

Results of Health & Wellness Prioritization Survey

Problem Area RANKINGS									
Objective	1st place	2nd place	3rd place	4th place	5th place	6th place	7th place	8th place	TOTAL WEIGHTED
Healthy Lifestyles & Prevention	7	5	1	0	3	1	0	2	114
Accessing Appropriate Care	0	5	5	4	2	0	1	2	97
Workforce Training	1	4	1	5	1	3	4	0	88
Mental Health & Substance Abuse Services	1	2	3	4	3	4	1	1	87
Long Term Care Programs & Services	4	2	0	2	3	2	4	2	84
EMS & Falls Prevention	2	0	4	2	4	4	1	2	82
Marketing & Information Sharing	4	0	3	2	1	2	3	4	80
Spiritual Counseling & Chaplaincy	0	1	2	0	2	3	5	6	52

EMS & FALLS PREVENTION STRATEGIES						
Strategy	1st place	2nd place	3rd place	4th place	5th place	TOTAL WEIGHTED
2. Collaborate with Orange County EMS to educate caretakers and citizens on how to manage fall events and when it is necessary to call Emergency Services	7	2	3	3	2	60
4. Work with Orange County EMS to establish a response protocol for fall events in order to more appropriately distribute EMS resources.	4	4	6	2	1	59
3. Encourage Orange County EMS to develop and disseminate appropriate protocols for EMS workers responding to calls for aging adults.	2	7	3	3	2	55
1. Collaborate with Orange County EMS to prevent repeat falls by a) leaving packets of information with individuals who fall and b) providing DVDs to fall victims, their families, or organizations for training.	3	3	1	2	8	42
5. Partner with Orange County EMS and managers of Long Term Care facilities to prevent reliance on full EMS and ambulance services for emerging medical problems.	1	1	4	7	4	39

Results of Health & Wellness Prioritization Survey

WELLNESS & PREVENTION STRATEGIES													
Strategy	1st place	2nd place	3rd place	4th place	5th place	6th place	7th place	8th place	9th place	10th place	11th place	12th place	TOTAL WEIGHTED
1. Encourage other organizations like recreation departments, churches, and community centers to promote wellness and host exercise classes	5	4	2	1	2	1	0	1	0	0	0	1	162
2. Train volunteers to offer evidence-based programs like “A Matter of Balance” and “Living Healthy” at least every two months at the Sr. Centers, at Senior Living environments, at churches, etc	2	5	2	0	1	2	0	2	0	1	0	0	134
9. Develop a health marketing campaign to encourage Orange County citizens aged 50 and above to exercise for wellness and disease prevention.	5	2	0	2	2	0	0	0	0	1	1	2	123
7. Use geo-mapping strategies to understand where older adults are concentrated in the county and then offer programs based on those findings.	2	0	3	4	1	1	1	1	0	0	1	1	119
3. Ensure that older adults with physical or mental problems have access to appropriate exercise classes	0	1	2	2	1	1	2	1	3	0	1	1	96
11. Encourage the inclusion of social workers and case managers in primary medical care.	0	1	2	1	0	0	4	3	2	1	1	0	92
5. Advertise lectures, continuing education classes, and resources offered at the Senior Centers, libraries, etc.	1	0	1	2	2	1	1	3	0	1	1	2	91
10. Educate older adults on the importance of continuity with a primary care provider	1	1	2	0	0	3	0	0	4	3	1	0	91
6. The Department on Aging will develop relationships with faith-based community in hopes of coordinating education at their sites.	0	0	1	1	4	1	3	1	1	0	2	1	90
12. Coordinate transportation for older adults to attend lectures/continuing education classes	1	0	0	0	2	2	1	1	3	4	1	0	79
8. Survey older adults to determine if continuing education lectures and classes should be available	0	0	0	1	0	2	1	1	3	2	2	3	59

Results of Health & Wellness Prioritization Survey

online.														
4. Create a pilot water aerobics program for physically and cognitively challenged seniors.	0	1	0	0	0	1	2	1	0	2	2	6	51	

SPIRITUAL COUNSELING & CHAPLAINCY					
Strategy	1st place	2nd place	3rd place	4th place	TOTAL WEIGHTED
1. Provide trainings to religious leaders in providing spiritual counseling to caregivers and older adults. This is especially a need for older adults who have dementia or individuals caring for older adults with dementia.	7	3	3	1	44
2. Encourage faith-based groups to create chaplaincy services within their own organizations, using a lay leader model such as “Stephens Ministry” to meet spiritual needs for counseling	3	3	5	3	34
4. Provide older adults and caregivers access to a part-time, secular chaplain at Senior Centers.	3	5	0	7	34
3. At the Department on Aging, offer training opportunities for lay chaplain leaders by partnering with a) UNC and Duke Chaplaincy Departments and b) county Hospice services.	2	3	6	3	32

ACCESSING APPROPRIATE CARE STRATEGIES									
Strategy	1st place	2nd place	3rd place	4th place	5th place	6th place	7th place	8th place	TOTAL WEIGHTED
7. Encourage a hospital discharge program consistent across the state, involving a nurse practitioner or other authorized professional checking on patients after discharge and scheduling a check-up meeting (usually sponsored by a hospital).	5	5	2	2	0	1	1	0	102
1. Train volunteers to provide health insurance and benefits information for all older adults and caretakers, including better marketing of State Health Insurance Information Program (SHIIP) and Part D education.	2	4	2	4	0	2	0	1	83
3. Research the model of primary medical homes to understand the benefits of this medical care model for older adults.	2	2	1	2	3	1	3	1	68

Results of Health & Wellness Prioritization Survey

4. Advocate on the state and national level to protect middle class individuals who don't qualify for government aid but can't afford health insurance. Solutions include offering health insurance on sliding scale	2	1	3	1	2	2	4	0	68
8. Encourage the Department on Aging to use Home & Community Based Block Grant Funding toward "Consumer Directed Care" initiatives, allowing older adults to choose their own caretakers or service providers and pay them for their services.	3	1	2	1	3	1	1	3	68
6. Encourage privately owned pharmacies to advance their role in health by offering more walk-in clinic services (modeled after the Kerr "Asheville Project").	1	0	4	1	4	1	1	3	61
5. Advocate and raise awareness for Medicare at all levels of government to prevent its termination in 12 years.	1	1	0	4	0	5	2	2	56
2. Develop directory of alternative medicine providers	0	1	1	1	3	2	2	5	45

WORKFORCE TRAINING STRATEGIES									
Strategy	1st place	2nd place	3rd place	4th place	5th place	6th place	7th place	8th place	TOTAL WEIGHTED
3. Provide continuing education credits to health professionals (nurses, pharmacists, physicians, social workers, and physician assistants) related to aging issues like end-of-life care, how to work with patients with dementia, etc. Resources include a) training retired physicians and nurses to train other practicing healthcare providers b) partner with Area Health Education Centers (AHEC) to put on trainings	10	4	0	0	1	0	0	0	112
4. Disseminate aging program and services information to health professionals in the county, especially primary care physicians	1	3	4	5	0	1	0	0	81
1. Obtain access to facilities to train professionals of different disciplines on aging issues. Examples include Durham Tech's Orange County Campus and Orange County Senior Centers	1	2	4	1	4	1	1	0	72
5. Encourage professional networking among those who work with older adults (example: Chapel Hill and Durham Eldercare Resources)	0	2	1	2	1	6	2	0	56
2. Promote or market Certificates in Aging to students at UNC	1	0	3	3	1	1	1	4	54
8. Train physicians to acknowledge and prevent many older adults' fear of telling physicians about falls (thinking it will result in the physician's recommendation to move out of his/her home).	0	2	0	2	4	2	2	2	52

Results of Health & Wellness Prioritization Survey

7. Provide training to lay helpers in support of the “Consumer Directed Care” initiative, allowing people to choose who they want to provide services, when they want services provided, etc. (Workforce training for these lay helpers will be different than training professionals.).	1	1	1	1	1	2	5	2	48
6. Have health care providers undergo LGBT Center’s sensitivity training hosted by SAGE.	1	0	1	0	2	2	4	4	40

MENTAL HEALTH & SUBSTANCE ABUSE							
Strategy	1st place	2nd place	3rd place	4th place	5th place	6th place	TOTAL WEIGHTED
4. Advocate for making depression screening a regular procedure at primary care visits for older adults	5	3	4	0	2	0	65
3. Expand free mental health and substance abuse services at the Orange County Senior Centers (i.e. screenings, counseling, and referral services)	3	2	4	3	2	0	57
6. Educate the community on the importance of identifying sadness, mental health, and substance abuse issues such as a) misuse and abuse of prescription drugs b) depression and anxiety c) alcohol use and addictions d) drug use and abuse e) dementia	4	1	2	6	0	1	56
5. Make dementia screening a regular procedure at primary care visits for older adults.	2	6	2	0	1	3	55
1. Maintain a list of Licensed Clinical Social Workers and licensed counselors who can provide fee-for-service, insured, Medicaid and Medicare-reimbursed counseling to older adults with mental health and substance abuse issues and their families	0	2	3	2	5	2	40
2. Provide all counseling and psychiatric providers in the county with a template letter stating “not a Medicare provider” so that they can still bill older adults’ secondary insurance.	2	1	0	1	3	7	33

LTC PROGRAMS & SERVICES STRATEGIES

Results of Health & Wellness Prioritization Survey

Strategy	1st place	2nd place	3rd place	4th place	5th place	6th place	7th place	8th place	TOTAL WEIGHTED
3. Develop a partnership among the leaders of Orange County Long Term Care facilities to encourage a model of patient-centered care within Long Term Care facilities	6	0	3	2	3	0	0	0	88
2. Encourage or provide evidenced-based and enriching activities that meet individual needs, provide a purpose in life and cognitive stimulation for Orange County residents living in long-term care facilities by a) offering continuing education and exercise classes at Long Term Care facilities and b) providing transportation to residents to Senior Centers and other community events and programs.	3	3	3	1	2	0	1	1	79
4. Support the development of palliative care and end of life care for residents living in long term care facilities, families, and staff, including a formalized program for bereavement.	2	2	1	4	1	0	2	2	66
6. Promote the identification of mental health needs and encourage the provision of mental health services for residents in LTC facilities by a) building connections with the mental health community b) providing enhanced Alzheimer’s Care and interventions for depression	1	2	0	3	2	3	1	1	57
5. Promote the training or hiring of interdisciplinary professionals working in LTC facilities that specialize in gerontology by a) developing an aging certification program b) promoting facility-based mote mentor programs.	1	2	1	2	1	2	2	3	55
7. Provide programs to support <u>family</u> caregivers of residents living in long-term care facilities by a) setting up onsite support groups	0	2	1	2	0	7	1	1	54
1. Promote a home-like dining experience in Long Term Care facilities by a) encouraging financially-feasible ways to purchase fresh fruits and vegetables b) allowing residents more choice in mealtime foods c) having more homelike dining service.	0	2	4	0	1	2	1	3	53
8. Provide programs to support <u>facility</u> caregivers of residents living in long-term care facilities	1	1	1	0	4	1	4	2	50

MARKETING & INFO SHARING STRATEGIES

Results of Health & Wellness Prioritization Survey

Strategy	1st place	2nd place	3rd place	4th place	5th place	6th place	7th place	8th place	9th place	10th place	11th place	TOTAL WEIGHTED
2. Create a new “Community Relations” position at the Department on Aging to carry out solutions 3-9.	10	0	0	0	0	0	0	0	1	1	1	116
1. Offer workshops at the Senior Center on health and wellness information available in the community	1	3	1	2	1	1	0	1	0	2	0	87
7. Engage churches and religious communities so that they can disseminate health and wellness information to members.	1	2	2	1	2	1	1	0	0	0	1	83
10. Install information kiosks in locations that seniors frequent. This could be funded by the private sector (i.e. Harris Teeter, CVS, UNC Hospitals, etc).	0	0	2	3	3	1	0	0	2	1	0	77
9. Create a corps of volunteers, managed by a volunteer director, that will make a concerted effort to speak at various churches, organizations, etc. throughout the county about the services available in the county, the cost of those services, etc.	1	1	0	2	0	3	2	2	1	0	0	76
3. Create a mobile Health and Wellness information table/event, go around the county to different events/places (i.e. churches) that seniors frequent	0	1	3	1	1	1	1	1	2	1	0	75
5. Involve neighborhoods to understand how they view health and how to disseminate information	0	1	1	1	1	1	2	2	2	0	1	65
4. Train aging liaisons (EMS, police, sheriff, MDs, etc.) on services available. Create mechanism to update/train them periodically	0	1	0	2	1	2	1	1	2	2	0	64
11. Promote resources and support groups for individuals that are underserved and marginalized (examples: Piedmont services, LGBT center in Raleigh)	0	3	0	0	0	2	1	0	1	2	3	57
8. Increase networking opportunities for professionals who work in Health and Wellness in the County	0	0	3	0	1	0	1	2	1	1	3	55

Results of Health & Wellness Prioritization Survey

6. Create a television or radio marketing campaign to inform older adults and caretakers where they can access information	0	0	0	0	2	0	3	3	0	2	2	47
--	---	---	---	---	---	---	---	---	---	---	---	-----------