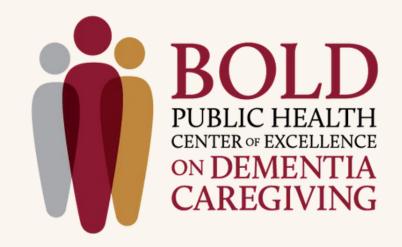
Partnering with GWEPs in Dementia Caregiving and Education: Opportunities for Public Health

December 7th, 2023

A collaboration between:







Welcome from...



Joseph E. Gaugler, PhD

Director, BOLD Public Health Center of Excellence on

Dementia Caregiving

Professor and Robert L. Kane Endowed Chair in Long-Term

Care & Aging, University of Minnesota

His research examines innovation in dementia care.



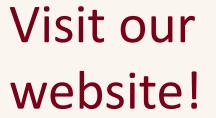
Land acknowledgement

The University of Minnesota Twin Cities is located on traditional, ancestral, and contemporary lands of Indigenous people. We acknowledge with gratitude the Land itself and the People. We take to heart and commit through action to learn and honor the traditional cultural Dakota Values: Courage, Wisdom, Respect and Generosity.



The BOLD Public Health Center of Excellence on Dementia Caregiving (PHCOE-DC)

Designed to support state, tribal and local public health agencies nationwide in developing their dementia caregiving-focused programs and initiatives, by...





Improving access to evidence-based programs and best practices.





Facilitating connections and collaboration among public health agencies and a wide range of service organizations.



Providing technical assistance for identifying, selecting implementing effective public health interventions and strategies.



Minnesota Northstar Geriatrics Workforce Enhancement Program (MN GWEP)

The purpose of the MN GWEP is to improve the healthcare and health of older adults across the entire state of Minnesota.



The Minnesota Northstar GWEP is a five-year project funded by the Health Resources and Services Administration (HRSA), the primary federal agency for improving health care for people who are geographically isolated and economically or medically vulnerable.

A goal of the Minnesota Northstar GWEP is to facilitate and strengthen meaningful support and collaboration of key partners in the geriatrics field. The University of Minnesota and eight community partners are working to:

Visit the website!



- Provide greater access to community education in aging and dementia,
- Improve geriatrics training in health professions, and
- Transform primary care clinical training and practice sites to provide Age-Friendly care



We value your feedback!

Please give us your feedback before you leave today's webinar!

Scan the QR code to open this survey on your phone or click the link in the chat.





Welcome speakers!

Nina Tumosa, PhD

Senior Public Health Analyst, Geriatrics, Health Resources and Services Administration, Division of Medicine and Dentistry, Medical Education and Geriatrics

Lisa McGuire, PhD, FAPA, FGSA

Lead, Alzheimer's Disease Science Team, Healthy Aging Branch Division of Population Health, National Center for Chronic Disease Prevention and Health Promotion, Center for Disease Control

Victoria Parker, MPH

Manager, Alzheimer's Disease and Related Disorders Program, Rhode Island Department of Health

Faith Helm, MS

Project Manager, Rhode Island Geriatric Education Center, University of Rhode Island Rhode Island, Geriatrics Workforce Enhancement Program

Ted Johnson II, MD, MPH

Division Director, General Medicine, Emory University, School of Medicine - Program Director, Emory GWEP

Elizabeth Head, MPH

Deputy Director, Injury Prevention Program, Georgia Department of Public Health







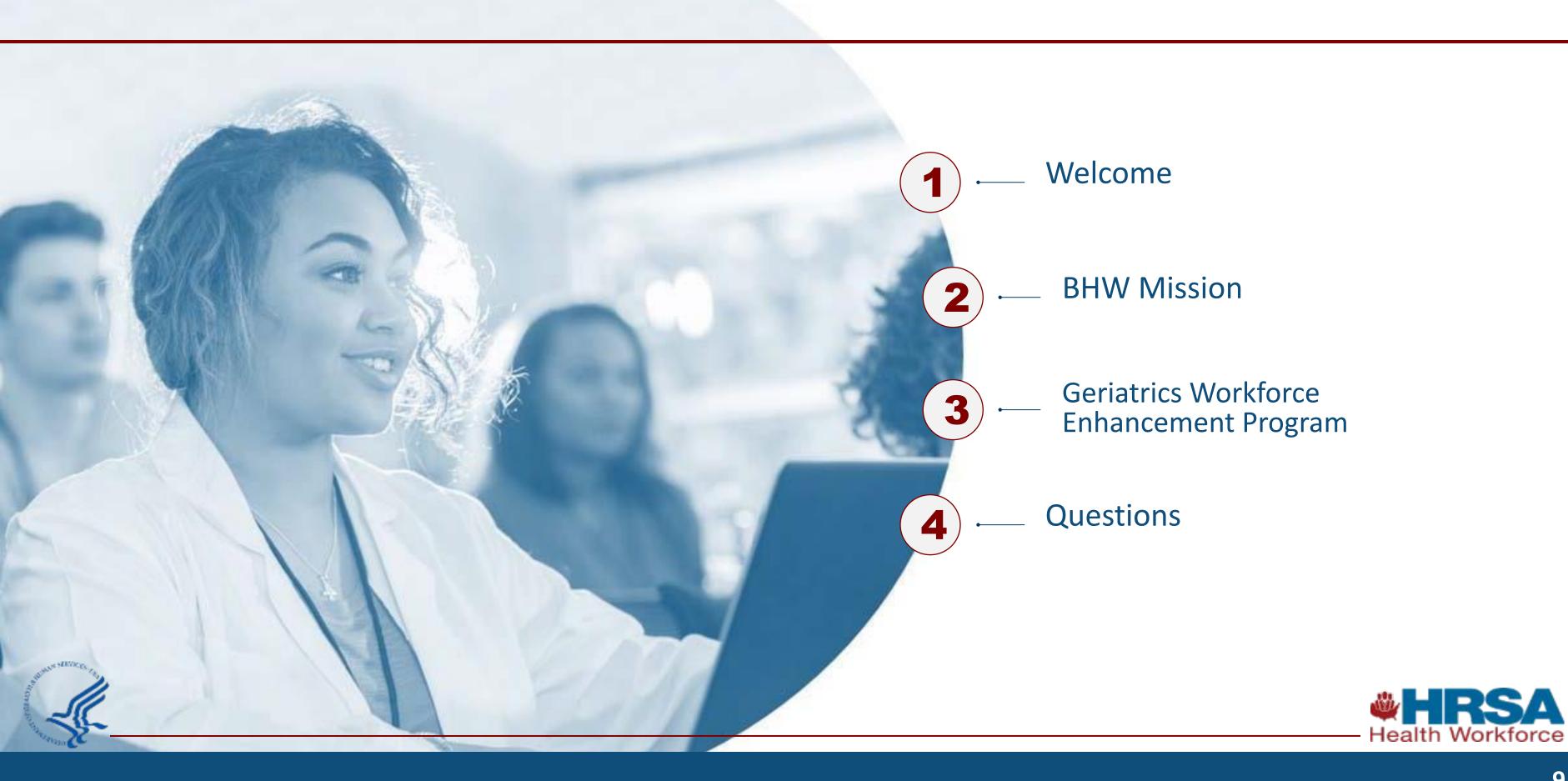
GWEPs Partnering with Departments of Public Health on Dementia Education

December 07, 2023

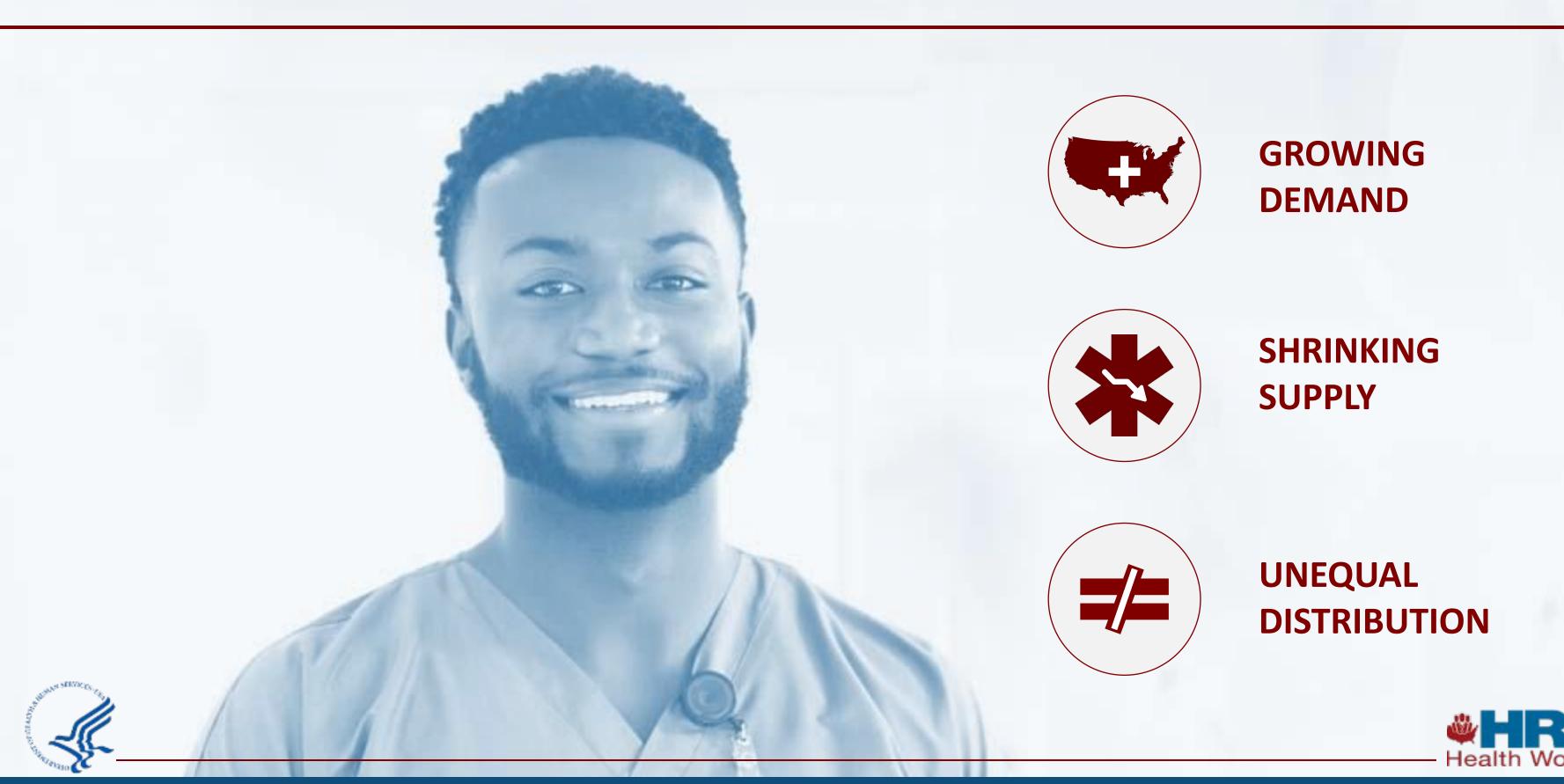
Nina Tumosa
Senior Public Health Analyst-Geriatrics,
Division of Medicine and Dentistry
Bureau of Health Workforce (BHW)

Vision: Healthy Communities, Healthy People





The U.S. Health Workforce



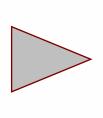
Bureau of Health Workforce

MISSION

Improves the health of underserved populations by

- strengthening the health workforce
- connecting skilled professionals to communities in need













SERVICE





Introduction to GWEPs

- HRSA-funded Geriatrics Workforce Enhancement Programs are in 35 states and 2 US Territories
- Purpose: Improve health outcomes for older adults by developing a healthcare workforce that maximizes patient and family engagement, and by integrating geriatrics and primary care.

Goals:

- Educate and train the primary care and geriatrics workforce to care for older adults across
 the continuum of care, including in nursing homes, and
- Partner with community-based organizations (CBOs), including Departments of Health, to address gaps in healthcare for older adults, promote age-friendly health systems and dementia-friendly communities, and address the social determinants of health.





Geriatrics Workforce Enhancement Program (GWEP)

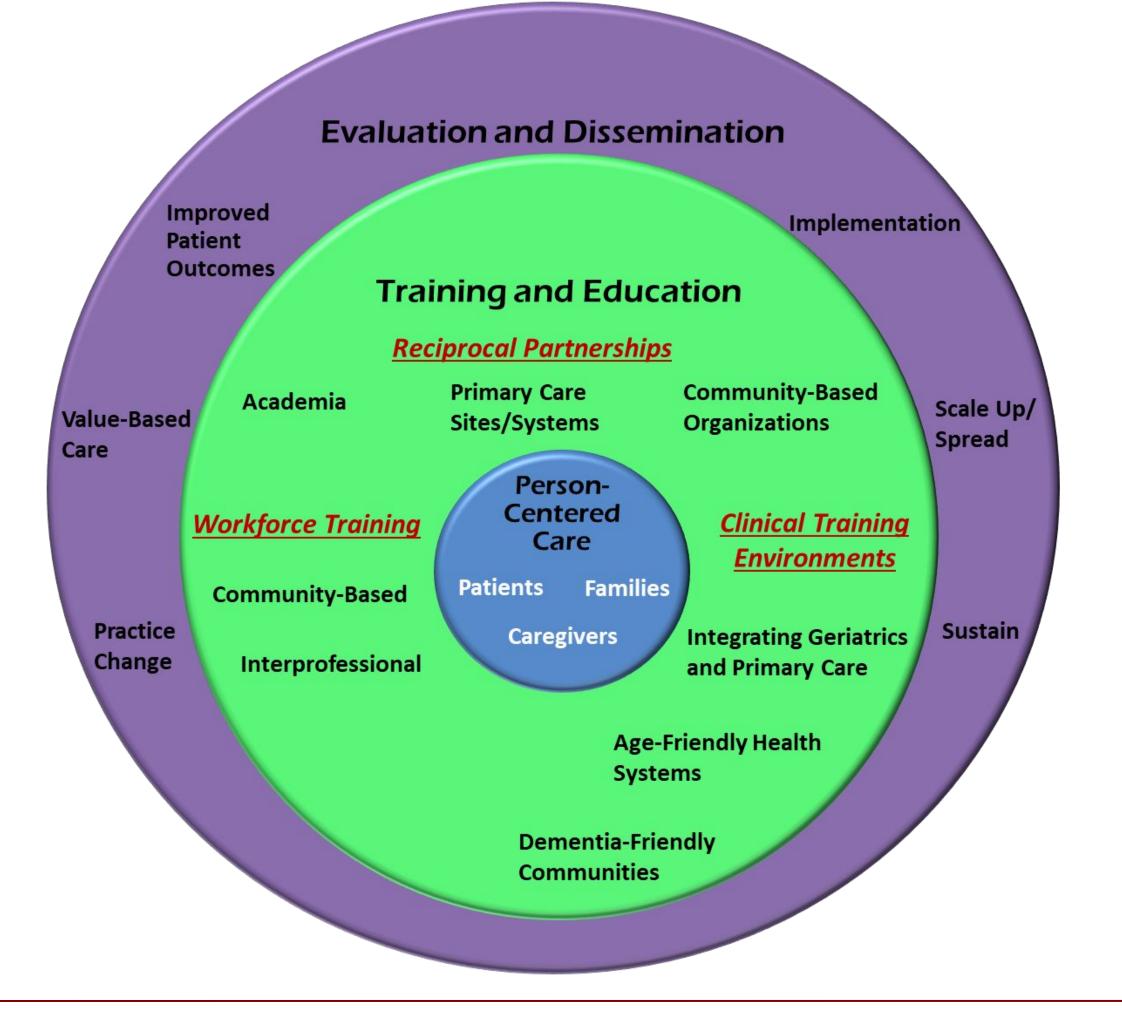
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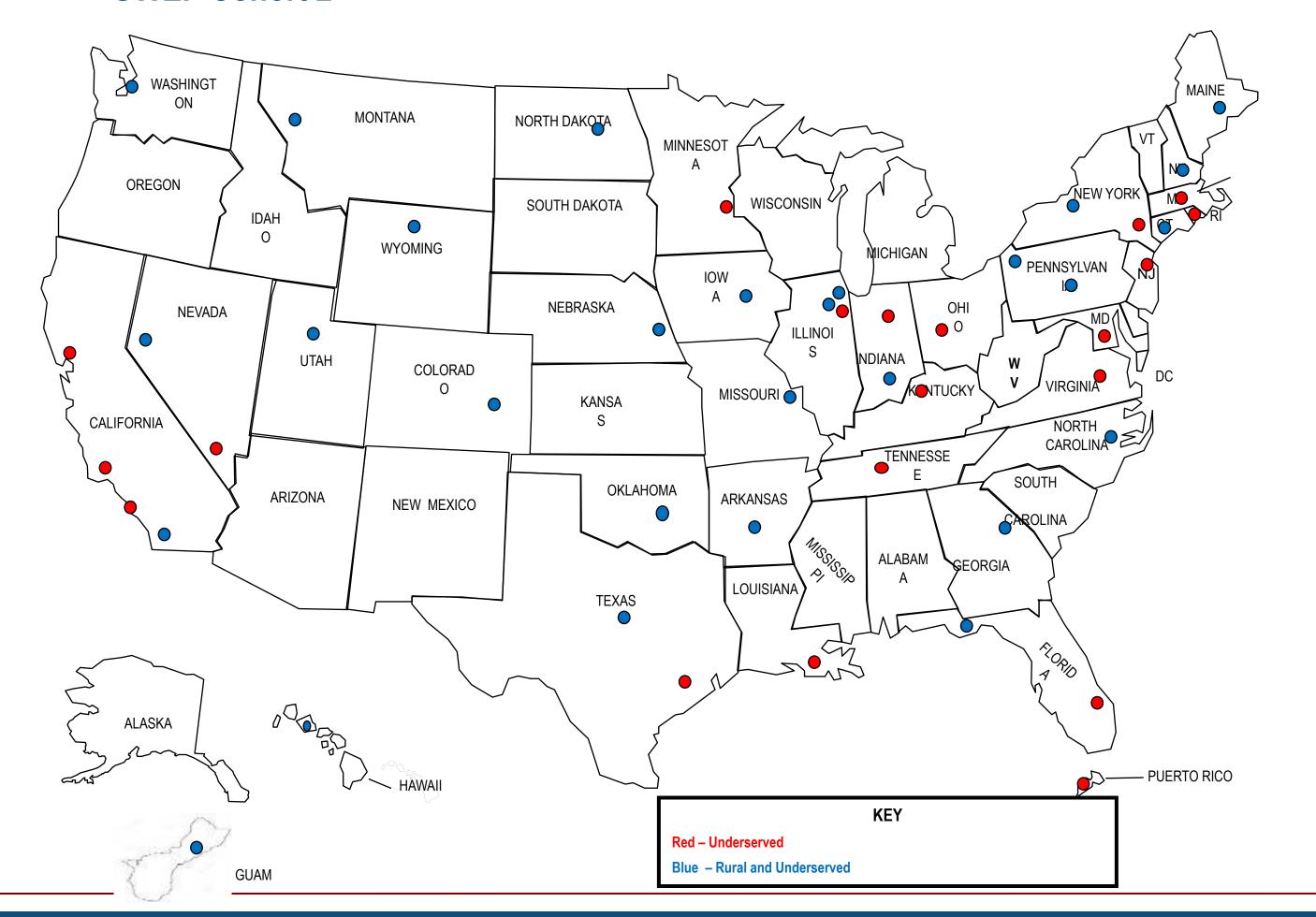
2019 GWEP Cohort Geographic Distribution

- 35 states and 2 territories
- Eight states with at least two GWEPs each:
 - CA, IL, IN, NV, NY, PA, FL, and TX
- 29 states/territories with one GWEP each:
 - AR, CO, CT, GA, GU, HI, IA, KY, LA, MA, MD, ME, MN, MO, MT, NC, ND, NE, NH, NJ, OH, OK, PR, RI, TN, UT, VA, WA, and WY





GWEP Cohort 2



2019 GWEP Cohort Numbers

- The 48 current grantees started with the following required partners:
 - 174 Academic Partners
 - Includes one School of Public Health awardee and 4 partnering Schools of Public Health
 - 391 Primary Care Partners
 - 284 Community Organizations
- By year 4 of the 5-year cycle more partners were added as needed.
 - 389 Academic Partners
 - Includes one grant holder, 11 partnering Schools of Public Health
 - 962 Primary Care Partners
 - 490 Community Organizations
 - 3,230 Other Partners, including government, foundations, professional organizations
 - Includes 2 state Departments of Public Health





2024 GWEP Notice of Funding Opportunity

Dependent upon availability of funding

Anticipated that there will be at least 43 applications funded





Questions







Contact Us

Nina Tumosa

Senior Public Health Analyst – Geriatrics

Bureau of Health Workforce (BHW)

Health Resources and Services Administration (HRSA)

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Website: www.bhw.hrsa.gov





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www.HRSA.gov



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THE HEALTHY BRAIN INITIATIVE (HBI) ROAD MAP AND BUILDING OUR LARGEST DEMENTIA (BOLD) INFRASTRUCTURE: MAKING IMPACT

LISA C. MCGUIRE, PHD, FAPA, FGSA



OVERVIEW

- Alzheimer's Disease Epidemic
- Guiding Initiatives
- Making the Impact Happen
- Call to Action





SCOPE OF THE ALZHEIMER'S EPIDEMIC (U.S.)

- 6.7 million adults
- I in 9 adults age ≥65;
- I in 3 adults age ≥85
- 2/3 are women
- 65% live in a community setting, with 26% living alone
- I in 3 older adults dies with Alzheimer's or dementia

Source: 2023 Alzheimer's disease facts and figures.

Alzheimers Dement. Doi: 10.1002/alz.13016



Advance brain health as a central part of public health practice (nationally)

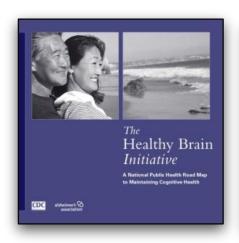


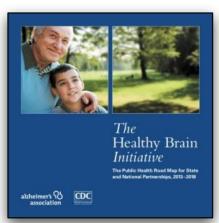
BOLD is designed to create a strong public health infrastructure for dementia and dementia caregiving

https://www.cdc.gov/aging/funding/hbi/index.html https://www.cdc.gov/aging/funding/php/index.html https://www.cdc.gov/aging/funding/phc/index.html

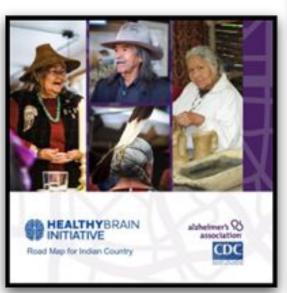
THE HBI ROAD MAP SERIES

Public health strategies to promote brain health, address dementia, and help support caregivers













www.cdc.gov/aging

3 Components of









https://www.cdc.gov/aging/bold/index.html



BOLD Programs Cohort 2 Awarded!



Component 1

- Alabama
- Allegheny County, PA
- Cameron County, TX
- Kansas
- Kentucky
- Maricopa County, AZ
- Marion County, IN
- Michigan
- Montana
- New York City, NY
- Oregon
- Puerto Rico
- South Dakota

Component 2

- Alaska
- Boston, MA
- California
- Colorado
- Connecticut
- DC
- Georgia
- Hawaii
- Illinois
- Idaho
- Iowa

- Los AngelesCounty, CA
- Louisiana
- Maine
- Maryland
- Minnesota
- Mississippi
- Missouri
- Nevada
- New York
- Northwest Portland Area Indian Health Board

- Oklahoma
- Rhode Island
- South Carolina
- Tennessee
- Texas
- Vermont
- Virginia
- Washington
- Wisconsin

BOLD PUBLIC HEALTH CENTERS OF EXCELLENCE



Alzheimer's Association

Dementia Risk Reduction



NYU School of Medicine

Early Detection of Dementia

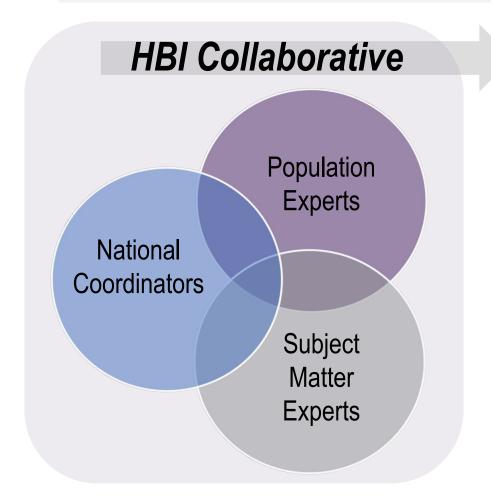


University of Minnesota

Dementia Caregiving

WORKING TOGETHER...HBI COLLABORATIVE

Multi-component approach to fully integrate dementia, cognitive health and caregiving into public health practice



National Coordinators





Population Experts







Subject Matter Experts





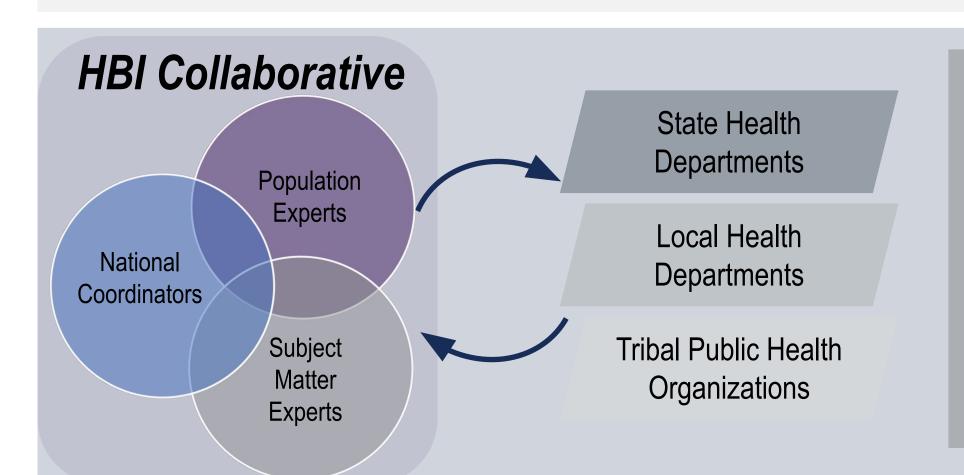


Additional National Subject Matter Experts

Association of State and Territorial Health Officials American College of Preventive Medicine National Association of Community Health Centers American Medical Association National Association of Chronic Disease Directors

COORDINATED PUBLIC HEALTH ACTION

Working toward collective impact on dementia, cognitive health and caregiving



Long-Term Goals

- I) Increase diagnosis and awareness.
- 2) Improve conversations about cognitive health between patients and providers.
- 3) Reduce preventable hospitalizations.
- 4) Increase utilization of Medicare benefits.

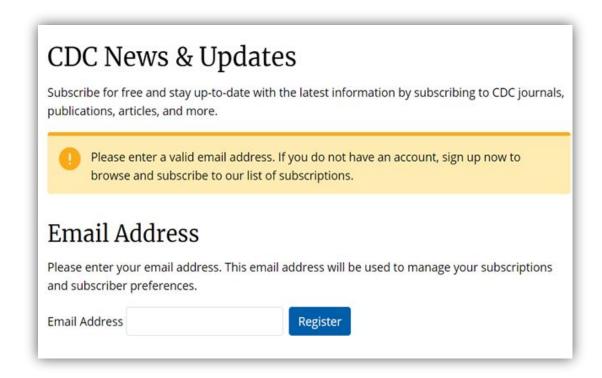
CALLS TO ACTION

- Dementia and caregiving ARE public health issues with points of intervention across the life course and disease progression.
- Memory loss that interferes with daily functioning is NOT a "normal" part of growing older—encourage patients to talk with a health care provider.

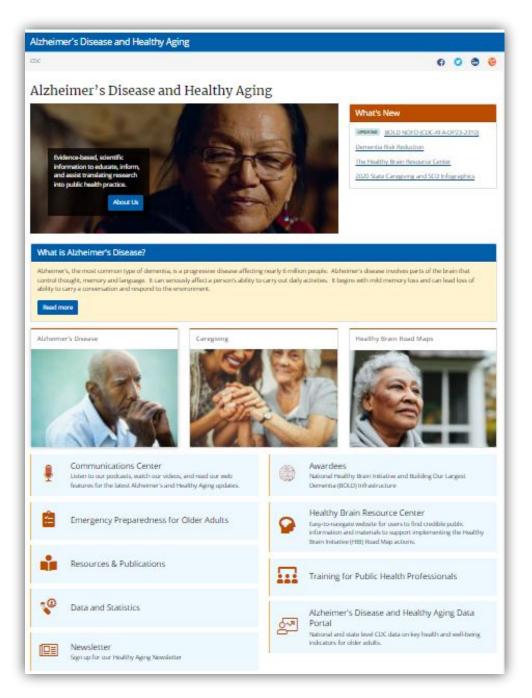




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MAKING THE IMPACT HAPPEN—CDC'S ALZHEIMER'S DISEASE PROGRAM



THANKYOU

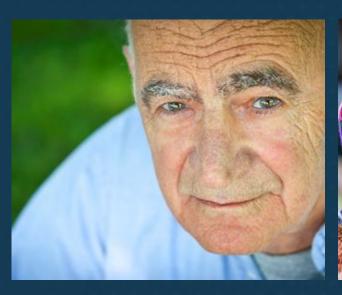
WWW.CDC.GOV/AGING

LISA C. MCGUIRE, PHD LMCGUIRE@CDC.GOV













Centers for Disease Control and Prevention

National Center for Chronic Disease Prevention and Health Promotion



Division of Population Health
The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

Partnership Spotlight - Rhode Island

Rhode Island Geriatric Workforce Enhancement Program (RIGWEP)

Faith Helm, Project Manager, Education on Alzheimer's Disease and Related Dementias flees@uri.edu

Rhode Island Department of Health (RIDOH)

Victoria Parker, Program Manager, Alzheimer's Disease and Related Dementias

<u>Victoria.Parker@health.ri.gov</u>

December 7, 2023

Synergistic Goals

- RIGWEP: Provide training to patients, families, caregivers, healthcare providers, and health professions students, residents, and faculty on Alzheimer's Disease and related dementias, including the value of supporting dementia-friendly communities.
- RIDOH: Address dementia through a public health approach

Shared Goals:

- P-2: Utilize community-clinical linkages to improve equitable access to community-based chronic disease prevention, dementia support and healthy aging programs
- P-3: Partner across the community to promote equitable access to services, supports and quality care for people living with dementia and their caregivers
- W-1: Provide evidence-informed training and informational resources for primary health care providers to facilitate culturally sensitive conversations about brain health with patients and caregivers across the life course.
- Healthy Brain Initiative: State and Local Road Map for Public Health, 2023-2027 (cdc.qov)

How Do We Partner?

IHI Age-Friendly Model: Age-Friendly
Health Systems | Institute for Healthcare
Improvement (ihi.org)

MIPS 288 Measure: Quality ID #288:

Dementia: Education and Support of
Caregivers for Patients with Dementia
(cms.gov)

Collaboration in Workgroups

- RIGWEP Retreat(s) and Advisory Board
- RIDOH Quality Improvement (QI) Collaborative
- RI Geriatrics-ECHO Workgroup

Phase 1: ECHO Series: Approach to Dementia Care: A Building Block to Age Friendly Health Systems

- Vehicle for building a community of practice
- Co-created ECHO Series including identifying learning objectives and subject matter experts; partner recruitment efforts; CMEs/CEUs
- Co-created evaluation tool
- Spring 2023 Total attendance of 160 (48 unique attendees)
- Collaborated to assemble a Phase 2; encouraging practices to apply for the QI portion of the project

Phase 2: Quality Improvement - Practice Facilitation

- Practice Facilitation for 1 of the 5 Primary Care Practices participating in a 6-month quality improvement initiative. The Practice Facilitator supports practices in:
- Implementing the Institute for Healthcare Improvement (IHI) Age-Friendly framework
- Implementing a process for identifying dementia caregivers to meet the MIPS 288 measure of providing education and connection to services in the community to support caregiver needs

Mutually Beneficial Partnership

What can RIGWEP do for RIDOH?

- Connect to subject matter expertise
- Leverage existing frameworks such as Age-Friendly 4M
- Utilize existing structure such as ECHO Hub Team and Quality Improvement Organization (QIO)
- Build on established spoke sites from earlier series
- HRSA funding

What can RIDOH do for RIGWEP?

- Further develop relationships with partners
 — QI Collaborative
- Assist with recruitment and identification of target audiences
- Fear of missing out (FOMO) strategy
- BOLD funding + United Healthcare Funding to provide stipends

Future Plans

+ More
Opportunities
for
Collaboration

- Currently discussing Spring 2024 ECHO Series
 - Community clinical linkages to address caregiver needs
- Planning for Quality Improvement Future Cohorts

+++

- Promoting CEU/CME opportunities developed by RIGWEP and posted to the RIDOH website
- Developing dementia-specific specialty training
- Focusing on sustainability by implementing the State Plan on ADRD
- Submitting letters of support for future funding

Keys to Success

Strong foundation

Utilization of each other's strengths

Mutually beneficial

Shared vision

True collaboration

Small state

Likeable partners

Thank you!

Thank you to our funders:

Health Resources and Services Administration (HRSA)
Centers for Disease Control and Prevention (CDC)

Thank you to our planning team and webinar host:

Geriatrics Workforce Enhancement Program Coordinating Center

BOLD Center of Excellence on Dementia Caregiving

- •This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number (U1QHP28737) Geriatrics Workforce Enhancement Program. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.
- •This program was supported by Cooperative Agreement NU58DP006913, funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.



GWEP and BOLD partnership in Georgia

Ted Johnson, MD, MPH, Georgia Gear (Emory University GWEP)

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Elizabeth Head, MPH, Georgia Department of Public Health B-SEEN (Georgia BOLD) elizabeth.head@dph.ga.gov

Let's do this!!



What is a GWEP: 2019-2024?



HRSA Notice of Funding Opportunity (NOFO)- 11/8/2018

You will do this and this and this and this and this

5. Provide training to patients, families, caregivers, direct care workers, healthcare providers, and health professions students, residents, fellows and faculty on Alzheimer's Disease and Related Dementias (ADRD) and how cognitive and behavioral impairments impact medical care throughout the course of illness, including the value of supporting dementia-friendly communities and when it is appropriate to recruit older adults into research.

Georgia Gear: 2019-2024



How we accomplished Objective 5 on ADRD:

- Teams
- Projects
- Individuals



What is a BOLD: 2018



The BOLD Infrastructure for Alzheimer's Act (2018)

- Building our Largest Dementia Infrastructure (BOLD) Amends the Public Health Service Act.
- Designed to uniform national public health infrastructure with a focus on issues such as increasing early detection and diagnosis, risk reduction, prevention of avoidable hospitalizations, and supporting dementia caregiving.
- Specifically, the BOLD Infrastructure for Alzheimer's Act directs CDC to:
 - Establish Alzheimer's and Related Dementias Public Health Centers of Excellence
 - Provide Funds to Support Public Health Departments
 - Increase Data Analysis and Timely Reporting

B-SEEN: Component 2 (2023-28)



- Georgia's Alzheimer's and Related Dementias (GARD)-DPH Partnership
- GARD State Plan
 - Increase collaboration
 - Public Health Workers
- Population-based efforts for
 - Dementia risk reduction
 - Early diagnosis
 - Prevention and management of comorbidities and hospitalization avoidance
- Emphasis on populations with
 - High burden of ADRD
 - Rural populations

Gear: B-SEEN Shared Partners





- GMN-PC advisory boards, education, outreach
- ALTER- Program staffing, marketing, expansion
- IMC- marketing, MIPS (ACP, Falls), practice
- GARD Collaborativeconnection











- GMN Telehealth work
- ALTER Rural Caregiver Support
- IMC Training, SME consultation
- GARD Collaborative awareness, networking

Gear: BOLD Collaborative Activities



	Education / Training	Promote Activities/EventsPartner IntroductionsSME Support
	Grants/Funding	Letters of SupportComplementary efforts
	Program Implementation	RecruitmentEvaluation SupportProgram Expansion

Because the work is so important



Q&A

Please submit your questions in the Q&A Zoom feature!



Connect with us!

Visit us online at https://bolddementiacaregiving.org to...

- ✓ Find today's slides and recording.
- ✓ Request Technical Assistance to support your public health work in dementia caregiving.
- Access resources and materials.
- ✓ Stay up to date with PHCOE-DC activities.



Follow us on X @PHCOE_DC



Thank you for joining us today!

Please take a moment to complete a brief survey. Scan the QR code or click the link in the chat.

We appreciate your feedback!



