

# **Successful Public Health Approaches in Dementia Caregiving: *Washington State***

***A Virtual Roundtable Series***

***November 7<sup>th</sup>, 2023***



# Welcome from...

## Maya Koffski, B.S.

*Center Support Staff,*

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

Center for Healthy Aging and Innovation (CHAI)

University of Minnesota




# 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.*




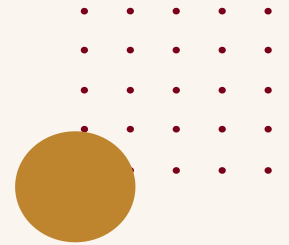
# The BOLD Public Health Center of Excellence on Dementia Caregiving (PHCOE-DC)

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.

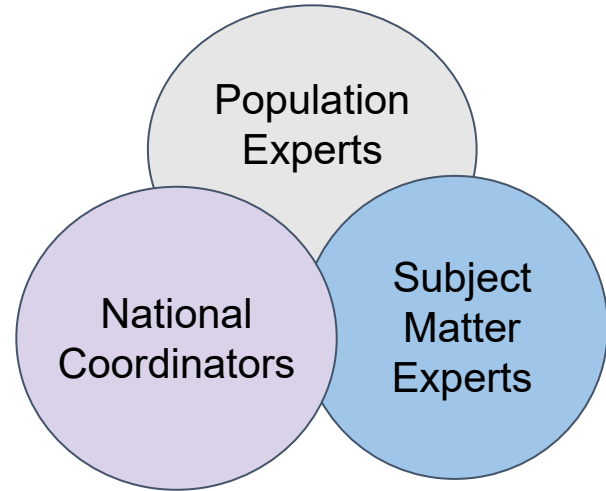
 Providing technical assistance for identifying, selecting, and implementing effective public health interventions and strategies.



# HBI Collaborative

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

## **HBI Collaborative**



## ***Find us online***

- About the HBI Collaborative
- Participating Members
- Contact Information

**hbicollaborative.org**



[hbicollaborative.org](https://hbicollaborative.org)



**HEALTHYBRAIN  
INITIATIVE**  
Collaborative

# Save the Date!

## Joseph Gaugler, PhD

Director, Public Health Center of Excellence on Dementia Caregiving  
Director, Center for Healthy Aging and Innovation  
Robert. L. Kane Endowed Chair

## 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  
CDC

## Nina Turmosa, PhD

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

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

The goal of Geriatric Workforce Enhancement Programs (GWEP) is to educate and train the primary care and geriatric workforce to care for older adults. Thanks to this, GWEPs can be key partners in public health dementia-related efforts and can help build a diverse and skilled workforce that can support both the person with dementia and their family caregivers. This session will explore opportunities for public health departments in collaborating with GWEPs in their dementia caregiving initiatives, and will present examples of state-based partnerships in Georgia and Rhode Island. Join to learn about their work and get ideas for partnering with a local GWEP near you.

**December 7, 2023 | 11:00-12:00pm CST | Zoom**

**Register at <https://bit.ly/GWEPsandPublicHealth>**



## 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



# Successful Public Health Approaches in Dementia Caregiving: *A Virtual Roundtable Series*

- ✓ **Bi-monthly**, roundtable series for **public health**.
- ✓ We will highlight **the story of one state**.
- ✓ Opportunity for **networking, peer-learning and idea generation**.
- ✓ A **community of practice**, where agencies can share their successes and learnings, and get ideas for action.

# Reminders for the Presentation Session

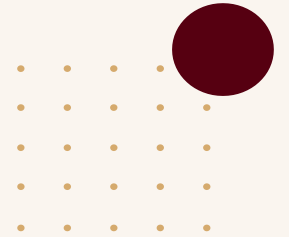
- Please, **MUTE yourself** and **turn your VIDEO ON** while the panelists are presenting.
- Display **your name and organization in Zoom**.
- **Submit your questions for the speakers into the Q&A feature**. Questions will be addressed at the end of the presentation.
- After the presentation and during the Q&A time, please raise your hand if you wish to speak and **only unmute if you are prompted**.
- Use the **CHAT to share comments, resources, links, and ideas**.
- Feel free to use your reaction buttons!
- The recording, slides and resources will be shared after the event.
- **Please complete the survey at the end of this event** (linked in chat). We greatly appreciate your feedback!



# Poll Question

## In what capacity are you attending this event?

- BOLD Public Health Agency
- Non-BOLD Public Health Agency
- Community organization/service provider
- Person living with dementia
- Interested caregiver and/or community member
- Care/clinical professional
- Other



# Welcome our presenters!



**Lynne Korte, MPH**

Dementia Care Program Policy Manager/Analyst  
Aging and Long-Term Support Administration  
Washington State Department of Social and Health  
Services



**Marci Getz, MPH**

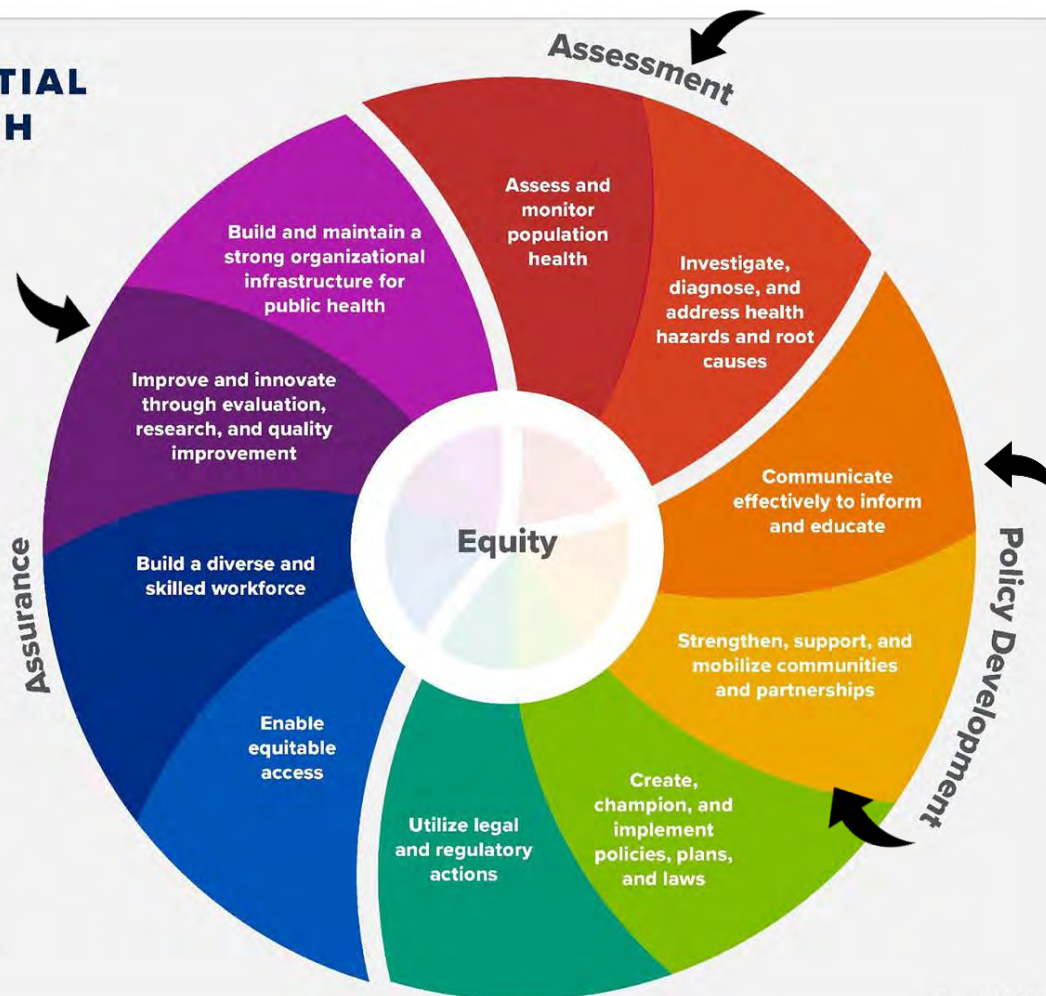
Healthy Aging Initiatives Director  
Executive Office of Public Affairs & Equity  
Washington State Department of Health



# THE 10 ESSENTIAL PUBLIC HEALTH SERVICES

*To protect and promote the health of all people in all communities*

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.





# Washington State: Family Caregiver Program Strategies



Public Health Centers of Excellence for Dementia Caregiving  
November 7, 2023

**Lynne Korte, MPH**

Dementia Care Program-Policy Manager  
Home and Community Services  
Aging and Long Term Support Administration  
Email: [Lynne.Korte@dshs.wa.gov](mailto:Lynne.Korte@dshs.wa.gov)

**Marci Getz, MPH**

Director of Healthy Aging Initiatives  
Executive Office of Public Affairs & Equity  
Washington State Department of Health  
Email: [Marci.Getz@doh.wa.gov](mailto:Marci.Getz@doh.wa.gov)

# Overview of Presentation



- Washington state history with family caregiver supports
- Building dementia-capability within programs
- Key approaches to improving and expanding family caregiver supports
  - Utilization of data
  - Caregiver assessment and monitoring
  - Improve and innovate through evaluation
  - Inform and educate for policy development
  - Strengthen partnerships
- Family caregiver-friendly policies

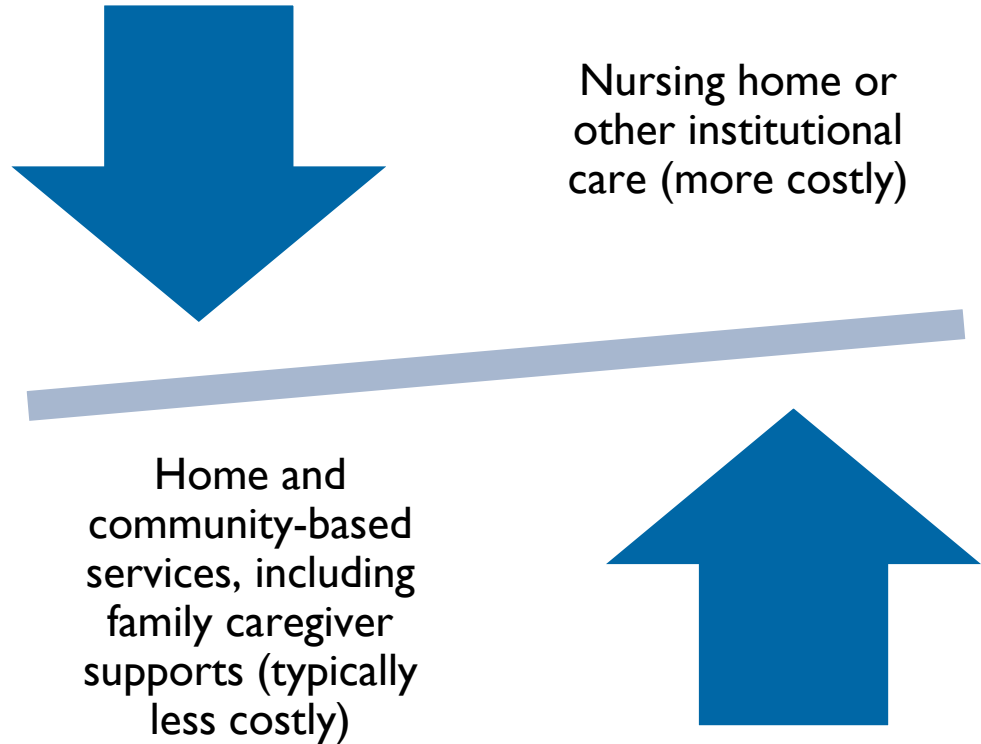
# Family caregiver supports: Part of a rebalanced long-term care system

## WHY

- Most people want to remain at home as the age.
- Staying at home is typically less expensive.

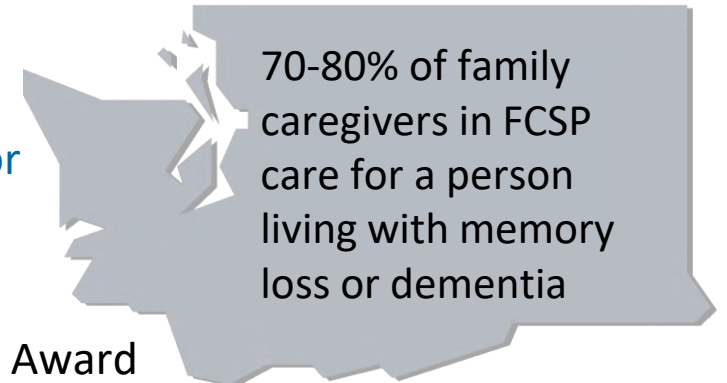
## HOW

- Work with partners to build an array/network of community-based support services.
- Recognize and support critical role that family/friends play in helping people stay home.



# Washington State: History of supporting unpaid family caregivers

- 1989** State Respite Care Services (FCSP)
- 2000** State Family Caregiver Support Program (18+)
- 2001** National FCSP, Title III E OAA (60+)
- 2007** BRFSS Caregiver Module
- 2007-08** Increased state funding for FCSP, w/ mandate for evidence-based caregiver assessment
- 2009** Family Caregiver-TCARE® Assessment
- 2010** Rosalynn Carter Leadership in Caregiving Award
- 2012-13** FCSP expansion
- 2013** FCSP evaluation of caregiver outcomes
- 2014** FCSP evaluation of Medicaid savings
- 2017** CMS 1115 Demonstration Waiver/Caregiver Supports



# WA's Family Caregiver Support Program

## Supports and Services

- Specialized caregiver information and guidance
- Caregiver support groups, caregiver counseling, consultation
- Training on caregiving topics, including dementia
- Respite care
- Supplemental services (supplies, equipment, PERS, etc.)



**National Older  
Americans Act  
(OAA/T3E)**

\$4.1 million

**State funds**

\$11.8 million

**2023 Funding Levels**



# Building Dementia Capability Into Program(s) – Grants/Data

## 1993 – 2000

### Series of 3 HRSA/ACL Alzheimer's Grants

- Respite & family caregiver supports for underserved communities w/ partners: AAAs, UW, Alzheimer's Association and community agencies

## 2005 – 2016

### Series of 4 AoA/ACL Alzheimer's Grants

- Dementia consultation, family caregiver counseling, dementia day services, nursing home diversion, dementia capable systems (I & A, FCSP), early stage supports w/ partners: AAAs, UW, Alzheimer's Association

## 2016 - 2023

### WA State Plan to Address Alzheimer's Disease and Other Dementias

- Dementia Road Map: Guide for Family and Care Partners
- Dementia Legal Planning
- Project ECHO Dementia
- Building Dementia Capable Communities (AAA/Dementia Care Specialists +)

2007

BRFSS Caregiver Module

2009

TCARE® E-B Family Caregiver Assessment

2012 – 14

FCSP Expansion/Caregiver outcomes & Medicaid savings

1115 Demo Waiver, WA CARES

# BRFSS Data 2007 – Caregiving Module

## As memory loss progresses, caregiving intensity increases:

- Caring for persons with memory loss increases the odds that the caregiver provides high-intensity care by 56%
- Caring for persons with diagnosed Alzheimer's disease or other dementia increases the odds of high-intensity care by 75%

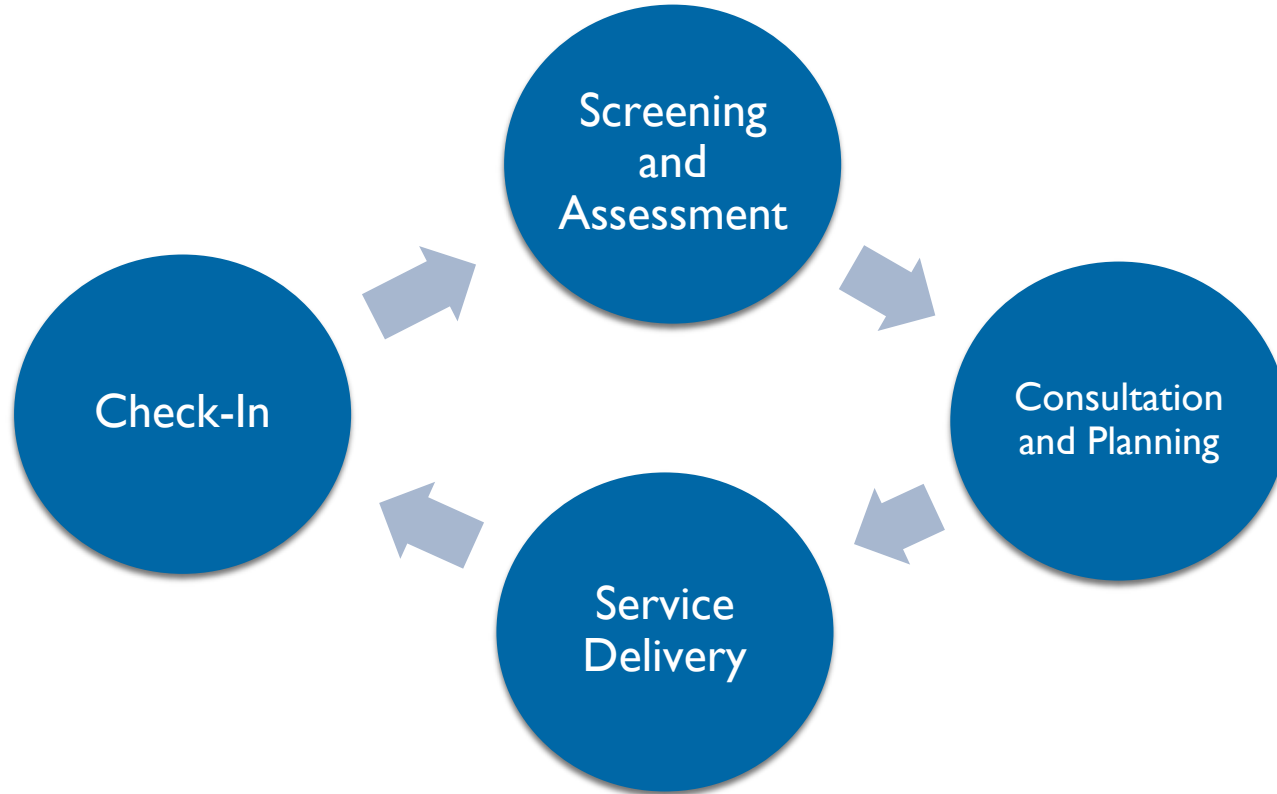
## High-intensity care is associated with:

- A **five-fold** increase that the caregiver experiences a serious mental health condition
- **45% lower odds** of the caregiver being in good or better health.



Data informs design and practice

# TCARE<sup>®</sup> 2009 – Evidence-based caregiver assessment



The model for TCARE<sup>®</sup> is to provide the right service at the right time.

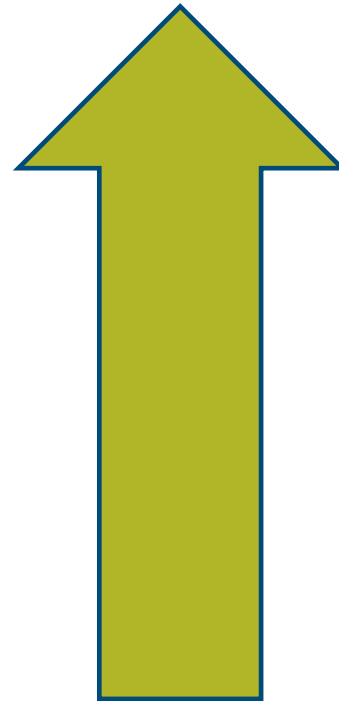
# TCARE<sup>®</sup> ASSESSMENT Data (2013) – Positive Outcomes

TCARE<sup>®</sup> evaluation among several states.

FINDING: Over a 6-month period in which caregivers received an assessment and ongoing supports – found statistically significant improvements in:

- Stress burden
- Relationship burden
- Objective burden
- Depression
- Comfort with caregiving role

Spousal caregivers also show a decreased “intention to place.”

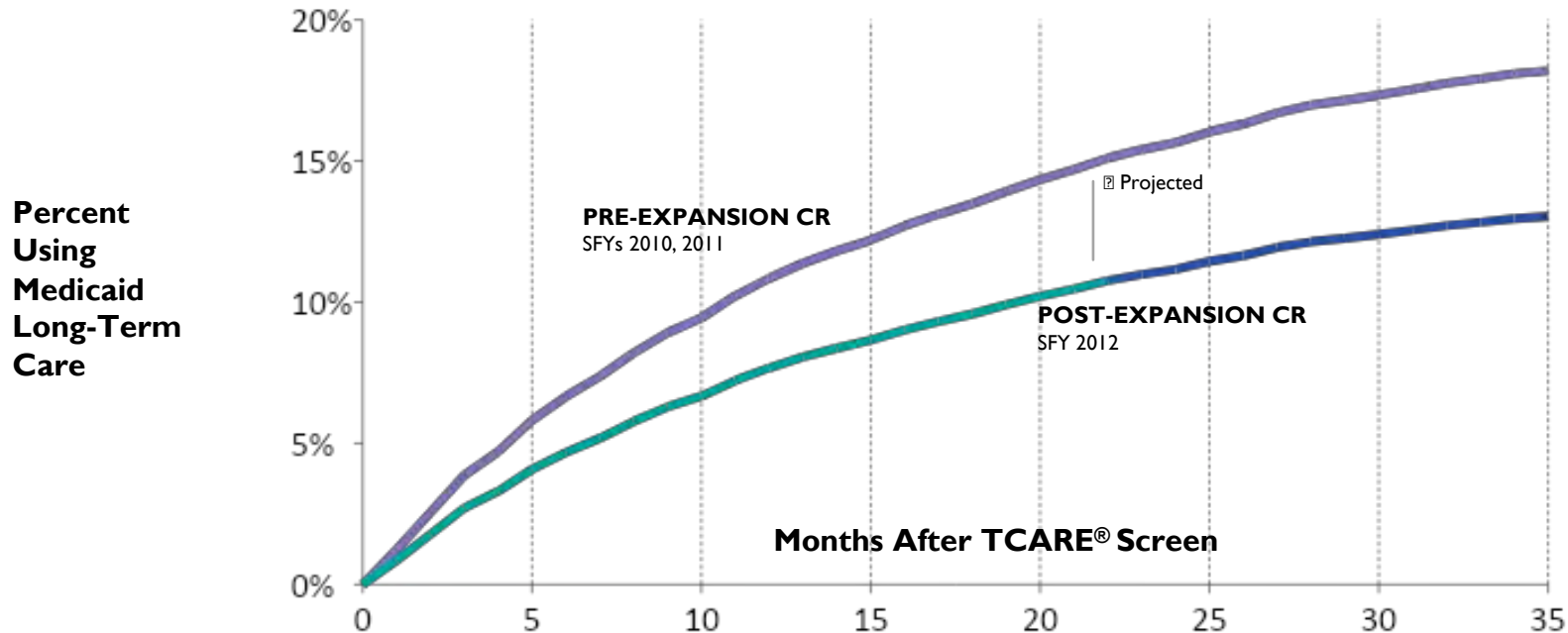


# 84%

of caregivers show significant improvements on key outcomes

# Family Caregiver Support Program Expansion - Evaluation Outcomes (2013-14)

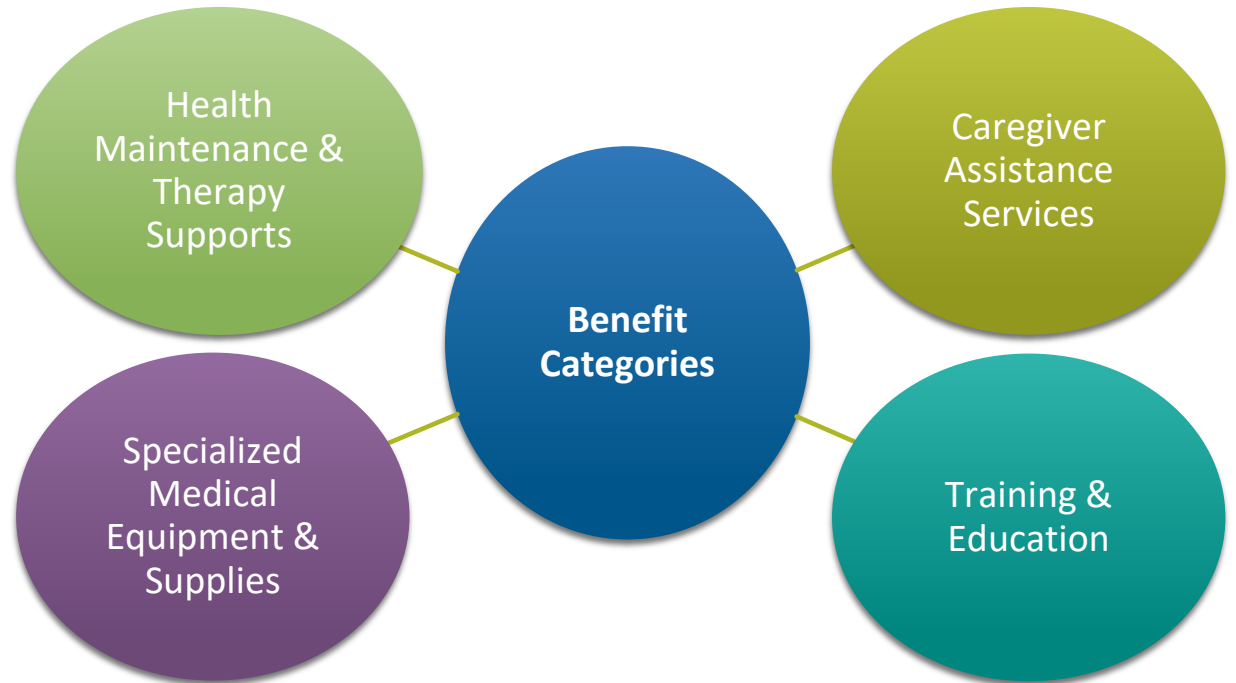
*Time from TCARE® Screen until First Use of Medicaid Long-Term Care*  
*Pre- and Post-Expansion, Controlling for Baseline Differences*



Source: Bridge Lavelle, PhD; David Mancuso, PhD; Alice Huber, PhD, Barbara E.M. Felver, MES, MPA; DSHS Research and Data Analysis, April 2014.

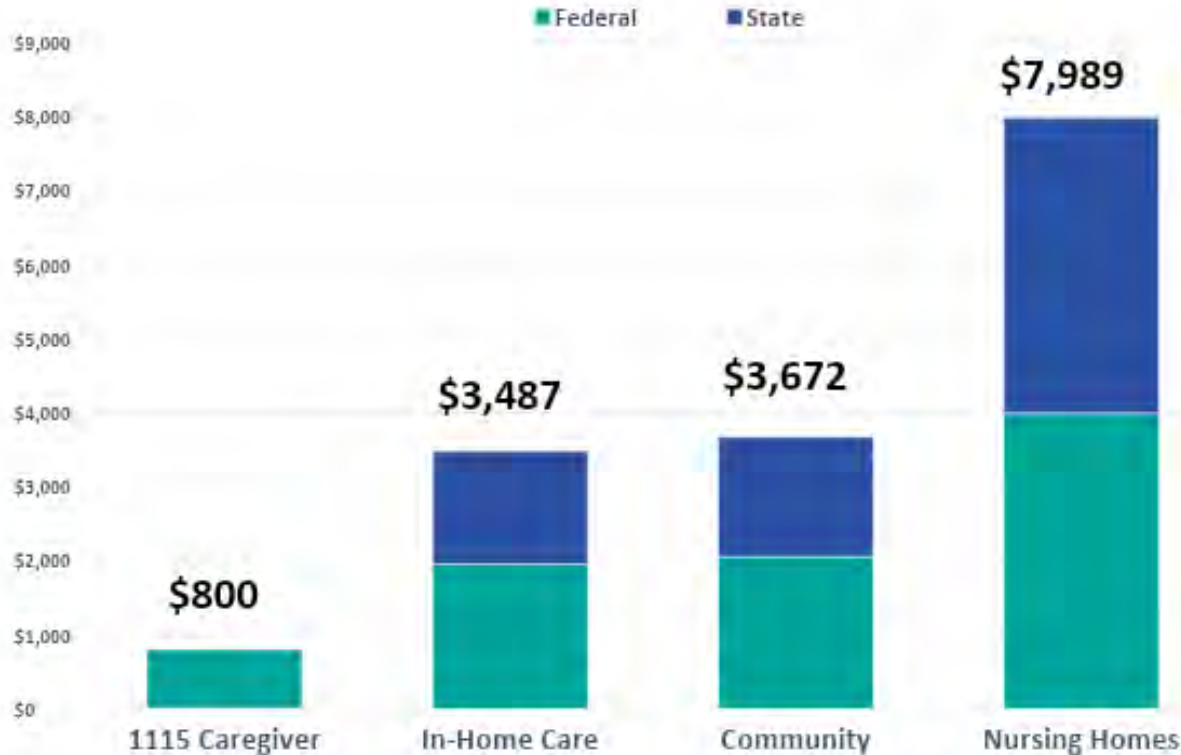
# CMS 1115 Demo Waiver - Medicaid Alternative Care & Tailored Services for Older Adults

- Creates new eligibility group - care receivers who are 'at risk' of spending down to Medicaid (400% of poverty level).



# CMS 1115 Demo Waiver

## Family Caregiver Support Services are an Economic Tool



**Monthly Per Capita Service  
Costs – Medicaid LTSS**  
*January 2022*



**Data informs  
policy**

# Question: Data and Funding?

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What **sources of data** have you been able to leverage to improve upon or expand family caregiver support services in your state?

- Please share in the chat.







## FAMILY CAREGIVER FRIENDLY POLICIES & EFFORTS

# Paid Family and Medical Leave



Provides up to 12 weeks of paid leave per year to care for family member with serious health condition.



May care for spouses, partners, grandparents, parents, siblings, children and grandchildren.



Receive up to 90% of weekly pay, maximum of \$1,000 per week.

# Long Term Care Trust Act – WA CARES



All W-2 workers  
contribute.



They pay 58 cents per  
\$100 of W-2 income.

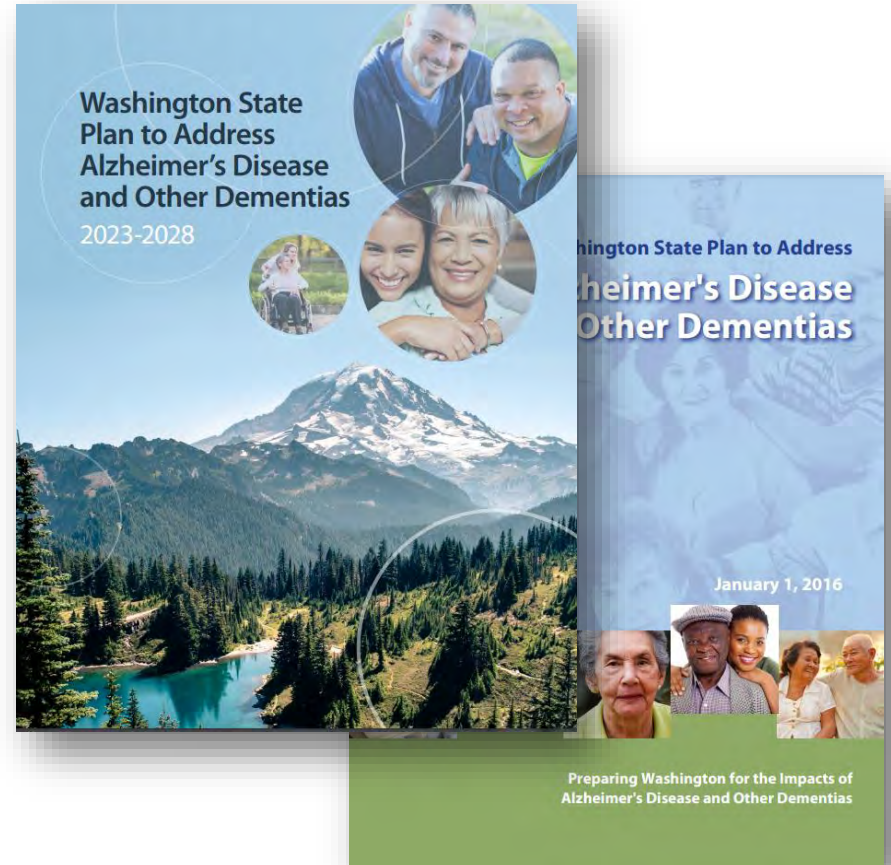


The trust fund invests  
the money.

- Each person who is eligible to receive the benefit can access services and supports costing up to **\$36,500**.
- The value of this benefit will increase over time.

# Washington State Plan to Address Alzheimer's Disease and Other Dementias

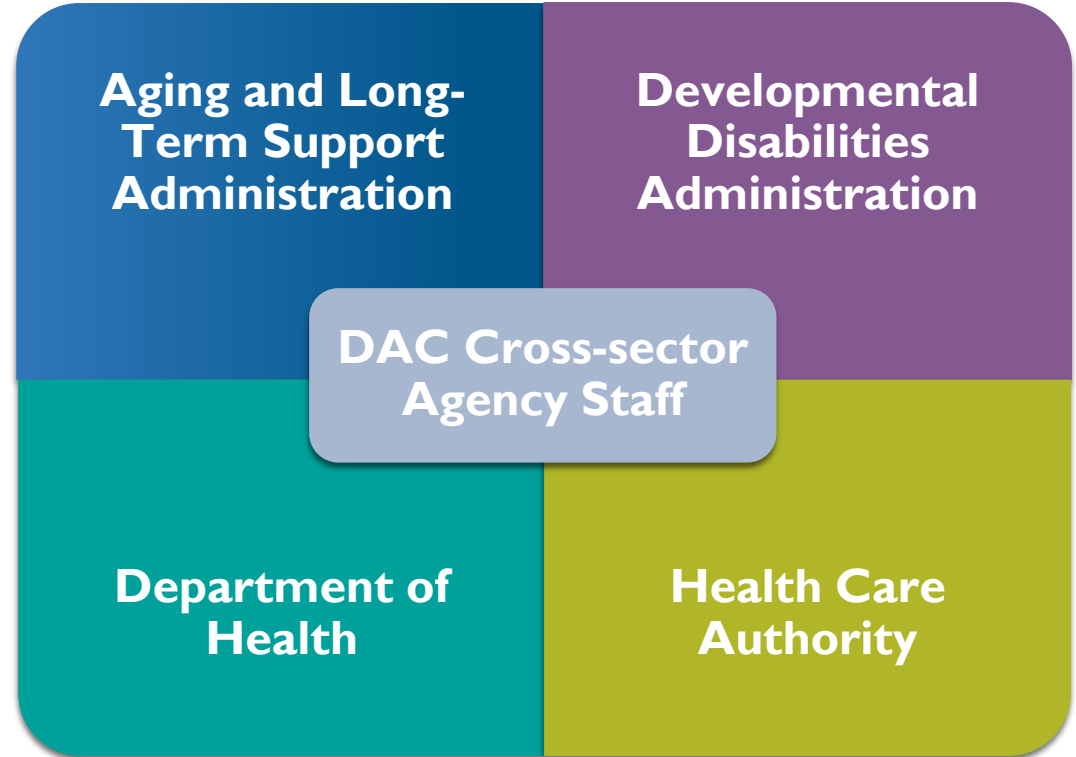
- Alzheimer's Disease Working Group (ADWG) developed, released first state plan in 2016.
- 2023: Updated state plan
- Plan has a goal focused on supporting family care partners of people living with dementia.



# Dementia Action Collaborative (DAC)

2016: Formed Dementia Action Collaborative (DAC) to implement the plan.

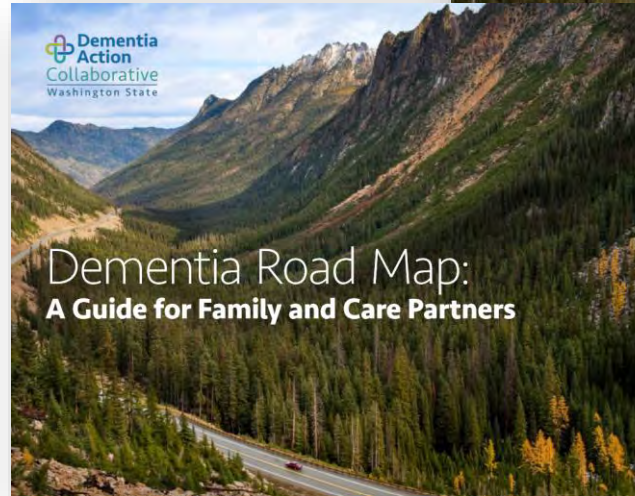
- State agency & community partners collaborating to make improvements for people living with dementia & their family care partners.
- 60+ organizations & individuals representing consumers, advocates and varied sectors and perspectives.



# Guidance for family and care partners

What to expect, resources, and action steps through the stages -

- *Wondering & Worried*
- *Mild Cognitive Impairment*
- *Early-Stage Dementia*
- *Mid-Stage Dementia*
- *Late-Stage Dementia*



Link: [Dementia Road Map: A Guide for Family and Care Partners](#)

# Promote early legal & advance care planning

## Dementia Legal Planning Toolkit

Free folder that includes information on:

- Dementia and capacity
- Financial decisions
- Health care decisions
- Resources

## Dementia Legal Planning program

Volunteer attorneys can help talk through:

- Powers of Attorney for finances and health care
- Healthcare directives
- Dementia directive form



**DEMENTIA LEGAL PLANNING PROJECT**

Unsured about how to navigate legal planning if you or someone you love has dementia?

Get free legal help with the following:

- Powers of Attorney for Finances and Health Care
- Health Care Directives
- Dementia Directives

Who is Eligible?

- People 60 years and older
- People with dementia of any age

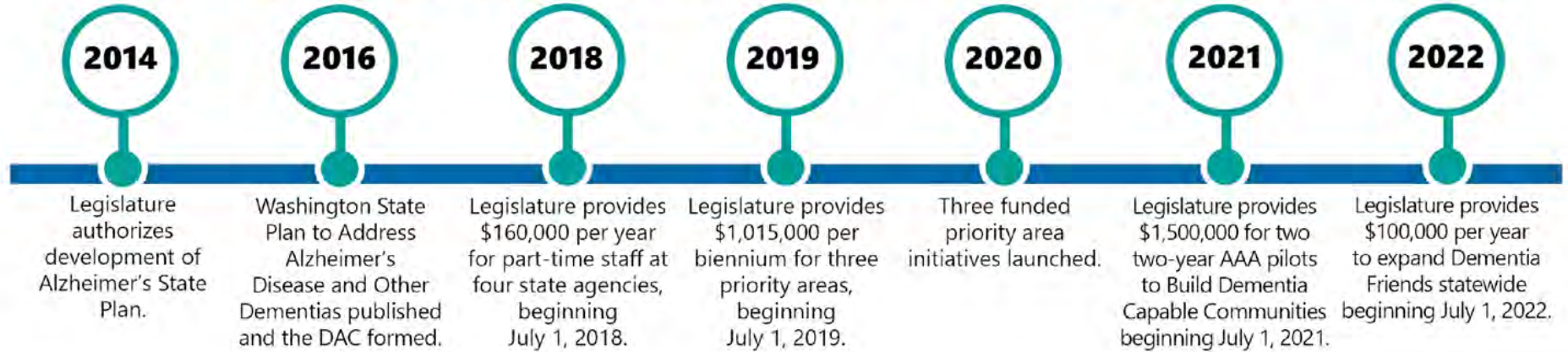
FOR MORE INFORMATION:

☎ 425-780-5589

🌐 [www.dementialegalplanning.org](http://www.dementialegalplanning.org)

This program is funded, on behalf of the Dementia Action Collaborative, by the Aging and Long-Term Support Administration/DSHS.

# LEGISLATIVE FUNDING FOR DAC PRIORITIES



## DAC FUNDED INITIATIVES

- Public awareness campaign/value of timely diagnosis (DOH)
- Dementia Legal Planning Toolkit & Dementia Legal Planning Program (no-cost assistance w/ POAs and Health Care Directives)
- Project ECHO Dementia (UW)
- Building Dementia Capable Communities/AAAs (Dementia Resource Catalysts, Specialists) – 3 AAAs currently, more to come!
- Dementia Friends statewide expansion

## DAC COLLABORATIVE PROJECTS

- Dementia Safety Info Kit
- Partnering with Your Healthcare Provider: A Resource for People Living with Memory Problems and their Care Partners
- Clinical Provider Practice Tools
- Care Transitions Program Guidance for Hospitals





## PUBLIC HEALTH APPROACHES IN DEMENTIA CAREGIVING

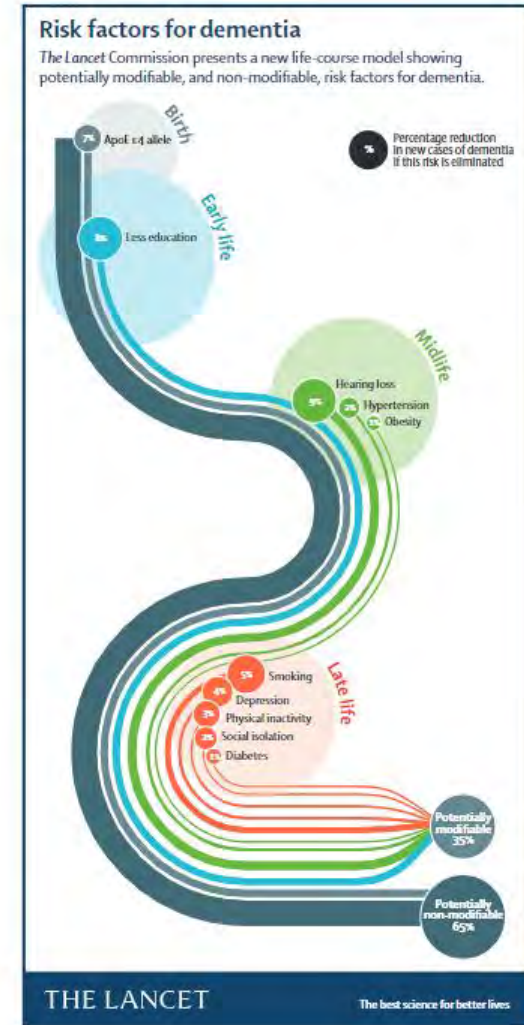
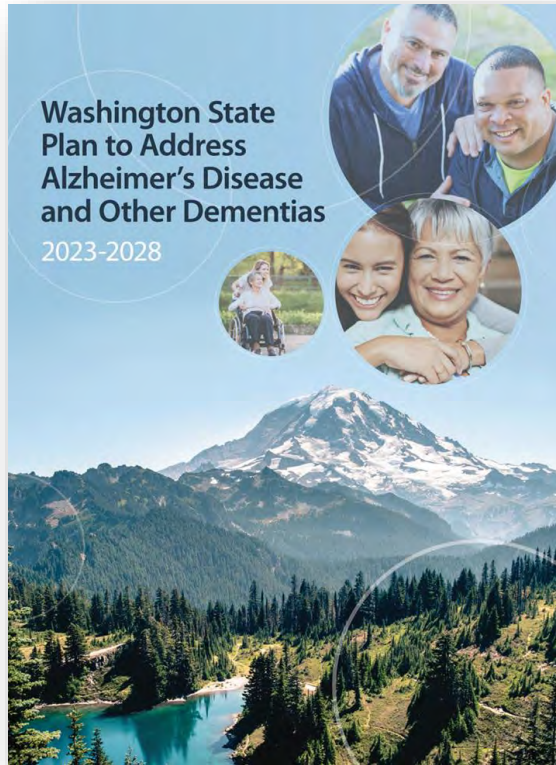
Executive Office of Public Affairs & Equity



# PRESENTATION OUTLINE

- Strategies to build public health champions in state, local, and tribal public health
- Examples of initiatives demonstrating the many roles public health can have
- BOLD Grant

# PUBLIC HEALTH and ALZHEIMER'S DISEASE and OTHER DEMENTIAS



# HARNESSING OPPORTUNITIES

- Participating in the WA State Dementia Action Collaborative (DAC)
- 2017-Association of State and Territorial Health Officials (ASTHO) and the National Alzheimer's Association Grant
- 2018 Participated in Learning Community offered by ASTHO and the National Alzheimer's Association Grant
- 2018 joined the HHS Region 10 Healthy Aging Workgroup
- 2020 Trust for America's Health (TFAH) Age-Friendly Public Health System

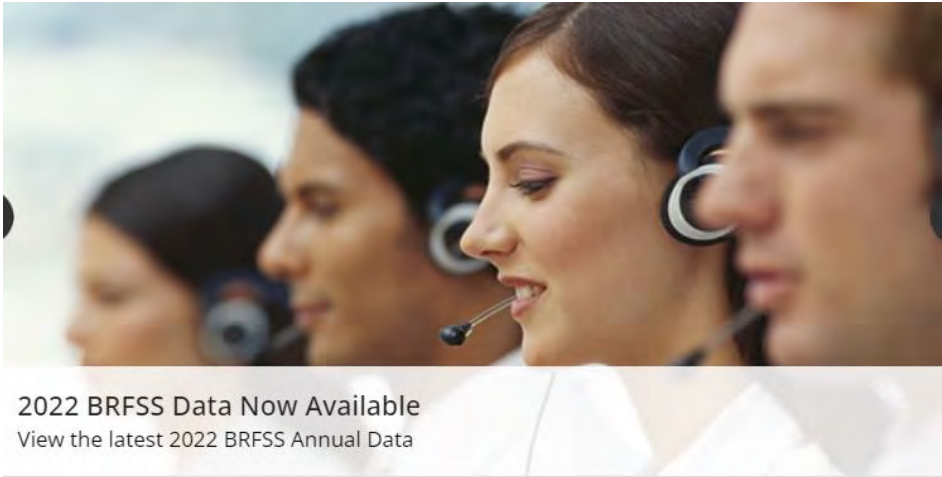
# AGE-FRIENDLY PUBLIC HEALTH SYSTEMS (AFPHS)

Members of the WA State AFPHS Learning and Action Network:

- Northwest Washington Indian Health Board: representing 6 Tribes
- Four Local Health Jurisdictions
- One County Department of Community and Health Services
- Four Area Agencies on Aging



# BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM (BRFSS)



Strategies to support the inclusion of the BRFSS Optional Cognitive Decline and Caregiver Modules every three years:

- Have measures in state plans that require this data
- Analyze the data with other chronic disease BRFSS measures asked during the same survey period
- Make the case about the need for the data as it related to other statewide initiatives



# Question: Use of BRFSS Data?

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How has your state used the data from the BRFSS Cognitive Decline and/or Caregiver Modules?

- Who is the data shared with?
- How do you share the data (e.g. what format do you put it in)?



## **PUBLIC AWARENESS CAMPAIGN**

Conduct short-term digital awareness campaign-to educate the public regarding the value and importance of early detection, diagnosis, and planning, including racial and ethnic groups who are at increased risk.



# FIND OR LINK TO CAMPAIGN MATERIALS - [doh.wa.gov/memory](https://doh.wa.gov/memory)

The screenshot shows the top navigation bar of the Washington State Department of Health website. On the left is the department's logo. On the right are links for Home, Newsroom, Publications, and About Us. Below these are buttons for Topics A-Z and Español, and a search bar with the text "ENHANCED BY Google". A secondary navigation bar contains links for You and Your Family, Community and Environment, Licenses, Permits and Certificates, Data and Statistical Reports, Emergencies, and For Public Health and Healthcare Providers. A light blue banner below the navigation bar contains the text: "Visit our COVID-19 page for the latest updates, vaccine information, testing locations and data dashboard."

🏠 [You and Your Family](#) > [Illness and Disease](#) > Dementia

## Understanding memory loss

As we age, many of us experience some memory loss. Sometimes that's normal — and sometimes it's a sign of a dementia or other health problems.

Dementia is not one specific disease. It's a broad term for an impaired ability to remember, think or make decisions.

And for many of us, dementia is a frightening word. When we notice signs of memory loss, we might fear losing independence or worry others will see us as less capable. But early detection makes a big difference in improving quality of life and managing symptoms.



## Early detection helps make life better

With early detection, you have more options for staying healthy and independent. You can:

- Access important resources and programs for people with memory loss and their families.
- Identify and treat reversible causes. Memory loss may be caused by factors such as a medication or a health condition that can be treated.
- Make lifestyle changes or get medications that help manage your symptoms.
- Get support and guidance from organizations that help people and families living with

# FIND OR LINK TO CAMPAIGN MATERIALS [DOH.WA.GOV/MEMORY](https://DOH.WA.GOV/MEMORY)

Spanish - Español

## Demencia

A medida que envejecemos, muchos de nosotros experimentamos cierta pérdida de memoria. A veces es normal, y a veces es un indicio de demencia y otros problemas de salud.

La demencia no es una enfermedad específica. Es un término amplio para referirse a la capacidad de recordar, pensar o tomar decisiones, y es lo suficientemente grave como para interferir en la vida y las actividades diarias.

Para muchos de nosotros, la demencia es una palabra aterradora. Cuando notamos signos de pérdida de memoria en nosotros mismos, podemos temer perder nuestra independencia o preocuparnos de que los demás nos vean como menos capaces. Podríamos preguntarnos cómo lo afrontarán nuestras familias. Pero la detección temprana supone una gran diferencia a la hora de mejorar la calidad de vida y controlar los síntomas. También puede facilitarles a las familias la obtención de apoyo comunitario y el acceso a los recursos que necesitan.



## La detección temprana ayuda a mejorar la vida

Con la detección temprana, usted tiene más opciones para mantenerse sano, mantener la independencia y obtener apoyo. Usted puede:

- Acceder a importantes recursos y programas para personas con pérdida de memoria y sus familias.
- Identificar, tratar o revertir las condiciones. La pérdida de memoria puede ser causada por factores como un medicamento o problemas de salud que pueden ser tratados.
- Hacer cambios en su estilo de vida o tomar medicamentos que le ayuden a controlar los síntomas.
- Obtener apoyo y orientación de organizaciones que ayudan a las personas y familias que viven con demencia. Esto puede incluir la ayuda en la planificación a largo plazo.
- ¡Averigüe qué está pasando! Cuando conozca la causa de su pérdida de memoria, podrá saber qué esperar, cómo afrontarlo y empezar a crear una red de apoyo.



## Cómo puede ayudar a un familiar con pérdida de memoria

HABLE CON UN MÉDICO PARA CONOCER SUS OPCIONES Y OBTENER APOYO.



 **Dementia  
Action  
Collaborative**  
Washington State

## To help a family member

If you notice a loved one showing signs of memory loss, now is the time to talk about it.

<b>Don't wait.</b>	Early detection makes a big difference.
<b>Choose the right place and time for your conversation.</b>	A quiet, private spot where neither of you will feel rushed.
<b>Plan what you want to say for a respectful, productive conversation.</b>	Rather than telling them what to do, let them know why you're concerned. Give them examples of changes you've noticed, without sounding judgmental or accusing.
<b>Listen with compassion.</b>	Ask about their thoughts and observations.
<b>Reassure them.</b>	While memory changes may indicate dementia, that's not necessarily the case. Some memory loss is caused by treatable, reversible conditions.
<b>Ask your loved one to have a complete medical check-up.</b>	If they don't already have a doctor's visit on the calendar. It's important to know the cause of their memory loss, and whether it can be treated or reversed. Plan to accompany them at their visit.
<b>Focus on the positive.</b>	Your loved one might be worried about losing their independence. Talk about a visit to their health care provider as a way to help them stay independent. Remind them the goal is to understand what's causing their memory loss — and to make things better.

**If they need help finding a health care provider, call the Center for MultiCultural Health at (206) 461-6910.**

# HEALTHY BRAIN INITIATIVE ROAD MAPS



State and Local Road Map  
for Public Health, 2023–2027

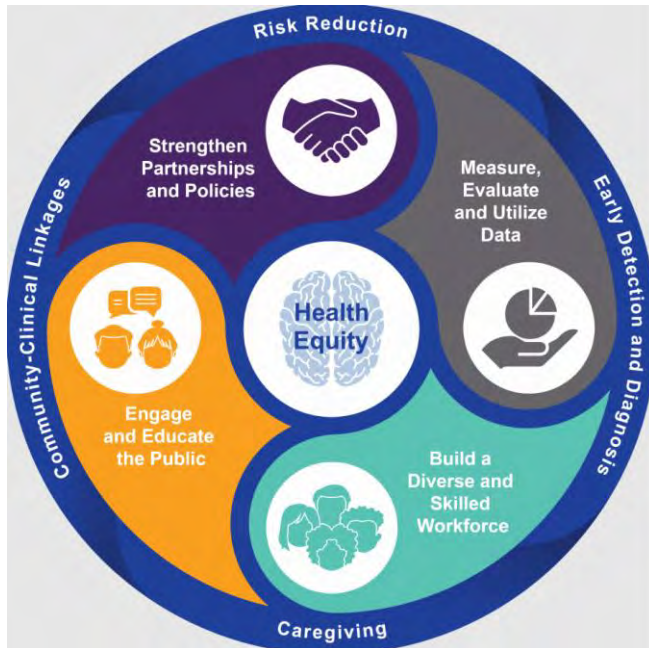


Road Map for Indian Country

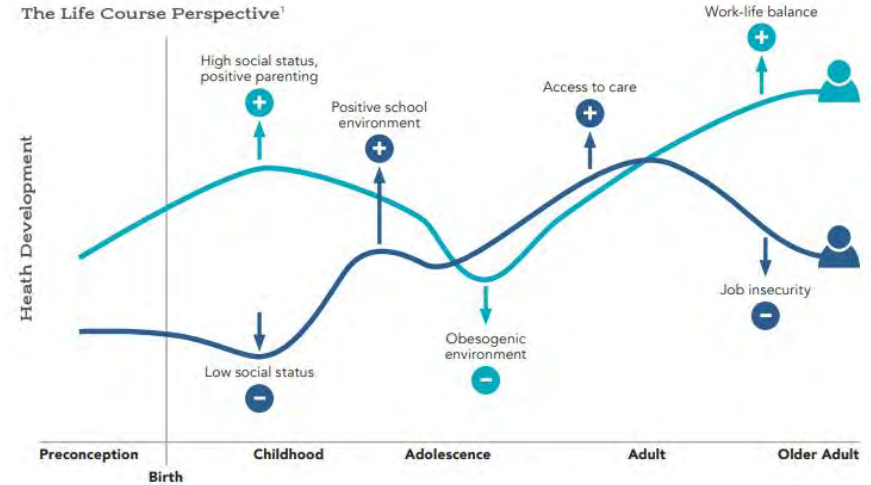


# ASSESSMENT FRAMEWORKS

## Healthy Brain Initiative Road Map



## Life Course Perspective



# 89 New Opportunities: Healthy Brain Initiative

DOH identified 89 new opportunities to meet the recommended actions listed in the Healthy Brain Initiative Road Map



Educate & Empower

34



Develop Policies & Mobilize Partnerships

20



Assure a Competent Workforce

27



Monitor & Evaluate

8

## Office of the Secretary (OS)

- E1** Integrate messaging about brain health into the annual flu vaccination letter that goes to Long Term Care facilities and on the “for seniors” portion of the website (E2)
- E2** Opportunity to stand up an Employee Resource Group to support employees who are caregivers, when we realize there are specific needs/lack of information (E5)
- E3** Adjust messaging in employee focused work (wellness communication, DOH health fairs, employee resource groups) to incorporate information and resources about cognitive aging, social engagement, brain health, and linkages to chronic conditions management (E1, E2)
- W1** Use the annual flu and pneumococcal vaccination letter (and links to the “for Seniors webpage”) that goes to Long Term Care Facilities information about brain health and how to use that information for those they serve (W1)

## Emergency Preparedness and Response (EPR)

- E6** Work with partners (like AAA) to include information specifically for people with dementia or Alzheimer’s and their caregivers in emergency preparedness education (E2)
- P2** Work with local health jurisdictions and tribes to amend emergency preparedness and response plans to include information specific to people with dementia or Alzheimer’s and their caregivers (P6)

## Environmental Public Health (EPH)

- E7** Adjust built environment messages to specifically address the cognitive health benefits of physical health and social engagement (E2)
- P3** Engage the public and partners in planning for communities to support people with dementia and their

# EDUCATE & EMPOWER

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- Opportunity to stand up an Employee Resource Group to support employees who are caregivers, when we realize there are specific needs/lack of information (E5)
- Add caregiver messaging to stroke education (E1)



# DEVELOP POLICIES & MOBILIZE PARTNERSHIPS



Engage the public and partners in planning for communities to support people with dementia and their caregivers (P5)

Support emergency preparedness and response plan to address the special needs of people with dementia and their caregivers (P6)

Facilities Licensure – application processes for health care and home health: create/communicate opportunities for public and private stakeholders of people living with dementia and their caregivers to provide input that improves facility licensing rule (P5)



# ASSURE A COMPETENT A WORKFORCE

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- Blood pressure trainings include messages on the benefits to good brain health (W1, W5)
- Traumatic Brain Injury: Educate professionals about addressing injury risk among people at all stages of dementia (W1, W6)



# MONITOR & EVALUATE

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- Implement the BRFSS Cognitive Decline and Caregiver Optional Modules
- Use data on stroke prevention, response, and treatment to align/enhance information about cognitive decline and the impact on caregivers (M3)
- Adjust oral health messaging for professionals (specifically rural health dental clinic directors and staff) and caregivers to include the association between long-term gum disease and dementia

## BRFSS Tool



Explore state data in two main Healthy Aging topic areas:  
Subjective Cognitive Decline and Caregiving

## Healthy Aging Portal



Access national and state level CDC data on a range of key indicators of health and well-being for older adults

# Implementing the Healthy Brain Initiative Road Map

## Implementing the Healthy Brain Initiative Road Map

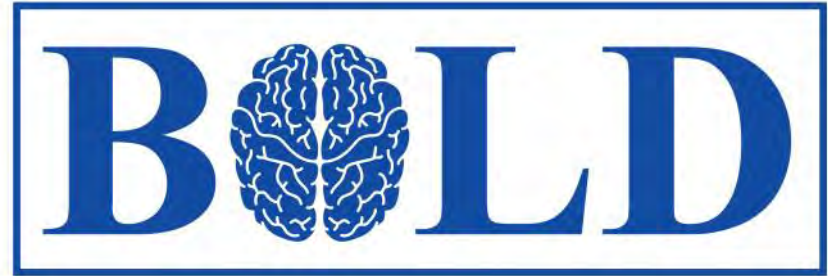
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Using Life Course Perspective and the Healthy Brain Initiative (HBI) Road Map this planning guide provides step-by-step actions for public health agencies to assess current work being done to promote healthy aging and to identify opportunities to implement the 25 action items listed in the HBI.

A Toolkit for Public Health Organizations



# BOLD Grant Strategies



Educate Members of the General Public  
(Including Populations Who Experience High  
Burden) about ADRD Topics

Educate Providers and Other Professionals about  
ADRD Topics

Healthy Equity

Increase the Availability and Use of Data

Increase the Number of Community-Clinical  
Linkages

WASHINGTON STATE DEPARTMENT OF HEALTH  
**TRANSFORMATIONAL PLAN**  
 A VISION FOR HEALTH IN WASHINGTON STATE



**CORNERSTONE VALUES:** EQUITY • INNOVATION • ENGAGEMENT  
**VISION:** EQUITY AND OPTIMAL HEALTH FOR ALL



WASHINGTON STATE DEPARTMENT OF HEALTH  
**TRANSFORMATIONAL PLAN**  
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**OUR PRIORITIES AND VISION FOR TRANSFORMATIONAL HEALTH**



**I. HEALTH AND WELLNESS**

All Washingtonians have the opportunity to attain their full potential of physical, mental, and social health and well-being.



**II. HEALTH SYSTEMS AND WORKFORCE TRANSFORMATION**

All Washingtonians are well served by a health ecosystem that is robust and responsive, while promoting transparency, equity, and trust.



**III. ENVIRONMENTAL HEALTH**

All Washingtonians will thrive in a broad range of healthy environments — natural, built, and social.



**IV. EMERGENCY RESPONSE AND RESILIENCE**

All Washington communities have the information and resources they need to build resilience in the face of myriad public health threats and are well-positioned to prepare for, respond to, and recover from emergencies and natural disasters.



**V. GLOBAL AND ONE HEALTH**

All Washingtonians live in ever-connected environments that recognize and leverage the intersection of both global and domestic health as well as the connections of humans, animals, and the environment.

**TRANSFORMATIONS IN ACTION**



INNOVATION AND TECHNOLOGY



COMMUNITY CENTERED



VISIBILITY AND VALUE



EQUITY DRIVEN



COLLABORATIVE ENGAGEMENT

**CORNERSTONE VALUES:** EQUITY • INNOVATION • ENGAGEMENT  
**VISION:** EQUITY AND OPTIMAL HEALTH FOR ALL

A circular inset image on the left side of the slide shows a lush, moss-covered forest path. The trees are heavily draped in vibrant green moss, and the ground is also covered in moss and ferns, creating a dense, verdant scene.

# Question: Examples of Public Health Efforts?

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Share examples of public health efforts you've been engaged in to address the health needs of family caregivers (including those who care for people with dementia)?

# Questions?

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Thank you for your ideas  
and participation!



# Q&A

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





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# **Thank you for joining us today!**

*Please, take a moment to complete our evaluation form at the end of this presentation.*

