

Multisector Plan for Aging Toolkit Engaging Stakeholders and Community Members

To ensure an inclusive and comprehensive multisector plan for aging (MPA), efforts must be made to bring stakeholders and community members together to identify needs and priorities within the state, align around common, high-level goals, and provide feedback throughout implementation of the plan's initiatives.

This toolkit module explores key strategies for involving a wide range of stakeholders in the MPA process, including advocates and older adults themselves, as well as nontraditional partners, such as private employers and faith-based organizations.

1. Identifying Stakeholders, Including Community Members

Given their breadth, MPAs include input from aging and disability stakeholders, as well as stakeholders who may not traditionally focus on aging. Involving disability leaders and advocates is especially important as there are many overlapping services, programs, goals, and needs between aging and disability sectors, and all people with disabilities are aging. In **California**, for example, disability advocates, including from Disability Rights California (DRC), were engaged in early efforts to secure buy-in for an MPA, and DRC subsequently [developed principles](#) to guide its participation in MPA development, which other states can reference to ensure their plan includes people aging with disabilities.

Traditional stakeholders to consider involving in the MPA process include:

- **Aging and disability advocacy organizations**, such as the Long-Term Care Ombudsman, state chapters of AARP, Disability Rights, the Alzheimer's Association, and Centers for Independent Living.
- **Local and county aging services agencies**, such as Area Agencies on Aging, Aging and Disability Resource Centers, offices of rural health, private social services organization (e.g., Catholic Charities, Jewish Family Services), and care management organizations.
- **Health care providers**, such as Age Friendly Health Systems, health plans, federally qualified health centers, and community clinics.



Multisector Plan for Aging Toolkit

States across the U.S. are pursuing high-level, cross-sector planning efforts to ensure that the needs of older adults, people with disabilities, and their caregivers are met over the coming decade.

This module is part of the [Multisector Plan for Aging Toolkit](#), which outlines steps to support states and their partners in developing, implementing, and revising an MPA. It offers concrete strategies and practical tools that states can use to advance their MPAs. Access the full toolkit at www.chcs.org/mpa-toolkit.

- **Long-term services and supports operators**, such as Programs of All-Inclusive Care for the Elderly (PACE), nursing homes, assisted living and adult day programs, home health agencies, congregate meal sites, Meals on Wheels, and senior transportation services.
- **Direct care workers**, direct care worker unions, and [family caregivers](#).
- **Community-based organizations**, such as faith-based organizations, volunteer and humanitarian service organizations, village model programs, senior centers, and caregiver support organizations.
- **Community members**, with a focus on older adults, people with disabilities, and people from underrepresented populations — though people of all stages of life are encouraged to offer input.

Engaging partners not typically focused on aging and disability ensures that the MPA incorporates a range of perspectives and helps partners see themselves and their work reflected in the plan. Nontraditional stakeholders to consider include:

- **Academic and research partners**, such as colleges and universities, and research institutions.
- **Economic development partners**, including large employers or industry leaders, local businesses, and department of commerce.
- **Recreational partners** like department of parks and recreation, community centers, YMCAs, public libraries, arts councils, and performing arts spaces.
- **Emergency and disaster preparedness leaders**, such as first responders, Red Cross chapters, humanitarian organizations, epidemiologists, emergency response, and related commissions.
- **Infrastructure leaders** like community planners, local housing and transportation authorities, tenant associations, nonprofits, advocates, and service providers.

Including representation from various communities ensures that the needs of all people across the state are met. Aim to engage with people from different backgrounds, socioeconomic statuses, and regions of the state. Community engagement activities should include members of communities who are not typically involved or represented in other state engagement or planning processes, or whose voices are typically overlooked. These communities may differ by state.

To aid in deciding which stakeholders to engage, consider using CHCS' [stakeholder analysis template](#) to examine key considerations, such as stakeholders' current level of engagement or interest in aging topics, level of influence on priority topics, and capacity to participate in engagement activities. Circulate this template among trusted state partners for additional suggestions and connections.

2. Conducting Stakeholder and Community Engagement

There are different ways to engage with stakeholders and community members when developing and implementing an MPA. Engagement activities can range in terms of effort, time, and resources, and states may find some engagement activities more suitable for gathering certain types of feedback. Reviewing a community engagement continuum, such as the one in a [report developed for Massachusetts](#), can be helpful in understanding how and when to engage stakeholders and community members, as well as identifying the activities that best match the type of feedback the state is seeking.

In addition to participating in ongoing workgroups or subcommittees, the following table provides an inventory of key activities states might consider when engaging stakeholders. For each activity type, it outlines advantages and challenges, considerations, and state examples.

Engagement Activities: Examples and Key Considerations

Engagement Level	Advantages & Challenges	Key Considerations	State Examples
Public Awareness Events: Sharing information and updates about the MPA (e.g., its purpose, the development process, opportunities for engagement) via public events, communications, and/or media opportunities.			
Inform	<p>Advantages 👍</p> <ul style="list-style-type: none"> Elevates MPA and local leader’s voices and experiences May increase participation in other engagement activities <p>Challenges 🚧</p> <ul style="list-style-type: none"> Unilateral engagement with little feedback collected 	<ul style="list-style-type: none"> Partner with community-based organizations and other prominent stakeholders to help publicize events or share communications. 	<ul style="list-style-type: none"> California hosted Webinar Wednesdays, with each session focused on a particular MPA topic and featuring one local leader, one state leader, and one stakeholder. North Dakota hosted a Lunch & Learn Series to educate the public on the state’s aging services and programs. Oklahoma promoted its MPA through in-person events, earned media opportunities, and social media promotions, and is recruiting community members to serve as MPA ambassadors to assist with awareness, advocacy, and participation in local events. Pennsylvania launched a year-long partnership with Pennsylvania public broadcasting stations after the release of its MPA to provide programming and discussions focused on multi-sector aging in the state.
Surveys and Assessments: Collecting information from a representative group to understand broader issues and priorities of the population. These activities can be statewide or focused on important sub-populations, such as demographic groups or recipients of specific programs or services.			
Consult	<p>Advantages 👍</p> <ul style="list-style-type: none"> Provides baseline quantitative assessment to track progress Shows where unmet needs may be Lack of responses from certain populations can help determine where to focus future engagement Allows for anonymous input <p>Challenges 🚧</p> <ul style="list-style-type: none"> Can be difficult to survey a statistically representative sample May not reach underserved/under-engaged populations Lacks rich qualitative data No chance for follow-up questions, unless anonymity is broken 	<ul style="list-style-type: none"> Take inventory of existing assessment and survey data to determine whether new surveys are necessary to fill gaps in data. Ensure surveys are accessible for all users and available in multiple languages and formats (paper, online, phone). Partner with community-based organizations to assist with dissemination and helping individuals complete the survey when necessary, which can also help build relationships and engagement. 	<ul style="list-style-type: none"> Colorado uses CASOA as its state needs assessment and is utilizing that data in MPA development. Vermont used AARP’s standard Age-Friendly Community Survey to assist with MPA development. Oklahoma developed a state-wide focus area survey to collect information related to the MPA’s focus areas. Massachusetts developed a ReiMagine Aging refresh survey to gather feedback on the first few years of MPA implementation and inform the plan’s refresh.

Engagement Level	Advantages & Challenges	Key Considerations	State Examples
<p>Public Comment Forms: Allowing individuals to provide feedback on proposed goals, initiatives, policies, or other aspects of an MPA, and/or asks individuals to share their questions, priorities, and experiences regarding aging in the state.</p>			
<p>Consult</p>	<p>Advantages 👍</p> <ul style="list-style-type: none"> • Simple to deploy and use for analysis • Allows for anonymous input <p>Challenges 🚧</p> <ul style="list-style-type: none"> • May be difficult to reach those who are not already engaged or outside the traditional aging sector • No chance for follow-up questions or communication, unless anonymity is broken 	<ul style="list-style-type: none"> • Ensure form is accessible for all users and available in multiple languages and formats (paper and online). • Consider keeping the form open for the duration of the MPA to collect continuous input through all phases, or creating new forms for different phases of the process. • Use existing community partners and communication channels to increase awareness and reach of the form. 	<ul style="list-style-type: none"> • Missouri has a public comment form at the bottom of its MPA web page. • Vermont has a similar form at the bottom of its MPA web page and a dedicated email address for public input on the MPA. • North Dakota conducted a survey to gain feedback on the proposed broad goals for its MPA. • Pennsylvania and Utah posted drafts of their MPAs on their web pages along with a public feedback template to collect feedback on the drafts and incorporated that feedback into the final plans.
<p>In-Depth Interviews: Speaking with a small number of stakeholders and/or community members one-on-one about a specific topic — such as the challenges accessing or delivering a certain service/program, living in a certain community, or having particular health or functional needs — to consider how that topic fits within the MPA.</p>			
<p>Involve</p>	<p>Advantages 👍</p> <ul style="list-style-type: none"> • Rich data, stories, and perspectives that can inform a more equitable and person-centered MPA • Builds rapport and relationships • Allows for anonymous input <p>Challenges 🚧</p> <ul style="list-style-type: none"> • Time consuming to conduct and synthesize feedback • Results are not generalizable to broader population • Interviewer bias can impact responses 	<ul style="list-style-type: none"> • Be flexible about the timing of interviews. Community members especially may not be able to meet during business hours. • Work with a skilled interviewer who has experience interviewing community members and using trauma-informed principles. Include adequate time in project timeline and sufficient budget to identify and compensate an interviewer. • Plan to take detailed notes (or have a note-taker) as recording calls with community members can be a sensitive request and is not considered a best practice when working directly with community members. • See this resource from UCLA Center for Health Policy Research for additional considerations and tips. 	<ul style="list-style-type: none"> • While not specifically for MPA purposes, The SCAN Foundation’s The People Say project conducted over 100 hours of interviews with older adults to build a qualitative research platform based on their experiences and the issues most important to them. • Potential interview topic examples: <ul style="list-style-type: none"> ▶ Uncovering challenges to accessing physical/behavioral health care services by individuals experiencing homelessness. ▶ Understanding a small group of older adults’ experiences accessing home and community-based services. ▶ Uncovering the challenges faced by nursing facility providers or direct care workers as they try to strengthen their workforce.

Engagement Level	Advantages & Challenges	Key Considerations	State Examples
<p>Focus Groups: Engaging perspectives from specific group(s) of stakeholders and/or community members to learn how their experiences overlap and/or differ from each other and from other groups to help inform the MPA. Conversations are structured with guided discussion questions and led by a facilitator. These are often organized by sector/domain, population, or geographic region.</p>			
<p>Involve</p>	<p>Advantages 👍</p> <ul style="list-style-type: none"> Rich data, stories, and perspectives that can inform a more equitable and person-centered MPA Builds rapport and relationships Enables people with shared identities to relate their experiences and perspectives in a safe “closed door” environment Allows for anonymous input <p>Challenges 🚧</p> <ul style="list-style-type: none"> Time consuming to conduct and synthesize feedback Group dynamics and facilitator dynamics may influence responses 	<ul style="list-style-type: none"> Budget for translation, technology, and/or disability accommodations for participation. Be flexible about the timing and format of the sessions. Consider lunch hour and/or evening session(s) to accommodate community members with various work schedules. Work with a skilled facilitator who has experience working with community members and using trauma-informed principles. Include adequate time in project timeline and sufficient budget to identify and compensate a facilitator. 	<ul style="list-style-type: none"> North Dakota conducted focus groups for LGBTQ+ older adults in response to feedback that they did not feel comfortable sharing in public listening sessions. North Carolina conducted shared-identify focus groups with African American, Hispanic/Latino, Jewish Heritage, LGBTQ+, and Indigenous Lumbee Tribe members and reported findings and recommendations by MPA domain area. Vermont conducted focus groups on caregivers and equity.
<p>Town Halls/Listening Sessions: Offering an open public forum to hear feedback and suggestions from a larger group of stakeholders and/or community members. These are typically less structured than focus groups and are often organized by geographic region and/or by sector/domain.</p>			
<p>Involve</p>	<p>Advantages 👍</p> <ul style="list-style-type: none"> Hear from a variety of people on a range of topics Builds rapport and relationships <p>Challenges 🚧</p> <ul style="list-style-type: none"> Time consuming to conduct and synthesize feedback Group dynamics may influence responses Can be difficult to recruit participants beyond the people who are typically engaged 	<ul style="list-style-type: none"> Budget for translation, technology, and/or disability accommodations for participation. Partner with local organizations like Area Agencies on Aging and senior centers to assist with recruiting participants and facilitating the sessions. Consider free transportation to and from the meeting space, and offering sessions in multiple geographic areas and at different times of day, to support participation. Be mindful of expected attendance and capacity of meeting spaces. Offer virtual options for those who cannot attend in-person. 	<ul style="list-style-type: none"> Pennsylvania conducted over 200 listening sessions, holding at least one in each of the state’s 67 counties, targeting people “engaged with or affected by older adult and disability related services, programs, and infrastructure.” Oklahoma conducted 10 regional listening sessions across the state, two in-person and one virtual listening session for elder tribal members, four statewide virtual listening sessions for targeted professions and stakeholders, and five in-person listening sessions in Oklahoma City focused on key sub-populations (older Oklahomans, aging advocates, Black Oklahomans, Oklahomans who are Spanish-speaking, and faith-based leaders). Minnesota hosted a three-day regional exchange with both in-person and virtual listening sessions that was attended by over 850 people.

Engagement Level	Advantages & Challenges	Key Considerations	State Examples
Advisory Committees: Convening a small group of stakeholders and/or community members through a formal mechanism to shape the MPA across its lifecycle.			
Collaborate	<p>Advantages 👍</p> <ul style="list-style-type: none"> • Subject matter experts and other influencers can drive and sustain change • Can assign specific tasks to be completed <p>Challenges 🚧</p> <ul style="list-style-type: none"> • Time consuming • Balancing politics and relationships in the member selection process 	<ul style="list-style-type: none"> • Be open and transparent during the outreach process regarding the purpose of the advisory committee, roles/responsibilities, assigned tasks, time commitment, and compensation. • Be intentional about who you invite to participate, striking a balance between having representative participation without the committee being too large for effective facilitation and communication. • Budget for translation, technology, and/or disability accommodations for participation. • Be flexible about the timing and format of the sessions. Consider lunch hour and/or evening session(s). 	<ul style="list-style-type: none"> • The Aging Texas Well Advisory Committee consists of older adults, family caregivers, Area Agency on Aging members, Aging and Disability Resource Center members, and other service providers and advocacy organizations. It advises the Texas Health and Human Services Commission and makes recommendations to state leadership on MPA implementation. • California has six ongoing stakeholder advisory committees that meet several times per year to give input on MPA oversight and specific topics that the MPA addresses.
In-Person Convenings: Inviting stakeholders and community members to an in-person convening as participants or presenters/facilitators. These sessions are more collaborative in nature than an in-person town hall or listening session, with participants and leaders co-working on an identified topic or assignment.			
Co-design	<p>Advantages 👍</p> <ul style="list-style-type: none"> • Participants may feel more directly involved and influential • Focused discussions can lead to more action-oriented recommendations • Subject matter experts in attendance <p>Challenges 🚧</p> <ul style="list-style-type: none"> • Most time-intensive and high-cost option 	<ul style="list-style-type: none"> • Build in time and budget for both administrative support and travel coordinator support. • Be transparent about the purpose of the convening and the task to be accomplished during the session. • Leverage existing partnerships to identify and invite relevant subject matter experts and key community members. Consider inviting individuals who were active in other engagement activities. 	<ul style="list-style-type: none"> • Minnesota hosted four in-person Action Team Convenings each focused on a topic area where participants collectively explored, vetted, and prioritized public feedback collected within each of the topic areas and identified gaps in feedback. • Washington State convened an Aging and Longevity Summit where state leaders and advocates discussed key priority areas and identified opportunities for collaboration within the MPA. • Potential convening example: <ul style="list-style-type: none"> ▶ Inviting Medicaid members to an MPA strategy session with health care or long-term services and supports subcommittee members to discuss next steps for the implementation of related MPA initiatives.

Best Practices for Developing Engagement Activities

When developing engagement activities, consider the following best practices:

- **Ensure materials and facilitators use language that promotes inclusivity and is free of age bias**, including communication best practices from the [National Center to Reframe Aging](#).
- **Consider compensating community members for their time**, especially for engagement activities that are more intensive and time-consuming, such as serving on an advisory committee or attending an in-person convening.
- **Make engagement activities more accessible**, particularly for in-person activities. Consider:
 - ▶ **Transportation:** Offer dedicated transportation or reimburse participants for mileage to and from a meeting location, flights, hotel, parking, public transit, or taxis and ridesharing apps.
 - ▶ **Meals:** If meetings are scheduled during mealtimes, consider providing food.
 - ▶ **Caregiving:** Offer onsite adult or childcare, or offer care stipends, to participants.
 - ▶ **Translation/interpretation:** Both real-time and in written materials, based on participant needs.
 - ▶ **Disability accommodations:** Ensure accessible equipment, technology, and meeting spaces.
 - ▶ **Technology support:** Provide internet wi-fi and instructions for joining an online meeting.

The Administration for Community Living developed a [Community Engagement Toolkit](#) for its engagement with older adults to inform its National Plan on Aging. Many of the toolkit's strategies and considerations may be useful for state MPA engagement efforts.

3. Analyzing Feedback

States often conduct a variety of different engagement activities in which they collect a large volume of information and feedback. To keep this feedback organized and easy to review, it is helpful to create templates for notetakers and facilitators to use so that all information is submitted back to the steering committee in a standardized and organized format. The templates may be organized by domain, program/service, population or stakeholder type, or any other category that will make it easier for the MPA team to find relevant information when reviewing the feedback.

It can be very helpful to analyze feedback using a qualitative research software like [Dedoose](#) or [NVIVO](#), or to create a system in a readily-available software like Excel or Word to assist with manually analyzing feedback. Some states have worked with academic partners or interns to conduct qualitative analysis of the feedback and share synthesized findings with MPA leaders and relevant stakeholders.

4. Incorporating Feedback

The steering committee and subcommittees that are charged with developing the MPA should review all stakeholder and community member feedback relevant to their assigned goal areas throughout the development of the MPA, including when deciding on the broad goals of the plan, creating and reviewing recommendations for the plan's strategies and initiatives, and making decisions on which initiatives to prioritize within the plan. States should also publicly share the types and number of engagement activities conducted, and the number of voices engaged (e.g., attendees, completed surveys, submitted comments), including a breakdown of feedback organized by goal/domain. This demonstrates active engagement and interest among the public and affirms that the MPA reflects the voices of the people it serves.

During the implementation phase, states should continue engagement efforts to gather feedback on how the MPA is being operationalized, whether it is meeting its goals, and how the needs and priorities of the population are changing over time. This information should be incorporated into the updated plan during refresh periods.

Throughout all phases of the MPA, it is important to [establish strong and purposeful feedback loops](#) with the stakeholders and community members that provided input at any point in the process. If someone makes a recommendation for the MPA or raises a question or concern, follow up on the status of that feedback, even for recommendations that cannot necessarily be implemented exactly as suggested or questions that cannot be directly answered.

Stakeholders and community members will appreciate knowing how information is acted on and where their voices are making a difference. States can provide updates on how feedback is being used by publishing information about engagement activities and their results (see this example from [Missouri](#)), responding directly to feedback sent via email, or sharing updates during public meetings and events. States should also continually share updates on the timeline of the MPA process to manage stakeholders' expectations and keep them involved.

Massachusetts' ReiMAgine Aging Podcast

Throughout its MPA implementation, **Massachusetts** produced a [podcast](#) highlighting the experiences of older adults and people with disabilities living in the state and illustrating how the MPA addresses and aims to improve their experiences, and the experiences of people caring for and serving them. This is a great example of how states can continue to show that they are listening to the concerns community members express and centering their voices and experiences in the MPA even after it is developed.