and diverse revenue and financing models, including public-private partnerships</p>	<p>1a. Create a multi-agency leadership team to share updates on aging efforts, identify overlaps, and integrate work when appropriate</p> <p>2a. Ensure a population aging-lens is applied across programs and services at the state and local levels</p> <p>3b. Support the use of evidence-based programs and services and improve data collections among state and local agencies to assist in funding decision making</p> <p>4c. Support the pursuit of competitive federal grant dollars at the state and local levels</p> <p>5c. Evaluate, and if appropriate, pursue emerging financing mechanisms for long-term services and supports</p>	<p>1a. One year</p> <p>2a. One year</p> <p>3b. Three years</p> <p>4c. One year</p> <p>5c. Five years</p>	<p>1a. Governor's Office, CDPHE, CDHS, HCPF, CDOT, DOLA, and CDLE</p> <p>2a. Governor's Office, CDPHE, CDHS, HCPF, CDOT, DOLA, and CDLE</p> <p>3b. Governor's Office, CDHS, CDPHE, and HCPF</p> <p>4c. Governor's Office, CDPHE, CDHS, HCPF, CDOT, DOLA, and CDLE</p> <p>5c. Governor's Office, CDHS, HCPF, DOI, Area Agencies on Aging, and health care and hospital systems</p>	<p>1a. Convene cross agency group consisting of representatives from DOLA, CDOT, CDHS, HCPF, and CDLE</p> <p>2a. Track efforts across key state agencies and integrate key stakeholders/perspectives as appropriate</p> <p>3b. Track pilot programs, demonstration projects, and emerging technologies implemented by CDHS, HCPF, and CDPHE, and develop community profiles with key health-related metrics</p> <p>4c. Track relevant federal grants awarded to state agencies</p> <p>5c. Engage DOI, HCPF, and legislature on long-term services and support trust actuarial analysis</p>
<p>8. Older Coloradans will be empowered and protected from mistreatment and exploitation</p>	<p>8a. Increase awareness of elder abuse, neglect, and mistreatment and reporting processes</p> <p>8b. Support proactive planning and prevention services for Adult Protective Services</p> <p>8c. Provide support for family caregivers aimed at reducing stress and preventing neglect</p>	<p>1a. Support funding for outreach and awareness campaign of Area Agency on Aging and Adult Protective Services</p> <p>2b. Develop tiered approach to Adult Protective Services and explore preventative services</p> <p>3c. Expand respite services and target caregivers based on need and caregiving circumstances</p>	<p>1a. Three years</p> <p>2b. One year</p> <p>3c. Three years</p>	<p>1a. CDHS and Area Agencies on Aging</p> <p>2b. CDHS and local governments</p> <p>3c. CDHS, HCPF, Colorado Respite Coalition, and Alzheimer's Association</p>	<p>1a. Track CDHS progress around Adult Protective Services and explore public service announcements around the Area Agency on Aging network</p> <p>2b. Track progress related to Adult Protective Services differential response pilot program (if passed into law)</p> <p>3c. Track Colorado Respite Coalition and Alzheimer's Association respite program utilization</p>