



Utah for the Ages

A Master Plan for Aging in Utah

Prepared by the
Utah Commission on Aging

Prepared for
Governor of Utah
Utah Legislature
All Utah Adults



Utahaging.org
Utah Commission on Aging



Updated January 1, 2025

The Purpose - Introduction

The Utah Commission on Aging (UCOA) collaborators and partners welcome you to “Utah for the Ages”, a master plan for aging (MPA) across the adult lifespan. This road map helps guide state and local governments, agencies, public and private businesses, and the general public to prepare and successfully navigate the challenges and opportunities of aging in a shifting demography.

The MPA informs policy, programs, and funding decisions that will empower Utahns to live their best lives by applying innovative and informed solutions to meet our individual and collective needs as we age. It is a dynamic document that will measure impact utilizing key indicators of core long and short-term social change goals. Annual reporting of key indicators is published each fiscal year and available to all.

Utah’s MPA incorporates guidelines provided by the Center for Health Care Strategies (CHCS) including state leadership commitment, rational data-driven analysis, comprehensive scope of issues, stakeholder inclusiveness, and measurable outcomes. The selected social impact priorities are a result of collaborative input and current research. Recommended strategies build upon current program successes and learnings, address critical needs and gaps, and identify future opportunities for systematic savings and elimination of redundancies to transform the way aging is experienced in Utah.



Utah for the Ages is for older adults living through the second half of life, for younger adults preparing for their futures, and for communities influencing our lives: families, friends, neighbors, co-workers, and the professionals who assist along the way.

We invite everyone to visit the Utah for the Ages website and other resources at www.utahaging.org to better connect you to information and resources.

The Utah MPA calls on all Utahns engaged in policy, academia, and community services to build a Utah for all Ages. To create and promote partnerships that promote healthy and equitable aging, reduce social isolation, improve financial security, support care partners and resource coordination, encourage advance care planning, defeat ageism, build age-friendly communities, and embrace technology and innovation.

Rob Ence, Executive Director

Darlene Curley, Chair



Purpose

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We Envision a Future Where Every Older Adult in Utah can:

1. Lives a life of opportunity and purpose
2. Share an age-friendly environment
3. Shelters in affordable and adaptable housing
4. Enjoys financial sufficiency
5. Access to quality health care
6. Find employment based on merit
7. Receive compassionate care
8. Be free of social isolation
9. Make independent choices
10. Understand and utilize technology safely

The six core social impact goals of the master plan will help guide the successful fulfillment of these envisioned values.





State of Utah

SPENCER J. COX
Governor

DEIDRE M. HENDERSON
Lieutenant Governor

Office of the Governor

Feb. 5, 2024

Utah's population will soon exceed 4 million people. People who are 65 and older make up about 15% of the total population, and in the near future, are expected to represent one in every five residents. This demographic trend impacts our households, culture, economy, environment, and increasing needs of older adults.

Utah benefits from the wisdom and contributions of our older adults, and we recognize that the next generation will be more diverse, live longer, and desire to make meaningful contributions to our great state. If we don't have a meaningful plan for an aging population, we expect to see an increase in the struggles for meaningful employment, affordable housing, food and financial security, and access to quality health care.

These trends are not new, but without deliberate planning, the challenges will accelerate and overshadow the opportunities that should be available to everyone. The purpose of the strategic plan for intelligent aging is to make sure Utahns are engaged and valued across the spectrum of aging into older adulthood.

S.B. 104 Master Plan For Aging was signed into law March 15, 2023, and directs the Utah Commission on Aging to periodically publish a plan that will guide the aging experience over the future decades and make sure all Utahns are able to navigate the challenges and opportunities of older adulthood.

This is a call to action for state and local governments, private and public entities, and individuals to engage innovatively, proactively, and collaboratively to create a Utah where people of all ages can thrive and age with the grace and dignity they deserve. This plan helps lead the way.

Sincerely,

A handwritten signature in black ink, appearing to read "Spencer J. Cox".

Spencer J. Cox
Governor

We would like to thank the Utah Commission on Aging for its collaboration and guidance in drafting SB104 during the 2023 legislative session which requires the Utah Commission on Aging to produce and maintain a Master Plan for Aging (MPA) for Utah. This bill passed out of the Senate Health and Human Services Committee and both houses with overwhelming support. The bill was signed into law by Governor Spencer Cox on March 15, 2023.

As legislative sponsors of the bill, we are familiar with and supportive of the work and mission of UCOA and are committed to the success of the plan development. This statutory amendment to the UCOA code, outlines the creation and delivery of a 10-year rolling master plan for aging for our state with periodic short term objectives. It is forward looking with strategies to address our growing older adult population. The MPA draws upon existing resources, evaluates current practices, and identifies innovative approaches to address projected gaps in services provided to our aging population and eliminates redundancies and inefficiencies.

The MPA will demonstrate broad collaboration in its formation and implementation. It will provide social impact measures and accountability tools for annual reporting to the legislature and executive branch. Annual updates will recommend future adjustments and legislation as may be required.

Thank you for your consideration,



Senator Karen Kwan, EdD
SB 104 Sponsor - 2023
Utah Senate District 12



Representative Ray Ward, MD
SB 104 House Sponsor - 2023
Utah House District 19

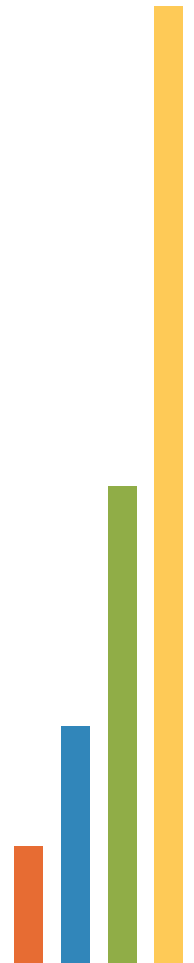
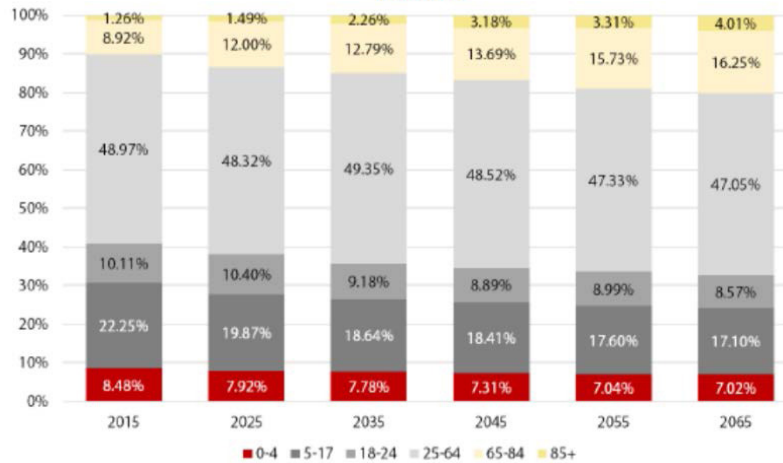
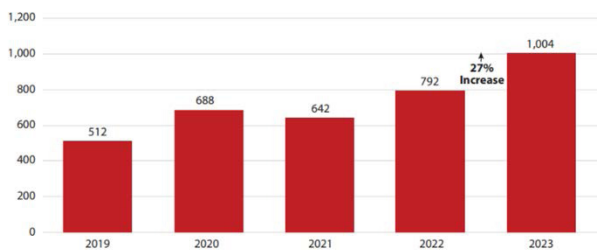


Figure 13
Select Age Groups as a Percent of the Total Utah Population
2015-2065

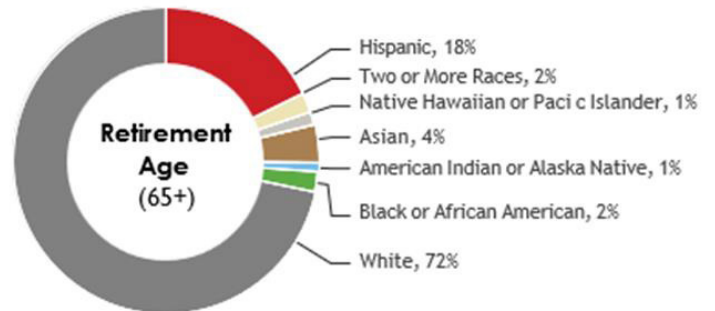


Source: Kem C. Gardner Policy Institute analysis of U.S. Census Bureau Decennial Census and Population Division data; Kem C. Gardner Policy Institute 2015-2065 State and County Projections.

PEOPLE EXPERIENCING CHRONIC HOMELESSNESS IN UTAH



Source: Utah Point in Time Count (2021 is not comparable to other years because of inconsistencies caused by COVID)



Appendix Table 5. Utah Population 65 and Older Living in Nursing Facilities by Sex and Age, 2020

Age	Male		Female		All	
	Count	Percent	Count	Percent	Count	Percent
65 to 69	354	0.6%	356	0.5%	710	0.5%
70 to 74	387	0.8%	465	0.9%	852	0.8%
75 to 79	372	1.2%	552	1.5%	924	1.4%
80 to 84	361	1.9%	695	2.9%	1056	2.4%
85 and over	757	4.7%	1546	6.6%	2303	5.8%

Source: U.S. Census Bureau, 2020 Census Demographic and Housing Characteristics File (DHC)

The Utah Governor’s Commission on Aging (UCOA) was established by statute in 2005 to prepare Utahns and the network of agencies and organizations whose work is impacted by the aging demographic trends. Policy makers, municipal leaders, government and private agencies, researchers, investors, service providers, and individual citizens benefit from a coordinated effort to prepare for and meet the challenges of the future.

UCOA was created for this planning, convening, and collaborative purpose. It sits at the crossroads of research and academia, policy, and community services to promote informed communication and cooperation.



Utahaging.org
Utah Commission on Aging



UCOA sponsors and manages www.UtahAging.org, Utah’s virtual resource center for older adults. The website is home to the MPA, historical UCOA documents, annual reports, statutory requirements, expert resource profiles, multi-sector activity calendars, and a library of resources and reference materials. UCOA promotes and links to Utah’s aging service providers, VA benefits, arts and aging programs, professional development, research and volunteer opportunities, and much more.

The 2024 UCOA statutory members:

Ence, Robert	Executive Director
Allen, Christy	Utah Transit Authority
Anderson, Amy	Utah League of Cities and Towns
Burbank, Chris	Public Safety
Cameron, Casey	Department of Workforce Services
Curley, Darlene	UCOA Chair and Public Policy
Fauth, Beth	USU Alzheimer’s Research Center
Grover, Jim	Utah Office of Economic Opportunity
Hollingshaus, Mike	Kem C. Gardner Policy Institute
Holmgren, Nels	Department of Health and Human Services
Kelso, Gary	Mission Health Services
Leggett, Paul	Area Agencies of Aging
Lifferth, Dennis	Tech Charities
Lloyd, Jenifer	Association for Utah Community Health
Macey, Joel	Community Nursing Services
McCullough, Matt	Utah Technology Network
Milne, Linda	Emergency Preparedness Advocate
Oppenshaw, Jeri	Utah Division of Libraries
Ormsby, Alan	AARP State Director
Pinilla-Coxe, Victor Hugo	The Americas Council
Rajeev, Deepthi	Comagine Utah
Supiano, Mark	University of Utah Center on Aging
Wilson, Troy	Elder Law Attorney



Preparing for the future is an iterative process. UCOA deploys multiple efforts throughout the year to ensure thorough and inclusive input into establishing core issues, priorities, key strategies, recommendations, and measurable outcomes. This MPA and its future iterations are derived from the many intentional conversations and discussions from these forums described below and many other informative topical encounters.

UCOA Quarterly Summits

UCOA convenes expert stakeholders to share program resources, research, and best practices from our communities. The summits may include topical workshops for in depth issue conversation and serve to build networks among community partners. These summits are held generally on the second Thursday of February, May, August, and November. They are virtual, open to the public, and archived on the UCOA website. In addition to these open summits, the statutory members will hold strategy and planning sessions periodically throughout the year. A list of contributing partners and presentations can be found at www.utahaging.org under Commission Home.

Utah Aging Services Partnership

UCOA is in perpetual dialogue and exchange with the state unit on aging, Division of Aging and Adult Services (DAAS) and each of the designated planning and service areas or Area Agencies on Aging and their state association U4A. DAAS also provides a direct link and regular meetings with the cabinet level Department of Health and Human Services. UCOA engages in these agencies' sponsored events, monthly coordinating meetings, advocacy priorities, and participates in state and regional presentations and listening sessions with advisory boards from almost every entity at least once a year. There is a mutual commitment to inform, promote, refer services, identify needs, advocate, and coordinate to improve public service. UCOA also meets or communicates with departments of the Utah Governor's Office as needed or requested.

Research and Academic Partnerships

UCOA periodically meets with key educators from the eight gerontology programs across the state. Frequent exchanges occur with staff from Utah State University, Brigham Young University, and the University of Utah. UCOA is an integral part of multiple disciplines comprising the Utah Center on Aging at the U, an interdepartmental, interdisciplinary collaboration of individual educators and researchers committed to the aging experience. UCOA will frequently speak to undergraduate and graduate programs on aging issues and advocacy and in turn capture insights from the collegiate environment. Program relationships span nursing, family living, geriatric conferences, social work, architectural and community design, educational technology programs, and studies in gerontology.

UCOA is deeply engaged in public-facing events and conferences as a convener, educator, surveyor, sponsor, presenter, and supporter. Organized events include regional hospitals, community centers, senior expos, chambers of commerce. Topics often include caregiving, fraud and exploitation, advance care planning, social isolation, age-friendly communities, and others.

Partner collaborators include older adult conferences, Seniors Blue Book, National Readmission Prevention, Utah State of Reform Health Policy, Digital Health Services Commission, Home and Hospice Association of Utah, Utah Health Care Association, Utah Hospital Association, Utah Assisted Living Association, Adult Protective Services, Utah Broadband Coalition, Comagine Health, Huntsman Cancer Institute, University of Utah’s Colleges of Geriatrics, Nursing, Architecture, Social Work, Psychology, Family and Consumer Studies, and the Center on Aging. UCOA sponsors or participates in major events including Utah Elder Abuse Awareness Day, Annual Summit on Advance Care Planning, Falls Prevention Alliance work group, Utah Broadband Confluence, Conference on Poverty, Utah Family Caregiver Forum, Rocky Mountain Geriatrics Conference, and Age Friendly Community Symposium.

UCOA is a core member of several peer work groups and councils all contributing to the content and issue determination herein. These include Alzheimer’s Disease and Related Dementias Council, Utah Alzheimer’s Association, Cover to Cover Veteran’s Benefit program, Utah Geriatrics and Gerontology Society professional education program, Family Caregiver Collaborative at the University of Utah and the National Alliance for Caregiving, Utah Division of Arts and Museums, Jewish Community Center, Living Well Coalition, Healthy Aging Utah, Utah and County Library systems, E4 Center (Engage, Educate, and Empower for Equity) for older adult mental health, WINGS (Working Interdisciplinary Network of Guardianship Stakeholders), and other peer work groups and councils.

UCOA produces Rap on Aging (YouTube), a podcast series of interviews and educational experts on a variety of aging issues. UCOA has been an expert presenter and participant at several national annual conferences including US Aging (formerly National Association of Area Agencies on Aging – N4A), Gerontological Society of America (GSA), Home and Community Based Services Conference (HCBS), and American Society on Aging (ASA).



Utah MPA Team and the Multi-State Cohort 2023-24¹⁰



A representative group of Utah colleagues is part of the Multi sector Plan for Aging Learning Collaborative, multi-state cohort, sponsored by the Center for Health Care Strategies (CHCS)

and funded through The SCAN Foundation, West Health, and the May & Stanley Smith Charitable Trust. A multi sector plan for aging (MPA) is an umbrella term for a state-led, multi-year planning process that convenes cross-sector stakeholders to collaboratively address the needs of older adults and people with disabilities. Utah delegates include Rob Ence (UCOA), Nels Holmgren (DAAS), Amy Anderson (Logan City), Beth Fauth (USU Alzheimer's Research Center), Linda Edelman (U College of Nursing), and Carrie Schonlaw (Five County Area Agency on Aging – SW Utah). The collaborative provides a unique opportunity for the UCOA planning team in peer-to-peer exchange, access to a network of experts, and technical assistance to learn, share, and apply best practices and innovative strategies on behalf of all Utahns. The project runs for one year from June 1, 2023 to May 31, 2024 with future engagement opportunities. The states included with Utah are Connecticut, Iowa, Maryland, Massachusetts, Missouri, Nevada, New Hampshire, Pennsylvania, and Washington.

Public Portal for Feedback on Utahaging.org

The Utah MPA home is found on the www.UtahAging.org home page. The current version of the plan, the social impact dashboard, related news, and portal for feedback are available to the public.



Six Social Impact End Goals - Overview

Six social impact end goals define MPA priorities, each with desired outcomes, related strategies and performance measures. Each strategy is advised by a committee of expert individuals. Current priorities are selected by the UCOA statutory membership to be accomplished within a three-year period of the plan.

This MPA may make annual adjustments or course corrections after each reporting period. The performance dashboard highlights these indicators and serves as a guide to future policy and decision-making processes by the MPA stakeholders. All information is archived and available to the public on www.utahaging.org.

1. Age-Friendly Ecosystems

Staging Successful Aging

Utah adults benefit from age-friendly principles in our communities of living, education, health care, workplace, and public health that improve the quality of life and the aging experience for all.

2. Live Well Everyday

Sustaining Health and Wellness

Utah adults access services and resources that optimize our quality of life by caring for our physical, mental, and social well-being and establishing healthy lifestyles towards a successful aging experience.

3. Affordable Aging

Financial Sufficiency

Utah adults work, save, manage, and protect their assets and resources, free from exploitation and ageism, to sustain economic viability for life.

4. Plan for Life

Personal Empowerment

Utah adults live self-determined lives with dignity, autonomy, competence, where their voices are heard and honored.

5. Networks for Care

Support Systems

Utah adults access education, resources and support services to better serve those for whom they care and to preserve their own well-being.

6. Embrace Technology

Educated Aging

Utah adults are empowered through technology and safe device utilization to make informed choices on issues that impact the way we age.

1. Age-Friendly Ecosystems - *Staging Successful Aging* 12

Utah adults benefit from age-friendly principles in our communities of living, education, health care, workplace, and public health that improve the quality of life and the aging experience for all.

The National Institutes of Health (NIH) defines an age-friendly ecosystem as a comprehensive, collectively built, ever-expanding platform whose goal is to improve quality of life for older adults around the world through enhanced, collaborative impact.

The World Health Organization (WHO) adds that age-friendly practices recognize there is great diversity in the capacity and circumstances of older adults, anticipate and respond to older adults' needs and preferences in an equitable way, respect older people's decisions and choices, and protect the most vulnerable.

Age-friendly communities support people of all ages, are safe and secure, offer access to affordable and suitable housing, include transportation options, have accessible services and supports, value and respect all voices, and foster an environment where people can make a lifelong home. This framework keeps older adults independent and positively influences physical and mental health. They also provide older adults with the opportunity to work longer, to contribute to the community, and to strengthen their social and emotional needs.

Age-friendly principles serve as best practices established from collaborative work across health care systems, public health, education and research, workplaces, communities in which we live, and services delivered to those communities. The University of Utah as of 2024, received two important recognitions and is one of only eleven universities nationwide to be designated as an Age-Friendly University (AFU) and an Age-Friendly Health System Level 2. It also is part of the Institute for Healthcare Improvement's (IHI) Age-Friendly System-Wide Collaborative that drives the adoption of evidence-based, high-quality care for older adults across all of their sites and care settings.

Also as of 2024, Utah is the only state that on any governance level, state, county, or city, which does not have an age-friendly designation. We have work to do.

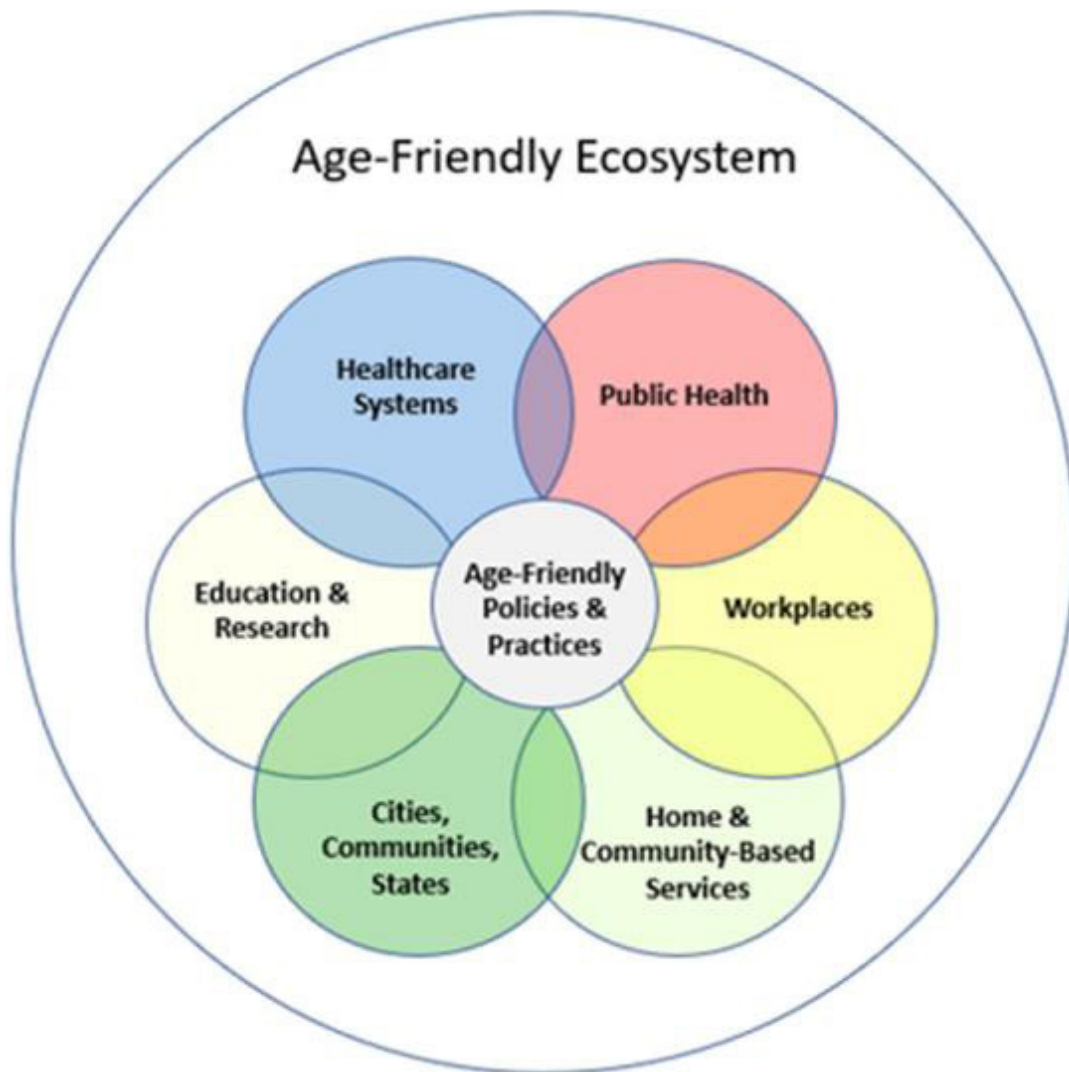
A Word About Ageism

Ageism is a persistent challenge that exists in every facet of life. WHO defines ageism as stereotypes, prejudice, and discrimination directed towards others or oneself based on age. Ageism affects people of all ages. It arises when age is used to categorize and divide people in ways that lead to harm, disadvantage and injustice and erode solidarity across generations. Ageism takes on different forms across the life course. It can change how we view ourselves, can pit one generation against another, can devalue or limit our ability to benefit from what younger and older populations can contribute and can reduce opportunities for health, longevity, and well-being while also having far-reaching economic consequences.

Utah's MPA priorities include:

- Fostering age-friendly initiatives in our communities, places of employment, education, and health care.
- Expanding accessible and affordable mobility solutions for less mobile individuals, and rural and underserved areas.
- Reframing public perceptions of aging through education and awareness by promoting the value and meaning of older adulthood.
- Building a coalition of legislators committed to aging and disability-related policy and how it impacts people at all stages of life.

Established models of success include WHO's Livable Communities guidelines; University of Utah's age-friendly designations as a university and for its healthcare system.



Utah adults access services and resources that optimize our quality of life by caring for our physical, mental, and social well-being and establishing healthy lifestyles towards a successful aging experience.

Health and wellness are essential components of living our fullest lives as we age. *Health* refers to physical, mental, and social well-being. *Wellness* is the state of living a healthy lifestyle and aims to enhance well-being.

Living well is the ability to make each moment of your life count and getting the most from every experience. It means to feel safe and secure from hunger, danger, and insecurity. It means relating to others with authentic connections, loving, laughing, appreciating, and exploring.

Social Determinants of Health (SDoH) evolved over the past several decades, their origin attributed to the work in the 1970s of Canada's Marc Lalonde and Britain's Thomas McKeown. WHO defines these determinants as the conditions in which people are born, grow, live, work, and age. These elements are shaped by the distribution of money, power, and resources at global, national, and local levels. To "live well" requires understanding and navigating the interrelationship of these five key determinants: access to quality healthcare, access to quality education, social and community context, economic stability, and neighborhood and built environment. The Utah Commission on Aging recognizes the need to address these determinants throughout the various components of the Master Plan for Aging (MPA).

Utahns want to live full, active, and healthy lives and benefit from access to information, education, and programs to help attain their highest level of health and well-being. Public policy helps ensure a healthy environment of clean air, safe food and water, and open spaces. Individual responsibilities include regular exercise, proper nutrition, and restorative sleep. Maintaining healthy habits helps prevent or mitigate future injury, sickness, chronic illness, falls, and other risks of daily living.

A Word About Food Security

Food security is a challenge for older adults living on fixed incomes. Food security is when they have reliable access to a sufficient amount of affordable, and nutritious food. In 2019, 5.2 million older adults experienced food insecurity, the opposite of being food secure. People of color are disproportionately impacted by food insecurity. Poverty is also a factor. Food insecurity impacts nutrition and health and is a cause and consequence of poor health. Older adults with chronic conditions, including depression, asthma, and diabetes often experience food insecurity. In 2024, Utah had one of the highest rates in the country for death resulting from malnutrition and will work to eradicate that issue completely.

A Word About Social Isolation

According to the WHO, high-quality social connections are essential to our mental and physical health and our well-being. Social isolation and loneliness are important, yet neglected, social determinants for people of all ages.

Social isolation is the lack of social contacts and having few people to interact with regularly. You can live alone and not feel lonely or socially isolated, and you can feel lonely while being with other people. United States Surgeon General Murthy called social isolation a public health crisis greater than cancer or heart disease.

Research has found links between loneliness and premature death and established that isolation is a more powerful predictor of adverse health outcomes than obesity, sedentary lifestyle, and air pollution. Isolated adults are less able to take care of themselves and are at high risk during emergencies. The National Council on Aging estimates that almost 1 in 5 adults over age 65 would be considered “isolated.” It is critical to address this trend by identifying older adults at risk and offering personal connections and emotional bonds.

Utah’s MPA priorities include:

- Expanding trained geriatric, gerontology, and mental health workforce.
- Promoting physical activity, proper nutrition, and mental well-being.
- Engaging older adults in arts, music, and lifelong learning.
- Encouraging intergenerational activities and mentorship opportunities.
- Connecting older adults with volunteer opportunities

Established models of success include Utah Food Bank, Utahns Against Hunger, Meals on Wheels, Huntsman Senior Games, Osher Lifelong Learning, Utah Creative Aging Coalition/Utah Division of Arts and Museums, Senior Planet, AmeriCorps.



Utah adults work, save, manage, and protect their assets and resources, free from exploitation and ageism, to sustain economic viability for life.

Financial security refers to the peace of mind you feel when you have the resources to cover your expenses, emergencies, and your future financial goals.

Older adults exhibit wide disparities in their sources of income. For those in the bottom half of the income distribution, Social Security is the most important source of support; program changes would directly affect their well-being. Income from private pensions, assets, and earnings are relatively more important for higher-income elderly individuals, who have more diverse income sources. The trend from private sector defined benefit to defined contribution pension plans has shifted responsibility for retirement security to individuals. A significant subset of the population is unlikely to be able to sustain their standard of living in retirement without higher pre-retirement savings (Poterba, 2014).

There are many factors that influence our perspective about the economy, work, investing, and social safety networks. Shifting perceptions of retirement, workplace flexibility and availability, and people working longer to manage the financial necessities of living longer. Employers can benefit from employing older adult workers because they are often more skilled due to many years of experience, they have large networks, and they are reliable workers. Older adults can benefit from employment because there are financial benefits of working longer, workplace friendships combat social isolation, and it can give them a sense of purpose. Employers can implement workplace practices that can benefit all workers, make good business sense, and retain the talents of the skilled workers who fall into the older adult category.

Adequate and affordable housing and shelter are fundamental to the quality of life for all ages. Many older adults remain financially vulnerable as they attempt to secure age-friendly, safe, and affordable housing. The majority of older adults desire to continue to age in place, in their homes and communities, but often lack the resources to make the necessary adaptations or afford increasing costs.

A Word About Financial Fraud and Exploitation

Protecting assets from predators is an ongoing challenge for every adult. Financial exploitation is the illegal, unauthorized, or fraudulent use, or deprivation of use, of the property of a vulnerable adult with the intention of benefiting someone other than the vulnerable adult.

Each year, millions of elderly Americans fall victim to some type of financial fraud or confidence scheme, including romance, lottery, and sweepstakes scams, to name a few. Criminals gain their targets' trust and may communicate with them directly via computer,

3. Affordable Aging - *Financial Sufficiency (cont.)*

phone, and mail, or indirectly through the TV and radio.

Annual losses as reported by the Federal Trade Commission for 2023 exceeded \$10 billion. Older adults are a prime target for unscrupulous criminal behavior and are often victimized more than once. Sadly about 80% of financial fraud is the result of “trusted others” - family members and close friends and social acquaintances.

The Utah Commission on Aging is committed to our community partners in helping all Utahns recognize and avoid financial fraud and have access to educational materials and resources to protect themselves, their identify, and to help prevent and report financial fraud and scams.

Utah’s MPA priorities include:

- Increasing workplace options for capable older adults.
- Expanding affordable and suitable housing inventory.
- Preparing older adults for financial adequacy.
- Protecting adults against all forms of abuse and exploitation.
- Accessing state and federal benefit programs.

Established models of success include AARP Fraud Watch Network, Utah Elder Abuse Awareness Day, Adult Protective Services, Consumer Financial Protection Bureau, Utah Housing Authority, Helpful Village, Senior Community Service Employment Program, Utah Department of Workforce Services, Switchpoint Community Resource Center, Certified Age Friendly Employers, Utah Community Action Partnership.



Utah adults live self-determined lives with dignity, autonomy, competence, where their voices are heard and honored.

Personal empowerment comes from the ability to make self-determining choices that impact our health care, safety, and overall life management. It requires knowledge to make competent choices, connections for a sense of belonging, and autonomy to make your own choices. Being self-determined means that you feel in greater control, as opposed to being non-self-determined, which can leave you feeling that others control your life.

Estate Planning covers the transfer of property at death as well as a variety of other personal matters and may or may not involve tax planning. The core document most often associated with this process is a will. Often other documents are created to protect family and property while you are alive but incapacitated. They can help in managing financial affairs.

Advance Care Planning (ACP) is a process that enables individuals to make plans about their future health care. Advance care plans provide direction to healthcare professionals when a person is not in a position to make and/or communicate their own healthcare choices. *Advance Directives* provide for a healthcare power of attorney and documents your wishes of type and extent of care you would wish to receive. *Provider Orders of Life Sustaining Treatment (POLST)* in Utah) are medical orders that are utilized in the event of an expected death and delineate preferences of nutrition, palliative care, and resuscitation orders.

Advanced care planning tools and documentation are underutilized. Very few healthcare providers (less than 15%) have end of life planning conversations with their patients and few people recognize the need for an advance directive when an individual becomes an adult. If individuals do not express and document their preferences, decisions will be made for them that may lead to unwanted consequences including unnecessary medical interventions.

The Utah Commission on Aging (UCOA) is the state leader in educating and accessing these planning tools and to ensure their choices, values, and care instructions are followed to achieve their desired outcomes. UCOA is committed to a universal electronic registry of these documents so that they are accessible when needed to first responders, health care providers, health systems, and individuals updating their documents.

A Word About Emergency Preparedness

Far too frequently, older adults and individuals with mobility challenges fall victim to abandonment during an emergency. Emergency Preparedness is the term that refers **to the steps everyone should take to make sure they are safe before, during and after an emergency or natural disaster.**

4. Plan for Life - *Personal Empowerment (cont.)*

These personal plans are important because you cannot assume that help is coming for you.

Everyone needs a plan and a personal local network of support.

These are five categories of emergency preparedness and response to consider:

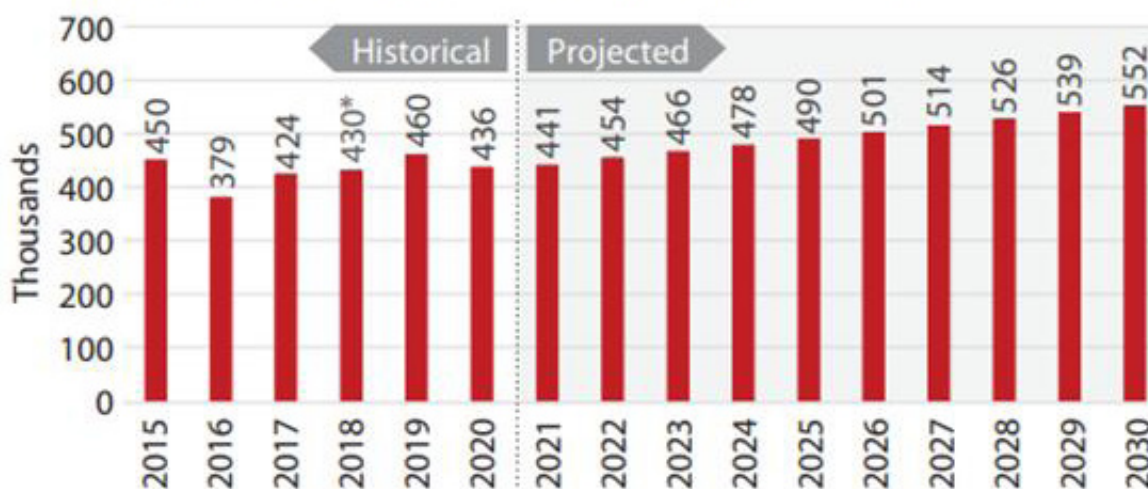
1. **Prevention.** Actions taken to avoid an incident.
2. **Mitigation.** Measures that prevent an emergency.
3. **Preparedness.** Activities to increase a community's ability to respond when a disaster occurs.
4. **Response.** Actions conducted immediately before, during, and after a hazard impact.
5. **Recovery.** Actions to return a community to normal or near normal.

Utah's MPA priorities include:

- Educating older adults on estate planning and financial planning options.
- Engaging adults to understand, access, and complete Advance Care Planning tools.
- Supporting programs for personal emergency preparation education.

Established models of success include Utah Bar Association – Elder Law and Estate Planning Sections, Voluntary Organizations Active in Disasters (VOAD), Utah Emergency Operations Plan IHC, Oregon, Idaho, Utah Department of Emergency Management – Be Ready Utah, Ready.gov, FEMA.gov.

The Number of Family Caregivers is Expected to Increase as Utah's Population Ages and Grows, 2015–2030



Note: Data are unavailable for Utah in 2018; count shown for 2018 is an estimate.

Source: U.S. Centers for Disease Control and Prevention (data) and the Kem C. Gardner Policy Institute (analysis).

Utah adults access education, resources, and support services to better serve those for whom they care and to preserve their own well-being.

Caring for, or being cared for, will be part of everyone's life. It is a matter of when, how much, and for how long.

The number of unpaid adults in the United States who provide caregiving services for a child, parent, or other relative surpassed fifty-three million in 2023. The demographics of this unpaid workforce represent all races and ethnicities, education and income levels, generations, family types, gender identities, and sexual orientations. Many caregivers experience financial impacts and stop saving, incur debt, or use up personal short-term savings. Paid personal care aides are also in very short supply, and the aging population will have a significant impact on the demand for paid and unpaid caregiving services.

In Utah, like in other states, family caregivers are the backbone of the long-term services and supports infrastructure. They provide direct care and services to family members and friends in homes and communities throughout the state. As reported in the 2022 Utah Family Caregiver Report, 436,000 Utahns were family caregivers, representing approximately 1 in 4 adult women and 1 in 6 adult men. Among Utahns aged 55-64, nearly 1 in 3 (29.6%) are caregivers.

In 2021, the National Institute on Aging reported that long-term care involves a variety of services designed to meet a person's health or personal care needs during a short or long period of time. These services help people live as independently and safely as possible when they can no longer perform everyday activities on their own.

Long-term care is provided in different places by different caregivers, depending on a person's needs. Most long-term care is provided at home by unpaid family members and friends. It can also be given in a facility such as a nursing home or in the community, for example, in an adult day care center.

People often need long-term care when they have a serious, ongoing health condition or disability. The need for long-term care can arise suddenly, such as after a heart attack or stroke. Most often, however, it develops gradually, as people get older and frailer or as an illness or disability gets worse.

All Utahns should have access to affordable and compassionate long-term services to meet their individual needs along with educational materials and programs about long-term care options and issues.

UCOA advocates for legislation and public policy that recognizes, engages, and supports unpaid family caregivers and personal care assistants, caring for older adults, including the recommendations of the National Academy for State Health Policy.

Utah's MPA priorities include:

- Preserving and increasing funding and resources for Long-Term Services and Supports (LTSS) for both in-home and community-based services.
- Expanding a well-trained and financially supported direct care workforce.
- Improving and simplifying access to LTSS for older adults and families.
- Increasing caregiver education, support programs, and respite options for family caregivers.
- Protecting patients' rights and well-being.
- Protecting the health, well-being, financial and workplace security of the care partner or caregiver.
- Including family caregivers in health care system decisions.

Established models of success include The Utah Family Caregiver Report 2022, RAISE Act (Recognize, Assist, Include, Support, & Engage), Family Caregiving Advisory Council, Medicaid Home-Based and New Choices Waiver Programs.



Utah adults are empowered through technology and safe device utilization to make informed choices on issues that impact the way we age.

Technology is an essential partner in connecting humans with one another. It has narrowed the access gap to services and information regardless of where one lives and continues to develop adaptive tools to assist individuals with disabilities, limited mobility, or chronic conditions. Health care delivered through technology is a prime example of vital services reaching more people efficiently and effectively.

To be an empowered adult means to have the ability to obtain information and make informed choices. Research has shown that a majority of older adults utilize technology in their daily lives for a variety of reasons and often on multiple devices. Individuals who regularly utilize technology report better health, fewer chronic conditions, and overall well-being.

Embracing technology is not without its caveats. More infrastructure is required to ensure that technology is available to everyone in every location. And the broadband services must be affordable. Individuals must have access to devices and become literate on how to connect and utilize. Finally, they must be able to use them safely and understand the predatory side of accessing the internet and general technology use.

There continues to be a great opportunity for service, intergenerational mentoring, and helping improve the ability of older adults to engage through technology. Program models foster the development of well-trained *digital navigators* who can provide assistance and tutor adults on how to access and utilize applications, programs, search engines, and what to watch for to protect themselves. There is a great need for specialized mentoring to help raise the literacy of older adults so they can better understand issues impacting their lives including the management of health care, financial and legal matters, and general education.

Digital literacy has a direct impact on everyone's quality of life, including older adults. In order for older adults to be able to access these empowering resources, technology support and education is key. The technology sector is a perfect partnership arena for local governments, private businesses, NGOs (non-government organizations), and nonprofits to work together, each with a defined collaborative stewardship to keep our communities and their citizens vibrant and progressing.



Utah's MPA priorities include:

- Supporting programs to develop well-trained digital navigator/mentor volunteers.
- Developing community partnerships to deliver devices and digital literacy training to achieve digital equity throughout Utah.
- Creating mentor-triage programs to improve the literacy of older adults on health, financial, and legal matters.
- Maintaining www.utahaging.org as a relevant older adult issue repository and reference website for all Utahns.
- Combating social isolation through collaborative technology and community programs.

Established models of success include Utah Broadband Coalition, Utah Digital Opportunity Network, Tech Charities Inc., National Digital Inclusion Alliance, Utah Education and Telehealth Network, Northwest Regional Telehealth Resource Center.



1. Age-Friendly Ecosystems - Staging Successful Aging

- 1.1 Develop a team of bipartisan legislators committed to older adult issues and legislation
- 1.2 Receiving Age-Friendly designation should be a priority for Utah. Designation in health care, education and the workplace should also be priorities.
- 1.3 Develop a team of bipartisan legislators committed to older adults and legislation.
- 1.4 Policies for clean air, education on elements of healthy living, %, reporting food insufficiency decreases, % falls/hospital admissions decreases.
- 1.5 Support development and revitalization plans to ensure open space and accessible adaptive recreation.
- 1.6 Support policies to increase availability of innovative and practical mobility and transportation options.
- 1.7 Aging in Place - Educate and work with architectural and construction industry to incorporate Universal Design elements into more dwellings.

2. Live Well Everyday - Sustaining Health and Wellness

- 2.1 Promote and grow participation in continuing education opportunities, e.g., Osher Institute, HB 60.
- 2.2 Provide program information for travel and recreational opportunities.
- 2.3 Policy incentives for geriatric specialists and rural providers.
- 2.4 Expand the adoption of 4M (What Matters, Medication, Mentation, Mobility) principles in older adult health care practices.
- 2.5 VA Benefits are known and utilized by eligible Utah Veterans.
- 2.6 Establish licensing standards for professional workers managing patients with mental health issues.
- 2.7 Work with DOPL to include dementia care training across applicable disciplines.
- 2.8 Adopt guidelines for Dementia Disease Management, Care, and Education.
- 2.9 Determine the need and create a plan for transitional housing requirements for mental health and abuse victims.
- 2.10 Mental Health resources are available and utilized.
- 2.11 Additional training for Parkinson's, persons w disabilities.

3. Affordable Aging - Financial Sufficiency

- 3.1 Promote the value of older workers and secure business support to provide viable employment opportunities.
- 3.2 Identify and secure policies that protect older workers from ageism practices.
- 3.3 Increase inventory of affordable housing for older adults.
- 3.4 Reduce unsheltered and homeless population trend.
- 3.5 Promote services for repair and adaptation for low-income assistance.
- 3.6 Support wealth accumulation options and education.
- 3.7 Reduce cases of financial exploitation, fraud, and scams among older adults.
- 3.8 Access to unbiased Social Security and Medicare counseling and insurance guidance.
- 3.9 Simplify financial assistance enrollment - Medicaid eligibility.

4. Plan for Life- Personal Empowerment

- 4.1 Support policies to encourage uniform and universal standards for recognition and acceptance of advance care planning documents.
- 4.2 Advocate for honoring individual choice, right to self-determination, and ability to manage assets and life's decisions.
- 4.3 Educate on estate planning concepts and consequences of decisions involving conservatorships and guardianships.
- 4.4 Facilitate end of life conversations with families and trusted advisors.
- 4.5 Educate individuals and community leaders on emergency preparedness and evacuation plans for vulnerable and less mobile adults.

5. Networks for Care- Support Systems

- 5.1 Advocate for the adoption and funding of the Utah Family Caregiver Plan.
- 5.2 Support and resource families caring for adults with disabilities.
- 5.3 Ensure freedom from mental, physical, and sexual abuse, and involuntary seclusion under the care of others.
- 5.4 Ensure protection from misappropriation of resident property and exploitation.

5. Networks for Care- Support Systems (cont.)

- 5.5 Support competency and skilled training requirements for service providers working with Alzheimer’s Disease and Related Dementia and other vulnerable populations.
- 5.6 Support and resource grandparents raising grandchildren programs.

6. Embrace Technology- Educated Aging

- 6.1 Support programs that increase infrastructure improvements to affordable broadband services in under served and rural communities.
- 6.2 Support and promote programs that repurpose technology devices for personal placement use to increase online access for all adults.
- 6.3 Launch digital navigator, volunteer driven, call center program with community partners.
- 6.4 Improve health, financial, legal, and technical literacy rate of older adults.
- 6.5 Expand utilization of www.utahaging.org as the core virtual resource center for aging issues, information, and referral.
- 6.6 Educate the public and policy makers about the statutory work and purpose of the Utah Commission on Aging through statewide information dissemination and Social Media.



1. Age Friendly Ecosystems - Staging Successful Aging

- Increase Age-Friendly designations in Utah.
- Establish baseline indicator for prevalence of ageism.
- Expand the adoption of 4M (What Matters, Medication, Mentation, Mobility) principles in older adult health care practices.
- Recruit and convene a team of bipartisan legislators committed to older adult issues and legislation.

2. Live Well Everyday - Sustaining Health and Wellness

- Increase exercise for balance programs participation.
- Establish baseline for falls-related hospital admissions.
- Decrease falls-related hospital admissions.
- Increase food sufficiency in older adults.
- Decrease deaths related to malnutrition.
- Expand scholarships and loan forgiveness programs for healthcare professionals in geriatrics and rural areas.
- Increase participation in HB 60 funded programs.

3. Affordable Aging - Financial Sufficiency

- Increase inventory of available jobs for older adults.
- Increase inventory of affordable housing for older adults.
- Decrease number of homeless and unsheltered older adults.
- Simplify Medicaid enrollment process.
- Decrease incidents of older adult physical, mental, sexual abuse.
- Decrease incidents of financial exploitation and abuse.
- Support legislation to remove the remaining state tax on Social Security earnings.
- Increase utilization of COVER program by veterans.

4. Plan For Life - Personal Empowerment

- Update ACP documents with DHHS to current statutory language.
- Increase participation in ACP training programs, in person and virtual.
- Increase utilization of ACP planning tools
- Create and fund state supported repository for ACP documents.
- Encourage passage of Uniform Health-Care Decisions Act.
- Decrease incidents of orphaned and unbefriended adults in health care decisions.


5. Networks for Care - Support Systems

- Increase funding of Medicaid waiver programs for home based care.
- Increase in caregiver participation in training programs.
- Evaluate and fund online caregiving resources.

6. Embrace Technology - Educated Aging

- Obtain funding for digital navigator call center and volunteer training.
- Integrate telehealth as a standard service within healthcare systems.
- Increase visits to website www.utahaging.org by 20%.
- Produce quarterly aging symposia on MPA issues with statutory members and community partners.
- Produce two issue specific virtual programs on aging issue themes.
- Develop MPA dashboard and establish metrics for accountability and reporting.





AAA	Area Agency on Aging
ACL	Administration for Community Living
ACP	Advance Care Planning
AD	Advance Directive
ADL	Activities of Daily Living
ADRD	Alzheimer’s Disease and Related Dementias
ALF	Assisted Living Facility
AOA	Administration on Aging
AOG	Association of Governments
CCRC	Continuing Care Retirement Community
CDC	Center for Disease Control
CHC	Community Health Center
CHCS	Center for Health Care Strategies
CMS	Center for Medicare and Medicaid Services
CNA	Certified Nurse Aide
COB	Coordination of Benefits
COLA	Cost of Living Adjustment/Allowance
DAAS	Utah Department of Aging and Adult Services
DME	Durable Medical Equipment
DNR	Do Not Resuscitate Order
EMS	Emergency Medical Services
EOL	End of Life
FDA	U.S. Food and Drug Administration
FMLA	Family and Medical Leave Act
HHS	U.S. Department of Health and Human Services
HIPAA	Health Insurance Portability and Accountability Act
HMO	Health Maintenance Organization
HUD	U.S. Department of Housing and Urban Development
LTC	Long Term Care
MPA	Master Plan for Aging
NAC	National Alliance for Caregiving
NIA	National Institute on Aging
OAA	Older Americans Act
POLST	Provider Order of Life Sustaining Treatment
SNF	Skilled Nursing Facility
SSA	Social Security Administration
SSI	Supplemental Security Income
U4A	Utah Association of Area Agencies on Aging
UCOA	Utah Commission on Aging
UHCA	Utah Health Care Association

In appreciation and recognition for the time and effort of the Utah Commission on Aging community of partners who contributed to the evolution of this plan over the past several years and helped shape the vision and content and will continue to advise, monitor, and mold the future aspirations of Utah’s adult population. Writing, editing, critiquing, advising, proofing, designing, surveying, focus groups, educational symposia, sharing professional expertise and experience are just a few channels that these individuals and organizations continue to influence this work on behalf of the state of Utah.

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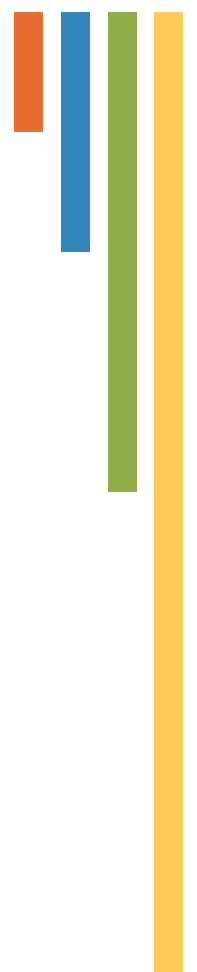
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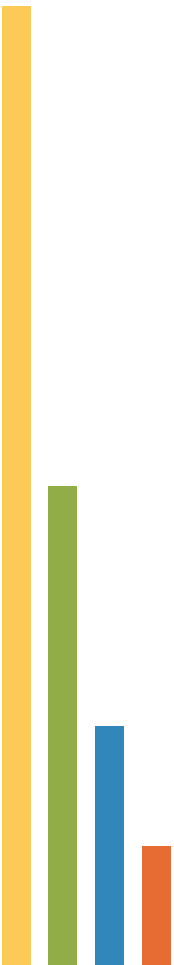
A Master Plan for Aging in Utah



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Published by:

Utah Commission on Aging