I. Welcome and Introduction
   A. Welcome NIH Health and Wellness Council Co-Chairs
   Jill Bartholomew and Cooper McLendon wanted to thank everyone for joining and welcome the NIH Health and Wellness Council Co-Chairs Udana Torian (NCI), and Stacie Rios (OD). Both Udana and Stacie were happy to join the group and look forward to working together.

II. Special Guest Presentation
   A. Sarah Henke, RD, LD, CNSC: “Nutrition Considerations in Aging”
   Sarah Henke is a clinical research dietitian at the NIH Clinical Center. In her presentation, Sarah shared that the United States has the fastest growing age group with an average life expectancy of 78.5 years according to the World Bank.
   i. Sarcopenia is the loss of muscle tissue as we age which is caused by a lack of aerobic activity and resistance training. This can lead to increased frailty as we age. Weight bearing exercise can have a significant impact on the preservation of muscle mass. It is recommended that older adults have 150 minutes a week of moderate-intensity aerobic physical activity of at least 10 minutes in duration at a time.
   ii. Dehydration as we age is common due to an impaired thirst mechanism. This can impact kidney function and lead to other health issues. The diets of older adults also lack the nutrients they need. As we age a diet is just as important as physical activity.
   iii. Research is showing that intermittent and periodic fasting may affect longevity and can promote cell protection and repair. The popular Mediterranean diet can be effective with less focus on meats and more focus on fruits and vegetable intake with beans being a source of protein.
III. Updates

A. AADCC Project Updates

i. Surveying the Adult Care Support Listserv- Jill, Martina, Dan
   o Currently evaluating but the group does not feel now is the right time for a survey but will seek informal feedback about topics and areas of interest. The group shared their ideas on ways to increase the awareness of the AADCC and how to reach potential new members. The listserv can ask subscribers for feedback about what they would like to see. Also, highlight employees with 20 plus years at NIH and get their “pearls of wisdom” that could help others. Sharing information with other listserv’s and committees will also be helpful.

ii. Collect data to determine target audiences for AADCC related content-No Volunteers
   o Let Jill or Cooper know if you would like to volunteer for this task. Currently not a high priority and may be combined with another task.

iii. Stakeholder Engagement & Benchmarking- Chris
   o The goal is to collaborate with other groups. Having the Health and Wellness Council co-chairs is a start. Chris is reaching out to the Child Care Board as well.

iv. Identify trans-NIH initiatives- Jill, Melissa, Alisha
   o The group agreed that his task will be merged with stakeholder groups.

v. ORS Website- Debbie, Melissa, Chris, Mark
   o The group is looking to move the AADCC to another tab separate from the Child and Family tab. This would include a banner that has committee information and crosslink to other pages.

vi. Explore relevant issues that impact target audiences - Mark, Martina, Jenny
   o The group shared their ideas on ways to increase the awareness of topics, issues and services that are of interest to the NIH workforce as it “ages” and as it is faced with adult dependent care/caregiving responsibilities. Recommended the AADCC website be linked to the NIH/HR retirement page, containing helpful information. There is also an HR benefits events calendar that can be added to the AADCC website. The group also designed a tree diagram that has links to a variety of topics that could be added to the AADCC website.
   o Will work closely with Adult Listserv group to obtain input from subscribers as to what they are interested in, what their needs are, etc.

vii. AADCC Branding and Communications- Mark, Cooper, Dan, Carla
   o The group discussed proposing a change to the mission statement to better fit what the committee does. Using the word “dependent” may
seem like younger persons. Using seniors could be an option but there should be a word to cover all populations. Not all adults are dependent. Adults taking care of adults or parents taking care of loved ones. The current and proposed statement were included on the slide. The committee will revisit this.

viii. Communications Calendar- Sonia & Ryan  
- The group met briefly. They determined that compiling a list of all of the listservs by the next meeting will be beneficial. Using the listserv rather than a global to share information that can be linked to a calendar of events on the website. The group will have this list by the next meeting.

ix. Health Screenings Calendar- Dawn & Virgilio  
- Virgilio used the CDC adult immunization schedule and modified it to older adults. The US Preventative Services Task Force also has a list. This information can be included in a handout when we return to work or include a link in a QR code that can be included in posters. OMS could also promote this information as well.

x. Engagement and Competition- Chris & Melissa  
- No updates

xi. Webinars/Speaker Management- Jill, Mark, Virgilio, Chris  
- Send Jill suggestions for September, October or November.

xii. Benchmarking-Chris, Cooper  
- In progress and will revisit.

xiii. Newsletter- Melissa & Chris  
- Melissa submitted an article regarding the membership drive for the quarterly newsletter. Chris will also combine it with the Fit 4 You and add it to the listserv. The newsletter will be live around July 1.

xiv. Analyze AADCC relevant FEVS data- Dede & Debbie  
- No updates

IV. Upcoming AADCC Membership Drive  
The list of current term expirations was shared. Jill and Cooper will be asking members if they would like to renew their term for an additional three years. Voting members may serve no more than one initial partial term, plus two additional three-year terms. Jill and Cooper will be staying on but will also be recruiting two new co-chairs. Committee members are asked to reach out to colleagues that may be interested.

V. Implicit Bias Training  
Cooper shared the response that was sent to Dr. Marie Bernard who is the Deputy Director of the National Institute on Aging regarding the lack of older persons as examples in the Implicit Bias training. Dr. Bernard thanked the AADCC for raising this issue and said that it will be helpful for future planning.
VI. **Joe Balintfy, AADCC Member**

Joe has returned after stepping away due to his mother having Covid-19 and he wanted to share his experience. He wanted to thank everyone for their support and let everyone know that his mother is back to living independently. One of the many lessons he learned was the need for financial plans for yourself and your family. Dealing with an older parent’s health crisis is a battle that you need a lot of resources for. It was approximately an 18-month process and he had to be her advocate. His mother was in between a hospital, acute rehab, and sub-acute rehab during which she also suffered delirium. He was her medical power of attorney but had still had trouble getting information and paying medical bills. Medicare also has a 100-day cutoff if a patient has plateaued in their recovery. Which he was able to get two extra weeks with a second appeal after the first appeal was denied. Her care is continuing six hours a day for five days a week.

VII. **Open Discussion**

The FDA approved a drug for the treatment of Alzheimer’s, but it is controversial. Joe will try to get a speaker for the September meeting to discuss.

VIII. **Announcements and Adjournment**

The next meeting will be September 21st