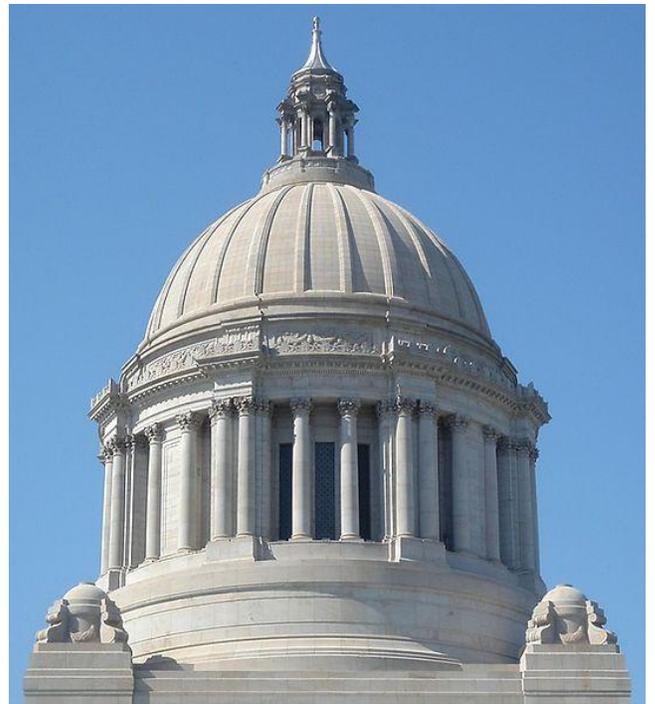


# GOVERNOR'S AGING SUMMIT



The age wave is here: baby boomers are aging, 12% of Washingtonians are now 65 plus. By 2030 that will grow to nearly 20%. This age wave is both an opportunity and a challenge. It is wonderful that people can now expect to live 20 to 30 years beyond the traditional retirement age of 65. And it is a reality that this growing aging population is putting pressure on our state-funded services and infrastructure. We all want to be independent, engaged and productive members of society as we age, the question is... **Is Washington State Ready?**

# Governor's Aging Summit

OCTOBER 1, 2013 | SEATTLE, WASHINGTON

The Aging Summit 2013 was a high level, interactive discussion hosted by the Governor and led by a professional facilitator. The approximately 100 invitees included key cabinet officials, selected legislators, community leaders and issue experts from Washington State and beyond. The Summit was a solution oriented exchange of ideas and outside-the-box thinking focused on state government initiatives. Participants identified fiscally responsible strategies to prepare for and embrace this unprecedented demographic shift.

## Purpose:

- Focus state policymakers and opinion leaders on the age wave on the horizon.
- Explore strategic actions state government can take to create a more age friendly environment and reduce pressure on future state budgets.
- Jump-start the work of the legislative-executive Aging and Disability Committee.

## Major topic areas discussed:

- **Livable Communities:** Today, approximately 15% of Washingtonians age 65+ no longer drive. In the future, new housing and transportation options will be essential to keep our older population mobile and engaged.
- **Financial Security:** The "boomers" are woefully unprepared for retirement. A recent AARP survey found that 25% have saved less than \$25,000, putting them at risk of poverty in their retirement and straining the capacity of our state's safety net.
- **Health Care-Healthy Aging:** As our population ages, so will the incidence of debilitating diseases and chronic health care conditions.
- **Long Term Services and Supports:** Washington has been very successful in the move toward more cost effective and popular home and community based long term services and supports. Our next challenge is financing reform. Our state Medicaid program, the safety net for long term care, will not be able to sustain the rising demand in the future.

## For more information, contact:

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# Governor Inslee's Aging Summit

**October 1, 2013**

**Talaris Conference Center**

4000 NE 41st Street - Seattle, WA 98105

(206) 268-7000

[View Printable Map](#)



## Purpose

- ✓ Focus state policymakers and opinion leaders on the age wave.
- ✓ Explore strategic actions state government can take to create a more age friendly environment and reduce pressure on state budgets.
- ✓ Jumpstart the work of the legislative/executive Aging and Disability Committee.

The conversation will be solution oriented where participants will exchange ideas and outside-of-the-box thinking. Participants will identify fiscally responsible strategies to prepare for and embrace this unprecedented demographic shift.

## Agenda

**10:00 – 11:00 a.m. OPENING**, facilitated by *Erin Waters, Governing Magazine* with welcome from *Charley Reed, AARP*

- » Governor Jay Inslee, opening remarks
- » Dr. Laura Carstensen, Stanford Center on Longevity, keynote
- » Discussion with Governor Inslee, facilitated by Erin Waters

**11:05 a.m. – 12:20 p.m. Round #1: Break-out Groups to Discuss and Prioritize Strategies**  
(see reverse for session detail and your nametag for group assignment)

***Pick up Lunch & Rotate***

**12:35 – 1:50 p.m. Round #2: Break-out Groups to Discuss and Prioritize Strategies**  
(see reverse for session detail and your nametag for group assignment)

**2:00 – 3:00 p.m. CLOSE**, facilitated by *Erin Waters, Governing Magazine*

- » Break-out groups report on proposed strategies to Governor Inslee
- » Summary discussion

**Closing remarks from Governor Inslee**

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**JAY INSLEE**  
Governor

## Break Out Group Descriptions

### 1. Livable Communities (*Lodge Room*)

Today, approximately 15 percent of Washingtonians age 65+ no longer drive. Many have trouble finding affordable housing. In the future, new housing and transportation options will help keep our older population mobile and engaged.

- » What can Washington, through a better-built environment, do to improve the health and well being of people of all ages?
- » What can be done to ensure affordable, accessible housing with proximity to services that people need as they age?
- » How can we encourage flexible transportation options to help people remain mobile longer?

*Facilitated by: Peter Lagerwey, Executive Director, Toole Design Group*

### 2. Financial Security (*Alder Room*)

The "boomer" generation is woefully unprepared for retirement. A recent AARP survey found that 25 percent have saved less than \$25,000, putting them at risk of poverty and straining the capacity of our state's safety net. Some who have savings suffer from financial exploitation.

- » How can we help people plan for a secure retirement?
- » How can we incentivize more businesses to offer retirement savings plans?
- » What more can we do to ensure our most vulnerable are safe from financial exploitation?

*Facilitated by: Elaine Ryan, Executive Vice President, AARP*

### 3. Health Care (*Maple Room*)

As our population ages, the incidence of debilitating diseases and chronic health care conditions will increase, including Alzheimer's disease. Staying healthy as long as possible and then making informed end-of-life decisions are increasingly important.

- » How can we help people stay healthy longer?
- » What strategies can we implement to prepare for the projected increase in cases of Alzheimer's and other dementias?
- » How can we support informed decision making with regard to end-of-life care?

*Facilitated by: Dorothy Teeter, Director, Washington State Health Care Authority*

### 4. Long Term Services and Supports (*Cedar Room*)

Washington has been very successful in the move toward more cost effective and popular home and community-based, long-term services and supports. Our next challenge is financing reform. Our state Medicaid program, the safety net for long term care, will not be able to sustain the rising demand in the future.

- » How can we better serve the "pre-Medicaid" population and support families in taking care of their own loved ones for as long as possible?
- » How can we leverage private resources to pay for long-term care and incentivize people to prepare for future costs?

*Facilitated by: Robyn Stone, Executive Director, LeadingAge Center for Applied Research*

## Format

The Aging Summit was intended to be participatory in nature and to encourage an exchange of information, ideas and concrete suggestions. The individual break-out sessions were designed to identify and bring forward ideas on major topic areas - Livable Communities, Financial Security, Health Care/Healthy Aging, Long Term Services and Support - to share with Governor Inslee. Each participant attended two of the four topic area break-out groups.

Facilitators guided the discussions with key questions, led discussion around ideas that participants suggested and identified a "top five list" of ideas/policy directions that attracted the most interest and energy from the group.

While there was no expectation to achieve consensus in the groups or decide on formal recommendations, the ideas generated at the Summit will help to inform the Governor's priorities and the work of the Joint Legislative Executive Committee on Aging and Disability.



## Governor Inslee

"We are here today because we all share the same goals. And those goals are to improve and enhance the lives of Washington's senior citizens, and to improve and enhance the health of Washington's communities."

"Here's something we can be proud of: We've provided people choice and dignity. Choice and dignity in services provided – and we're going to work to make sure our long-term care system not only survives but gets even better."

## Laura Carstensen, Stanford Center on Longevity

Laura Carstensen, PhD, the Director of the Stanford Center on Longevity provided the keynote address. She presented the age wave from an historical and evolutionary perspective. She described how changing demographics have impacted our public services and supports, demonstrating a mismatch between the culture of the past and the reality of today. Supportive demographics include:



- In 1850 the average life expectancy was 35 years of age, in 1900 it was 47, and in 2000 it was 70 years of age.
- Today, 2/3 of the entire historical human population is alive.
- We are not genetically hardier than our ancestors; we just have a higher probability of survival due to medical advances, sanitation, immunizations, and other factors.

# Livable Communities

Facilitated by: Peter Lagerwey, Executive Director, Toole Design Group

Recorded by: Cathy Knight

Today, approximately 15% of Washingtonians age 65+ no longer drive. Many have trouble finding affordable housing. In the future, new housing and transportation options will keep our older population mobile and engaged.

- What can Washington State do, through a better-built environment, do to improve the health and well-being of people of all ages?
- What can be done to ensure affordable, accessible housing with proximity to services that people need as they age?
- How can we encourage flexible transportation options to help people remain mobile longer?

## Livable Communities: TOP 5 IDEAS

- Small planning grants to support development of “livable communities” based on principles of universal design and Complete Streets.
- Coordination of funding to eliminate silos in housing/transportation.
- Clustering of services/housing around transportation hubs (TOD).
- Pass Transportation Revenue package (Oregon experience should inform our package).
- Create more affordable land for housing options.

## Other Input from Sessions

- Institutionalize universal design principles in all new built environments, new housing developments and in major housing renovations.
  - Pass building codes to reinforce these principles (e.g., all new single & multi-family homes should meet “visitability” guidelines).
  - Recognize that built environments do more than just make housing and transportation accessible, but also save energy and improve health outcomes for the people there.
  - Encourage local communities to implement universal design guidelines in their planning for built environments and eventually these guidelines should be required with any new developments. Zoning ordinances will need to be simplified and updated.
  - Local commissioners and stakeholders need to better understand and provide support for the variety of housing and transportation options their communities will need in the future.
  - Local planning for “livable communities” should include partnerships with key stakeholders, including WSAC and Association of Cities; WSDOT and Commerce [Growth Management Act program]; include performance measures & targeted outcomes that cities and counties can implement as they plan with these grants.
  - Eliminate the conflicting requirements for the range of senior housing options, replace with universal design guidelines and let the money follow the person so that individuals have the necessary blend of housing and supportive services to age in place.
  - Inclusiveness & Cultural Sensitivity needs to be built into all livable community designs.
  - Art needs to be part of the built environment.

- Disaster Preparedness needs to be part of planning and design & addressed in all plans.
- Better inform consumers about what housing and transportation resources are available:
  - Facilitate consumer access to an adequate supply of affordable, accessible housing, public transportation options and supportive services through a statewide inventory of resources and the development of a directory of available resources.
- Increase access to affordable housing:
  - Target the Housing Trust Fund dollars toward the housing options needed for livable communities
  - Mandate all developers to include more low-income housing in their new developments.
  - Increase the availability of affordable land for future housing developments. Governor could promote public-private partnerships; provide tax incentives for sellers to make land more affordable for built environments, expand the “land acquisition program” to buy more land to increase affordable housing options.
- Establish a new role for community “connectors” who work with people in senior housing programs so they can access the supportive services they need to stay at home. Bring service coordinators to the person who needs supportive services so that they can stay in their own home and ensure that training is provided for this new “service coordinator” role.
- Use the state transportation revenue package as an opportunity to prepare for the age wave. Invest in public transit and special needs transportation.
- Invest in Complete Streets grant program as a mechanism to support livable communities.
- Strengthen the Growth Management Act and use the GMA to help rural communities better plan for the future.
- Enforce the development of public transportation routes/hubs in greater proximity to housing clusters and support services so that people can access the resources they need to age in place. Better coordination of transit options will help eliminate some of the isolation currently experienced by too many seniors. Require developers to address sustainable, appropriate transit options as part of any new housing developments.
- Identify better ways to provide special needs transportation services (e.g. better coordination of single purpose transit trips; provide soft subsidies for neighborhoods to coordinate local shuttles (easy access, simple scheduling); explore opportunities to develop locally relevant public transit options.
- Do more to address accessibility issues for users of all types of public transportation:
  - Users of the state ferry system – e.g., buses need to be in proximity of ferry for people with mobility issues
  - Make better use of existing transportation routes (e.g., get serious about dedicated bus lanes; provide incentives to keep trucks off the road during peak hours).
  - Recognize the needs of younger seniors with cognitive limitations and dementia. Communities need to be dementia friendly (e.g. modified transit assistance like reminding riders of upcoming public transit stops).
- Bring youth to the table in planning for transportation options – use the natural intergenerational connections – e.g. youth today don’t need or want cars like the previous generations – coordination across generations could improve transportation options. Today’s youth are using transportation differently than the Boomers do.
- Find ways to promote community health and wellness, like tax credits to health clubs who serve seniors.

# Financial Security

Facilitated by: Doug Shadel, AARP  
Recorded by: Ingrid McDonald

The “boomer” generation is woefully unprepared for retirement. A recent AARP survey found that 25% have saved less than \$25,000, putting them at risk of poverty and straining the capacity of our state’s safety net. Some who have savings suffer from financial exploitation.

- How can we help people plan for a secure retirement?
- How can we incentivize more businesses to offer retirement savings plans?
- What more can we do to ensure our most vulnerable are safe from financial exploitation?

## Financial Security: TOP 5 IDEAS

- Encourage **private savings** by making it easier for small businesses to offer workplace savings accounts.
- Protect **pensions** and support people of all ages and abilities who want to enter the workforce/ **work longer**.
- Teach **financial literacy** at all stages.
- Ensure a **timely and more effective** APS response.
- Ensure access to **guardians** and improve oversight and accountability.

## Other Input from Sessions

**Use the Elder Economic Index** – The federal poverty level is not a good measure of the actual cost of living for older people. Instead, the state should use the Elder Economic index for eligibility determination for state services and programs.

**Promote Individual Savings** – A proposal entitled Save Toward A Retirement Today (START) was proposed as a means to encourage individuals to save for retirement. The concept is to make it easier for small businesses to offer retirement savings accounts. START would be administered by the Department of Retirement systems, and accounts would be managed by the Washington Investment Board. The idea is to focus on people not saving now.

The benefit of this is large economies of scale, low fees, portability, and simplicity. Challenges are startup costs, liability questions, opposition from financial services industry.

More than half of all employees are not saving – existing retirement systems don’t fit a lot of today’s workers, who are self-employed or who work for small employers; young people tend not to think about the future. Need to automate it, make it as easy as possible.

## WHAT IS A LIVABLE COMMUNITY?

AARP defines a livable community as “one that has affordable and appropriate housing, supportive community features and services, and adequate mobility options, which together facilitate personal independence and the engagement of residents in civic and social life.”

Business owners should play a more active role in educating employees about the value of saving and encouraging them to save.

Think about ways to leverage intergenerational support – through a GET like mechanism whereby parents and grandparents could set aside money either for their children's education or their retirement savings.

**Support living wage jobs** – People aren't saving because they don't have the money to save. State needs to promote living wage jobs.

**Note the intersection with Long Term Care financing** - The broken long term care financing system works against the goal of financial security by incentivizing people to impoverish themselves in order to access long term care. We need more regulation of the private long term care insurance industry.

**Expand financial literacy** - Focus on financial literacy, teach people at all stages of life, make it a basic curriculum in schools, and make it accessible in multiple languages. Teach people about the dangers of predatory lending.

**Protect state pensions** – The legislature should keep its promises. Protect the integrity of defined benefit pensions as a secure tool to promote retirement savings.

**Maximize workforce participation** – Support people who want to remain in the workforce after age 65, build support for people with disabilities who want to enter the workforce.

**Educate about Veterans benefits** – Help people access the benefits they have earned, including veterans benefits, Medicare, Social Security.

**Strengthen Adult Protective Services** - Fund more APS workers and improved effectiveness in responding to cases of financial exploitation, abuse and neglect. Specifically, improve training and use a better and more consistent tool for screening for capacity. Department does not have the staff it needs to investigate cases in a timely manner. Without sufficient funding, Department will have to prioritize physical and sexual abuse and spend fewer resources on financial exploitation.

**Improve Guardianship** – Improve the system so everyone who needs one has access to a guardian and do more to prevent guardianship abuse. Leverage volunteers to meet this goal, perhaps through the home companionship program. Fully fund the Office of the Public Guardian.

**Regulate Powers of Attorney** – More oversight is needed. Evaluate how to restructure or increase regulation.

**Engage banks and financial institutions in fraud prevention** – Require them to be mandatory reporters and teach them how to look out for fraud and financial exploitation.

# Health Care - Healthy Aging

Facilitated by: Dorothy Teeter, Director, Washington State Health Care Authority

Recorded by: Cheryl Townsend Winter

As our population ages, the incidence of debilitating diseases and chronic health care conditions will increase, including Alzheimer's disease. Staying healthy as long as possible and then making informed end-of-life decisions are increasingly important.

- How can we help people stay healthy longer?
- What strategies can we implement to prepare for the projected increase in cases of Alzheimer's and other dementias?
- How can we support informed decision making with regard to end of life care?

## Health Care - Healthy Aging: TOP 5 IDEAS

- Establish a task force, commission (or perhaps Aging & Disability Committee) to promote a culturally competent activist approach, with a learning community aspect, to aging (fund via PCORI?) and reform regulations around treatment providers and reimbursement.
- Begin the process to develop a Washington State Alzheimer's Plan and start conversations about planning earlier in the disease to help deal with the "fear" factor.
- Grow and sustain the "Falls Prevention Program" – could be an opportunity to partner with facility-based providers.
- Create a matching service (match.com??) to match volunteers to needs using available resources.
- Develop statewide system with measurable goals around POLST, hospice utilization, ICU deaths and desired place of death percentages i.e. a "report card".

## Other Input from Sessions

- Work through the Bree Collaborative to identify strategies to encourage informed end of life decision making including shared decision making.
- Develop a "Your good EOL care begins with you!" campaign, i.e. the individual is accountable.
- Put emphasis on what "less is more" care *can mean*.
- Link policy to public health, e.g. housing.
- Consider population disparities.
- Provide an access line for adults like PAL is for children.
- Intervention medically earlier in life.
- Consider reimbursement for physical health by using prescriptions for exercise with "green" Rx or written advice from a MD for a goal-oriented exercise program which has been shown to be effective.
- Develop a public awareness campaign along the lines of "live long & healthy" which could be done in partnership (e.g., WA State Health Foundation, the State Council on Aging, the WA State Department of Health, and/or the ACA Prevention & Public Health Fund Resources).
- Create a state sponsored dental care coverage program.

- Create a public portal to provide information for healthful living.
- Do community-based education & training.
- Recruit MD's to rural areas.
- Develop prescription reconciliation.
- Eliminate laws that discourage "encore" work.
- Promote community conversations about when someone is no longer healthy.
- Support, continue to develop at-home resources to bend the cost curve.
- Require that state facilities provide EOL care.
- Educate & support family/caregivers early in Alzheimer's Disease.
- Get Medicare benefits for in-home care.
- Develop an Advanced Directive and education program(s) regarding Alzheimer's and dementia.
- Develop a statewide system for advanced directive.
- Use the term "late in life" versus end of life (EOL).
- Provide EOL services in home.
- State law should trumpet corporate policy for EOL.
- State funding & emphasis on community based care transitions: Long-term care and medical care in a collaborative system.
- Fashion work-place wellness program for small businesses.
- Incentivize the health business to encourage seniors to get healthier.
- Enhance a transportation plan for older citizens and their care givers.
- Provide credit to an L&I premium to incentivize workplace wellness.
- Provide wellness care like the medical home project which works to improve care for those who have ongoing health or developmental conditions.
- Deal with inequitable funding to some counties in the state.
- Create PSA's, media campaign, to increase awareness about Alzheimer's and dementia.
- Maximize available resources to share/identify resources i.e., a statewide clearinghouse for educational materials made available to all.
- Partner with private organizations to share resources.
- Develop outreach to MD's and residents with a checklist to help make decisions about hospitalization or release and make shared tools & resources available.
- Develop an educational program for families and caregivers including cultural diversity issues.

# Long Term Services and Supports

Facilitated by: **Robyn Stone, Executive Director, LeadingAge Center for Applied Research**

Recorded by: **Misha Werschkul**

Washington has been very successful in the move toward more cost effective and popular home and community based long term services and supports. Our next challenge is financing reform. Our state Medicaid program, the safety net for long term care, will not be able to sustain the rising demand in the future.

- How can we better serve the “pre Medicaid” population and support families in taking care of their own loved ones for as long as possible?
- How can we leverage private resources to pay for long term care and incentivize people to prepare for future costs?

## Other Input from Sessions

- Pursue the Community First Choice Option in 2014 to get federal dollars to fund enhancements for aging and DD.
- Develop more upstream approaches to better support unpaid family caregivers:
  - Expand the T-CARE program, make available at community level and make culturally competent.
  - Translate the “Powerful tools for Caregivers” program and improve the cultural competency of program.
  - Explore ways to train families and informal caregivers together.

## Long Term Services and Supports:

### TOP 5 IDEAS

- Washington should pursue short and long-term approaches to bringing in additional resources to finance long-term services and supports. In the short term, Washington state should pursue the **Community First Choice Option** to bring in additional federal dollars to re-invest in home and community based services and supports for pre-Medicaid population. In the longer-term, the state should create a **public social insurance system** to help families save for their long-term care needs.
- There is a need for **additional supports for the pre-Medicaid population**, including expanding **Aging and Disability Resource Centers (ADRCs)** statewide to provide options counseling and navigation supports.
- Washington’s long-term care system relies on paid and unpaid caregivers who need additional supports. Options include expanding the **T-Care** and **Family Caregiver Support** programs, promoting **cultural and linguistic competency** in the workforce, and **addressing turnover for the paid workforce**.
- Washington must address **funding issues** in our existing LTSS system and restore programs that were cut during the recession. This includes both **service restorations** and **vendor rate restorations**.
- Washington has been successful in moving people from institutional to home and community based settings yet we do not have a robust system of quality metrics for our home and community based system. A final immediate action item is to invest in **developing a robust quality and workforce metric system for our HCBS system**.

- Use CMS dementia training as a resource for family caregivers.
- Need additional support/investment in (under)paid caregivers.
  - We rely on family caregivers but are going to be less able to rely on them in the future since there are limits on what they can do – need robust paid workforce which requires addressing turnover and recruitment problems.
  - Create state incentives to get people to become LTC workers.
  - Pursue Federal Basic Health Option and improve access to health insurance for paid workers.
  - Prepare for diversity of aging population by supporting a diverse workforce – 70+ languages, need for cultural and linguistic competency, LGBTQ older adults.
- Increase Funding to Expand Aging and Disability Resource Centers.
  - Provide help to the pre-Medicaid population by providing options counseling and navigation, helping families buy what they actually need, supporting caregivers, and helping with living wills and powers of attorney.
  - Also need marketing of the availability of ADRCs as a resource.
  - Re-establish gate keeper program.
- Need state level financing options to help middle class families prepare for LTSS needs.
  - Develop public insurance option to bring private dollars into LTC/LTSS system - state level social insurance/ state level CLASS Act.
  - Look at Hawaii's approach or German system.
  - Revive Braddock payroll tax idea.
  - Key is to bring private resources into system – also could have a private wrap around to public program?
  - Maybe take incremental approach to helping families prepare for risk of LTC/LTSS.
  - Thoughtfully set level to trigger benefits.
  - Should be mandatory – “everyone in”.
  - Recognize limitations of private LTC insurance.
  - Need to address growing income inequality, low wages so people have money to save for LTSS needs – some ideas include statewide higher minimum wage, robust transportation and capital budgets.
  - Create options for older wealthy people to save money in retirement plans for next generation – support intergenerational financing.
- Expand Medicaid as co-insurance for LTC/LTSS.
- Increase income/asset levels so more people qualify for Medicaid LTSS (like England is doing).
- Provide increased support for community LTSS providers and develop new partnerships with these providers – for example, develop new provider models (e.g., villages) to cover full continuum of care and new partnerships around care transitions.
- Look at Medicaid payment structures – does payment match acuity? Does it match changing provider roles? \$11M in cuts has impacted system.
- New additional state revenue to fund services for seniors + rest of state government – need tax reform.
- Need a new approach to quality – establish core indicators for home and community based services that are transparent.
  - Include freedom from abuse and neglect, consumer choice in quality indicators.
  - Workforce indicators (like turnover) can be proxy for quality.

- Expand Senior Citizens Services Act funding – funds senior meals, respite care, ombudsman – program needs to be increased to serve growing population.
- Create a sliding fee schedule for Medicaid LTSS services -Medicaid buy in? Increase access to home care for pre-Medicaid group.
- Create a greater focus on people who need guardianship/can't make decisions for themselves and also look at alternatives to guardianship.
- Need reforms to housing laws to allow housing providers to do interventions and better connect housing to services
- Look at ways to better leverage veterans resources/LTC benefits – federal \$\$.
- Build on Community Based Care Transitions Program and Health Homes – need savings to come back into LTC system. Maybe expand Community Based Care Transitions Program?
- Build on best practices from existing providers – specialized dementia care for example – and expand into other settings to support aging in place.
- Keep in mind health disparities, income inequality, and impact of marginalization within aging population.

## Next Steps

- **Share with the broader community** - the ideas generated at the Aging Summit will be shared with the broader community and presented at the annual Senior Lobby conference on October 18th, 2013.
- **Report to the Aging and Disability Committee** - nearly all of the members of the Joint Executive-Legislative Committee on Aging and Disability were present at the Summit. The ideas explored at the Summit will jump start the work of this committee. The committee next meets on November 4, 2013.
- **Identify specific budget and legislative priorities, both short-term and long-term ideas** - the ideas generated at the Summit will inform the Office of the Governor and the new Joint Committee as they develop specific budget proposals and policy initiatives.

We are working hard to make Washington an age-friendly place to live, as well as a friendly place to age. This is an opportunity for our state to do some groundbreaking work in our communities.

– Governor Inslee

**This is an abridged version of proceedings. The full document - with list of participants, planning committee, speaker & facilitator biographies and recommended Pre-Reads and Resources – may be accessed on the Aging Summit section of the State Council on Aging webpage:**

<http://www.aasa.dshs.wa.gov/professional/hcs/scoa/summit.htm>