

Promoting Brain Health Through Education

Insights from Community-based Programs and Healthcare Systems

Donna Barrett, MSW, LSW

Lourdes Birba, MSG

Vijeth Iyengar, PhD



Part of the National Alzheimer's and Dementia Resource Center webinar series sponsored by the Administration for Community Living.



Promoting Brain Health through Education:

Overview of ACL's efforts to promote brain health in the community

Vijeth Iyengar, PhD

Brain Health Lead & Technical Advisor to the Deputy Assistant Secretary on Aging

U.S. Administration on Aging (AoA)/Administration for Community Living (ACL)

National Alzheimer's and Dementia Resource Center Webinar

October 26, 2021



Today's agenda

- **Brain Health & Dementia**
 - What is brain health? How is it defined?
 - What is the relationship between brain health and dementia?
- **ACL Efforts to Promote Brain Health in the Community**
 - ACL's "Brain Health: You Can Make a Difference" online resource
 - Grantee-led work to promote brain health in the community
- **Interim Takeaways**

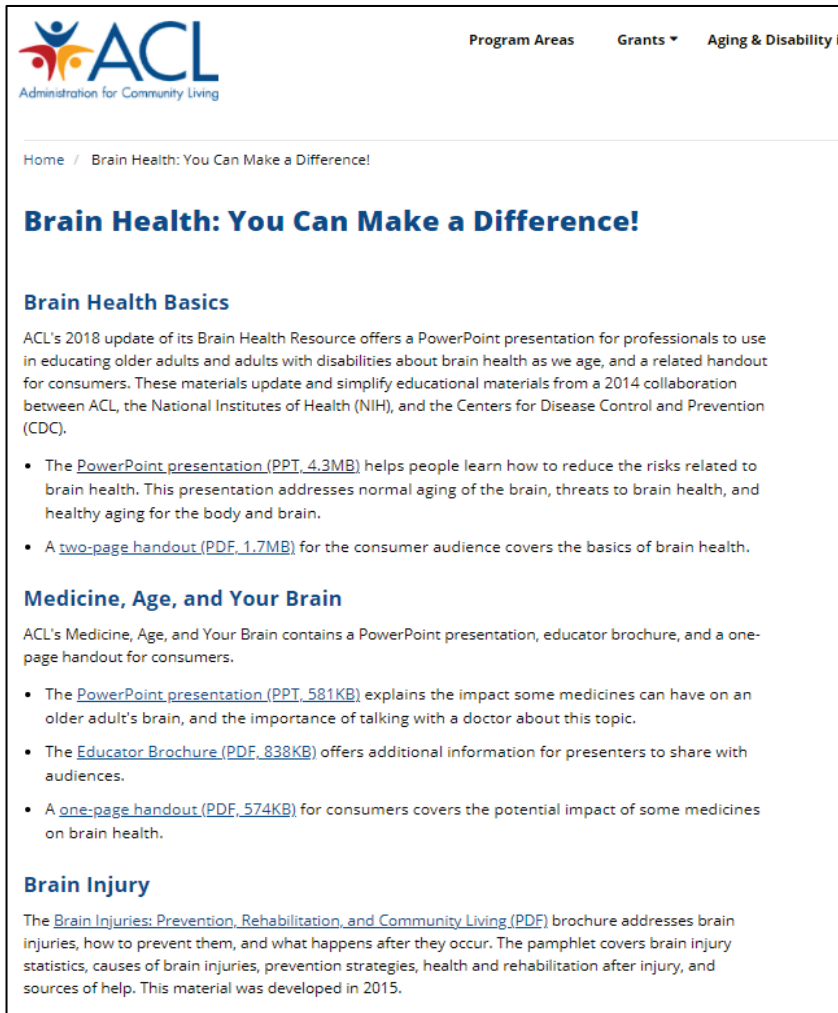
How Do We Define Brain Health?

- According to the National Institute on Aging, brain health “refers to how well a persons’ brain functions across several areas” including:
 - **Cognition:** How well one thinks, learns and remembers
 - **Movement:** How well one maintains and controls movements
 - **Emotion:** How well one processes and responds to emotions
 - **Touch:** How well you feel and respond to sensations of touch
- The World Health Organization provides a complementary definition:
 - “Good brain health is a state in which every individual can realize their own abilities and optimize their cognitive, emotional, psychological and behavioral functioning to cope with life situations”
- In short, how well does a person’s brain function to support one’s daily life activities

What is the Relationship Between Brain Health and Dementia?

- Alzheimer's disease and related dementias impact a person's brain function and its role in supporting execution of daily life activities
- **Potential Threats to Brain Health Include:**
 - Brain injuries
 - Excessive alcohol use
 - Smoking and related risks
 - Some medications and improper use of medicines
 - Certain health conditions (e.g., heart disease, stroke, diabetes, and conditions that affect sleep)

“Brain Health: You Can Make a Difference!”



The screenshot shows the ACL website header with the logo and navigation links for Program Areas, Grants, and Aging & Disability. The main content area features the title 'Brain Health: You Can Make a Difference!' and three sections: 'Brain Health Basics', 'Medicine, Age, and Your Brain', and 'Brain Injury'. Each section includes a brief description and a list of available resources like PowerPoint presentations and PDF handouts.

ACL
Administration for Community Living

Program Areas Grants Aging & Disability in

Home / Brain Health: You Can Make a Difference!

Brain Health: You Can Make a Difference!

Brain Health Basics

ACL's 2018 update of its Brain Health Resource offers a PowerPoint presentation for professionals to use in educating older adults and adults with disabilities about brain health as we age, and a related handout for consumers. These materials update and simplify educational materials from a 2014 collaboration between ACL, the National Institutes of Health (NIH), and the Centers for Disease Control and Prevention (CDC).

- The [PowerPoint presentation \(PPT, 4.3MB\)](#) helps people learn how to reduce the risks related to brain health. This presentation addresses normal aging of the brain, threats to brain health, and healthy aging for the body and brain.
- A [two-page handout \(PDF, 1.7MB\)](#) for the consumer audience covers the basics of brain health.

Medicine, Age, and Your Brain

ACL's Medicine, Age, and Your Brain contains a PowerPoint presentation, educator brochure, and a one-page handout for consumers.

- The [PowerPoint presentation \(PPT, 581KB\)](#) explains the impact some medicines can have on an older adult's brain, and the importance of talking with a doctor about this topic.
- The [Educator Brochure \(PDF, 838KB\)](#) offers additional information for presenters to share with audiences.
- A [one-page handout \(PDF, 574KB\)](#) for consumers covers the potential impact of some medicines on brain health.

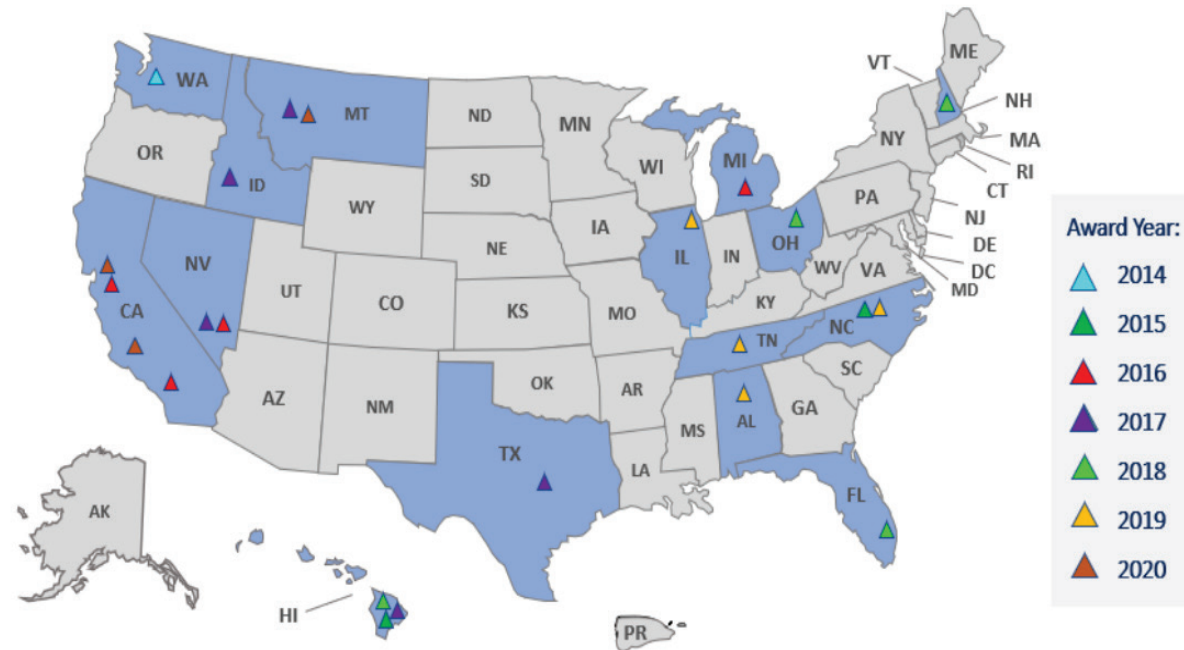
Brain Injury

The [Brain Injuries: Prevention, Rehabilitation, and Community Living \(PDF\)](#) brochure addresses brain injuries, how to prevent them, and what happens after they occur. The pamphlet covers brain injury statistics, causes of brain injuries, prevention strategies, health and rehabilitation after injury, and sources of help. This material was developed in 2015.

ACL's Brain Health Online Resource:

- PPT slides and handouts for healthcare professionals and educators covers “**Brain Health Basics,**” “**Medicine, Age, and Your Brain,**” “**Brain Injury,**” and “**Dementia**”.
- **Webinars, briefs, and case studies providing perspectives from community-based organizations** boosting awareness and education of brain health across communities.

Issue Brief Cataloguing ACL-Funded Support of Brain Health in States and Communities



ACL has supported brain health services or activities from 23 unique organizations (shaded triangles) spanning 15 states (shaded in dark blue) between the years 2014-2020.

Brain Health Services or Activities Include:

- Psychoeducational programs for family caregivers of persons living with dementia.
- Educational series covering basics of brain function, types of dementia, and living with dementia.
- Community presentations covering topics on healthy lifestyle choices and signs of cognitive impairment.



Thank you + Please get in touch!

vijeth.iyengar@acl.hhs.gov

@VijethIyengar



Brain Health and Dementia A Community Perspective

Donna Barrett, MSW, LSW
Program Manager, Senior and Adult Services
Summit County Public Health
Aging Society on Aging Webinar
October 26, 2021





Disclaimer

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The view and opinions expressed in this Power Point presentation are those of the presenter and not necessarily of the presenter's organization including the U.S. Department of Health and Human Services and the Administration for Community Living/Administration on Aging.



Summit County Public Health

Summit County is comprised of nine townships, nine villages and thirteen cities.

Akron is the County Seat and houses 37 %of the county population.

Total population--541,918

In Summit County there are 97,467 residents 65 and older

- 11.2 % are living with Alzheimer's Dementia
 - 65-74 1619
 - 75-84 4446
 - 85 and older 4841



ADRD in Ohio and Summit County

Alzheimer's disease is the 6th leading cause of death in Ohio

Ohio was one of the top 20 states for Alzheimer's Mortality in 2017; 12% of these deaths were in Summit County

In 2019, (BRFSS) 11.6 % of those aged 45 and older reported experiencing Subjective Cognitive Decline (SCD) an increase in confusion and memory loss that is happening more or is getting worse.

83.4 % of those with memory problems have at least one other chronic condition (arthritis, asthma, COPD, cancer, cardiovascular disease or diabetes).

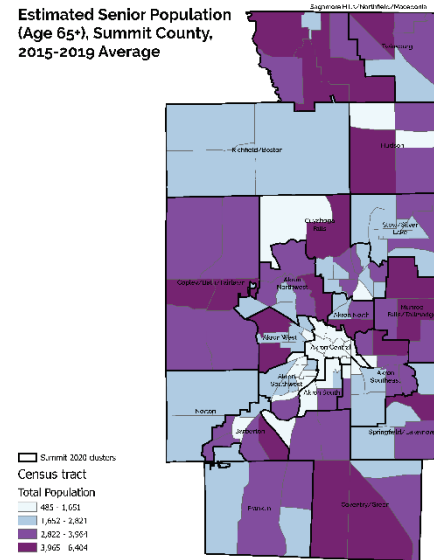
Ohio's age adjusted **Alzheimer's disease** mortality rate is 34.9 per 100,000
Summit County is higher at 36.7 per 100,000

Vascular and Unspecified Dementia Mortality Rate for Summit County is 42.5 per 100,000

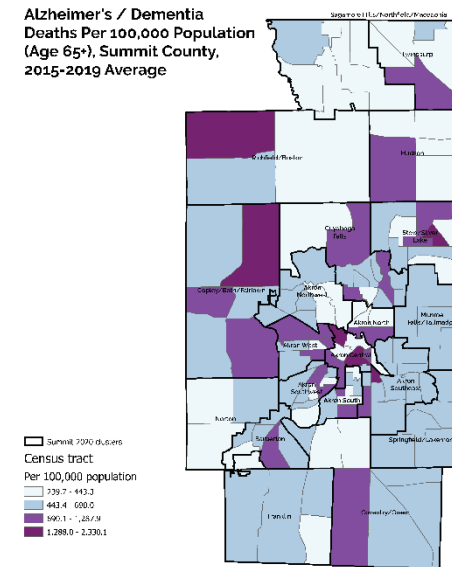


Maps of Summit County

Population 65 and Older



ADRD Deaths 2012-2016





Community Health Assessment and Community Health Improvement Plan

- The Aging Population is one of the priorities of the 2020-2022 CHIP
- 4/6 Aging Goals are related to Dementia and Chronic Disease
 - Provide and promote culturally specific Alzheimer's disease and related dementia prevention, health care and long-term planning education to improve quality of life
 - Reduce risk factors related to chronic disease among seniors and adults.
- Health Brain Initiative-State and Local Public Health Partnership to Address Dementia The 2018-2023 Road Map



Stigma and Fear

Stigma-"related to dementia and mild cognitive impairment can have a significant and negative impact on interpersonal relationships, interactions with health the health care community, attitudes about service utilization, and participation in clinical research". In addition this stigma extends to the families and can be more profound for this who develop younger onset Alzheimer's disease". www.cdc.gov/aging/pdf/stigma-and-ad-brief-july-2015.pdf

2012 Study-"In your opinion, do you think there are negative associations (i.e.) stigma about people who have dementia in the country where you live"?

- More than 75 % of respondents said **YES**
- 42% identified negative examples
 - 28% feeling discounted or marginalized
 - 24% felt that people lacked understanding of what to do when having a conversation with a person with dementia
 - 24% felt that people needed to know how to involve them more

(Citation: Nicole L Batsch, Mary S Mittelman. World Alzheimer Report 2012. Overcoming the Stigma of Dementia. Alzheimer's Disease International (ADI), London; 2012. Accessed May 5, 2015_



Curriculum Choice

- Brain Health Basics
 - PowerPoint Presentation
 - Two-Page Handout
- Medicine, Age and Your Brain
 - PowerPoint Presentation
 - Educator brochure
 - Handout



Pre and Post Screenings

- Developed a pool of 64 questions.
 - Multiple Choice
 - True and False
 - Intended Actions post training
- Demographics
- Professionals
- Three training options
 - Brain Health Basics
 - Medicine You and Your Brain
 - Both together



Target Population

- Community residents
- Caregivers
- Person with Dementia
- Providers
 - GWEP
 - ECHO's
- Address Disparities in minority populations
 - Refugees
 - African Americans
 - Latino



Implementation

- Outreach/Education Plan
 - Senior Centers
 - Health Fairs
 - Caregiver Support Groups
 - Ministries
 - Refugee Serving Agencies
 - AMHA Housing
 - Virtual Trainings



Preliminary Outcomes/Process Improvement Opportunities

Preliminary Outcomes

- Demographics
- Pre and Post Screenings
- Increase in Knowledge

Process Issues

- Glitches in technology
- Virtual Trainings -vs-Face to Face
- Number of completers
- Limited data



Marketing

- Press Release
- Knox Marketing
 - Facebook Campaign
 - Landing Page
 - Contact for training or additional information



Next Steps

- Implement Marketing Plan (end of year)
- Develop Train the Trainer
 - In Partnership with Memory Lane (Lucas County, Scripts Gerontology, Smile Minded Smartworks, LLC)
 - Sustainability
 - HBI Road Map Strategist
 - Implement and coordinate actions from the Health Brain Initiative's State and Local Public Health Partnerships to Address Dementia, The 2018-2023 Road Map.



Contact Information

Donna Barrett, MSW, LSW
Program Manager, Senior and Adult Services
Summit County Public Health
d Barrett@schd.org
330-926-5626



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AltaMed Health Services Corporation

Promoting Brain Health: Insights from a Health Care System

Lourdes Birba, MSG – VP, Aging Services and Product Development

October 26, 2021



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Learning Objectives

- Participants in this webinar will learn steps involved in developing brain health educational materials for underserved patient populations.
- Participants in this webinar will learn steps involved in implementing brain health education in a health care system.
- Participants in this webinar will learn the importance of developing relevant materials for health care providers to increase awareness of brain health.

Acknowledgements

This training is supported, in part, by grant number 90ADPI0034-01-00, from the Administration on Aging, U.S. Administration for Community Living, Washington, D.C. 20201. Grantees undertaking projects under government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living.



AltaMed Health Services Corporation Overview

Who We Are:

- Established in 1969
- Largest Federally Qualified Health Center (FQHC) in California
- We serve approximately 328,000 patients per year delivering complete medical services in Los Angeles and Orange Counties

What We Do:

- We offer a wide range of medical, dental, and support services

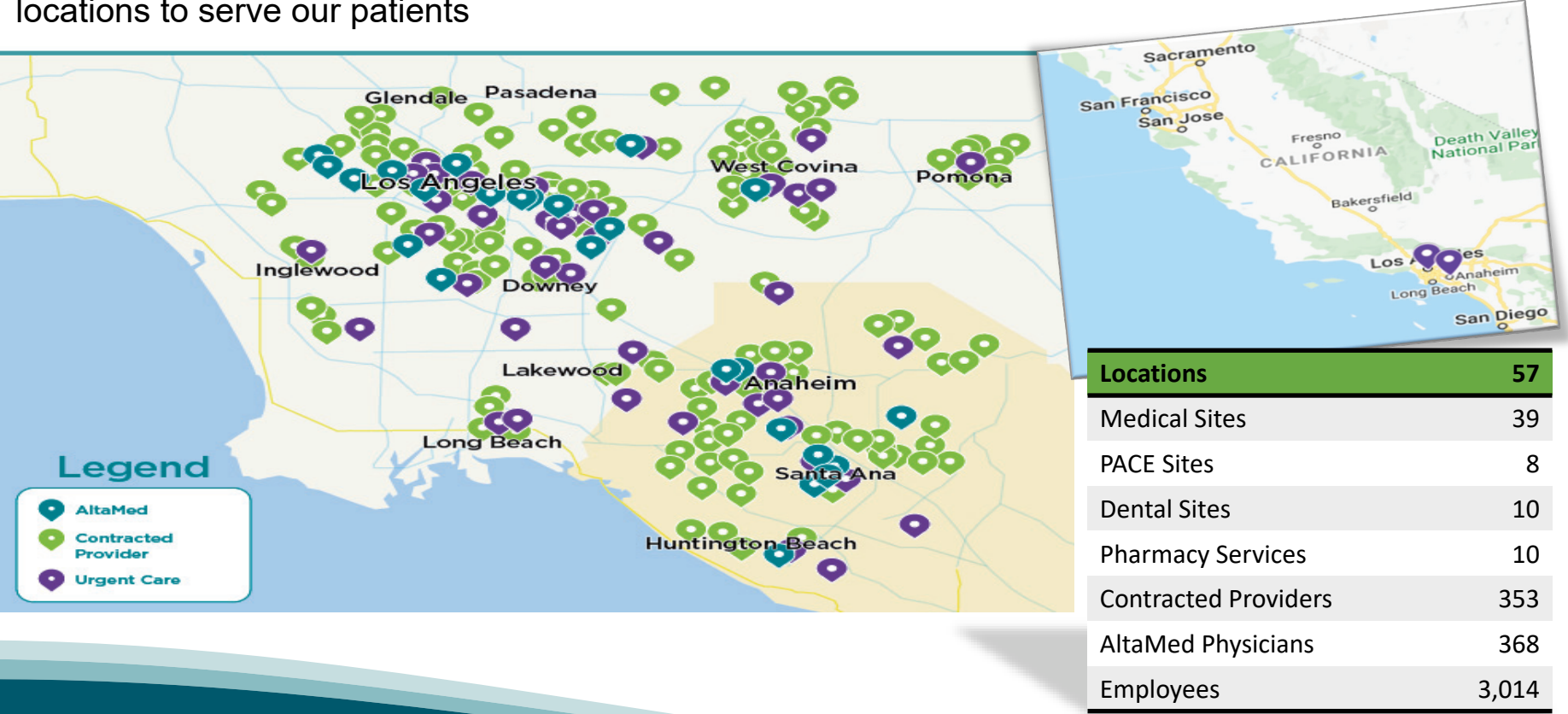
Primary Care (Birth Through the Senior Years):

- Internal Medicine
- Pediatrics
- Women's Health
- Family Planning and Obstetrics
- Health Screenings
- Annual Physicals
- Health Education
- Support Services
- Chronic Care Management
- Senior Services
- Dental Services
- Pharmacy
- Urgent Care
- Specialty Care
- Behavioral Health
- Childhood Healthy Weight Program
- Diabetes Prevention and Management
- HIV Prevention and Care
- Nutrition Counseling

AltaMed Health Services Corporation Overview Cont.

Service Area

As part of our mission, we continue to expand our network of providers, specialists, and urgent care locations to serve our patients

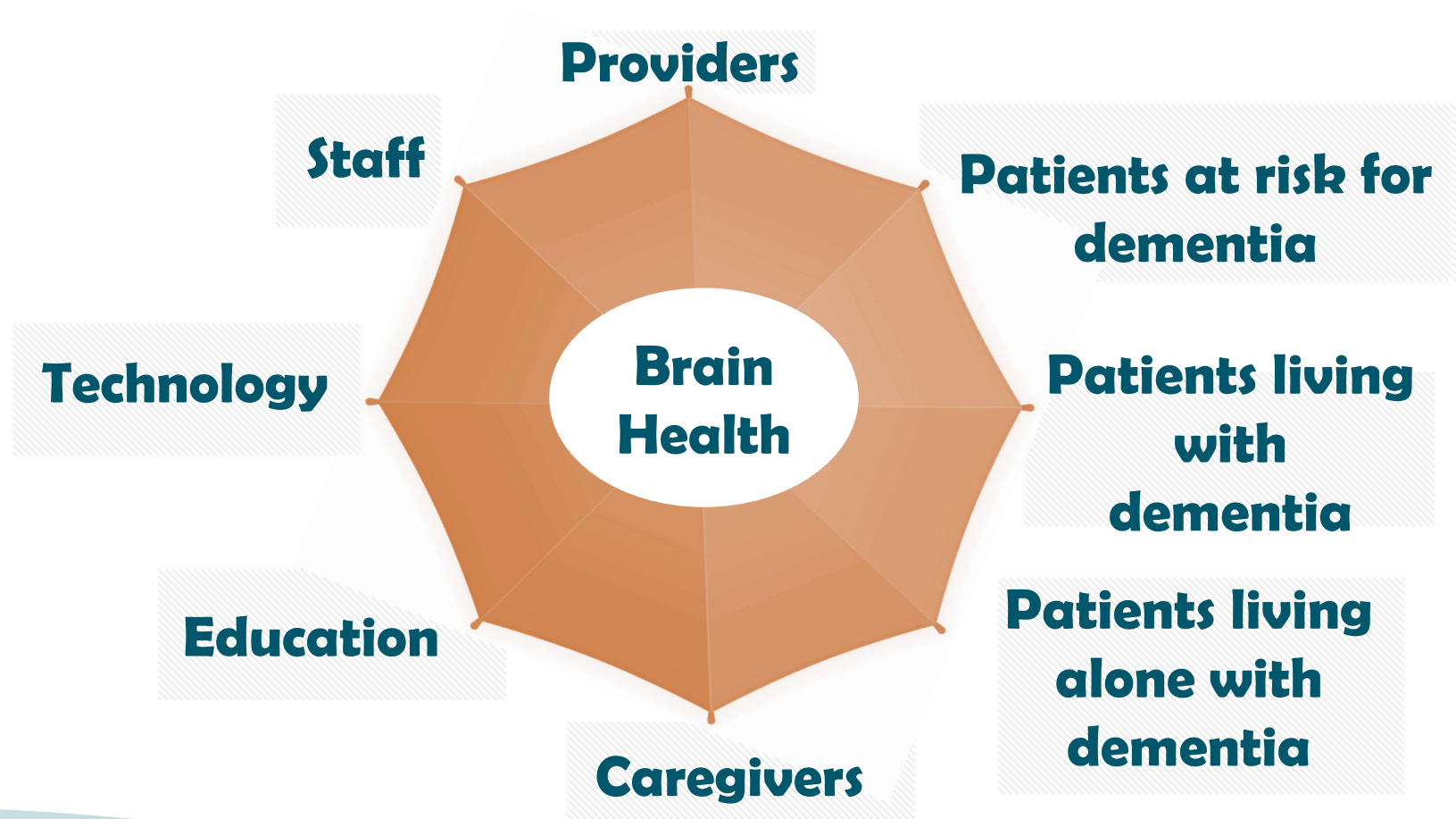


Community-Based Alzheimer's Disease Initiative (CADI) Objectives

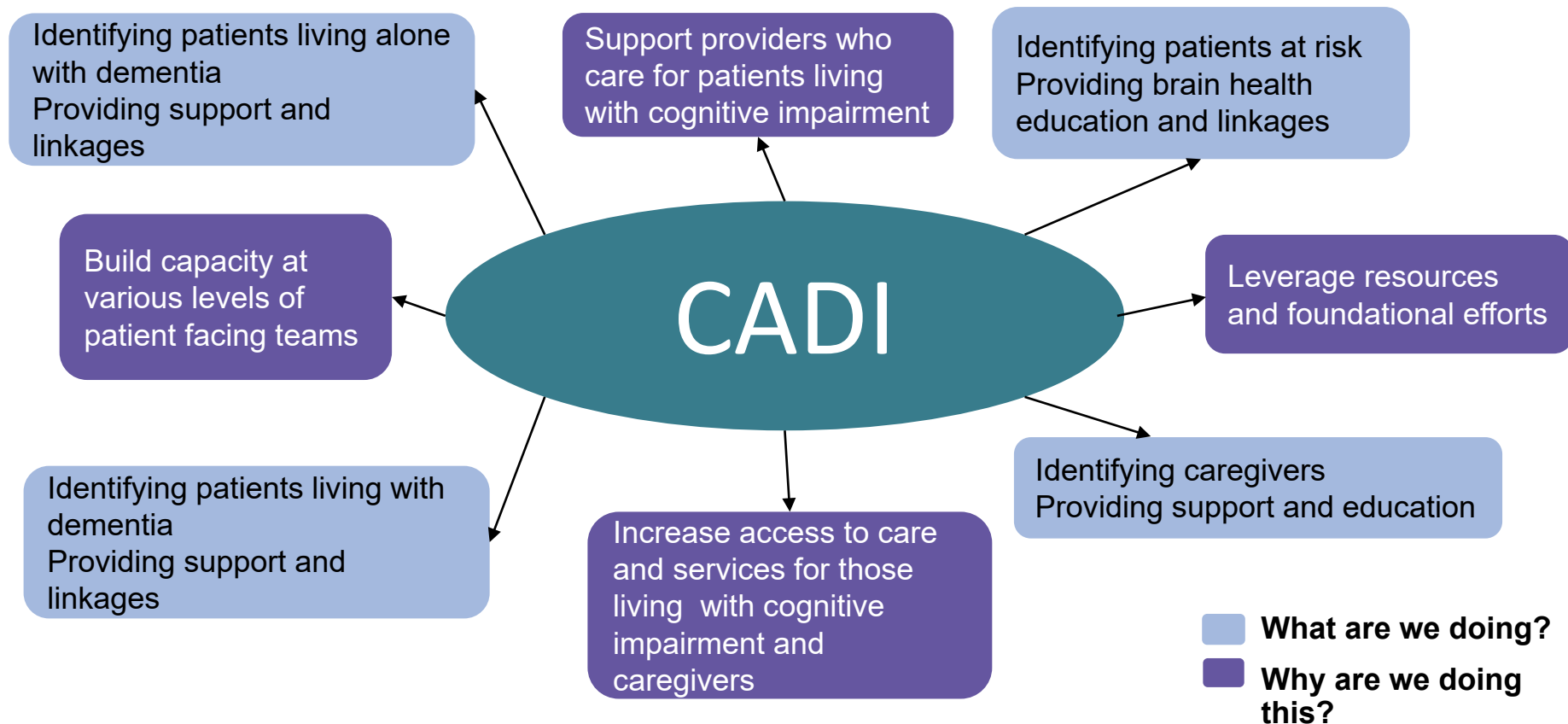
The Community-Based Alzheimer's Disease Initiative aims to improve the quality of life for patients living with dementia and their caregivers by strengthening community linkages, increasing training for health professionals, providing support and education to caregivers and increasing awareness around brain health and aging with those at risk of ADRD.

- 1 Increase dementia capability within AltaMed primary care clinics
- 2 Identify patients living alone with Alzheimer's Disease and Related Dementia (ADRD) & provide support through community linkages
- 3 Identify patients at high-risk. Increase awareness about symptoms and warning signs of ADRD and risk reduction tips.
- 4 Identify caregivers & provide support through community linkages and train on ALZLA: Savvy Caregiver & Cuidando con Respeto

Approach to Brain Health



Community-Based Alzheimer's Disease Initiative (CADI) Overview



Brain Health Education Design: The at Risk Patient

Approach to developing materials

- Reviewed materials from credible sources
- Considered the audience
- Designed for telephonic delivery by Health Educator







This 45 minute to 1-hour presentation is designed to help older adults learn about aging and memory.






The slides cover:

- Why brain health matters?
- Tips for healthy aging
- Typical age related changes
- Abnormal changes of aging
- Dementia and its risk factors
- How does patient reduce risk?

Brain Health Curriculum: The at Risk Patient

Tips for Healthy Aging

-  **Break a sweat** - Engage in regular cardiovascular exercise that elevates your heart rate and increases blood flow to the brain and body.
-  **Follow your heart** - Manage conditions such as obesity, high blood pressure and diabetes. What's good for your heart is good for your brain.
-  **Fuel up right** - Eat a healthy and balanced diet that is lower in fat and higher in vegetables and fruit to help reduce the risk of cognitive decline.
-  **Quit smoking** - Quitting smoking can reduce risk for cognitive decline to levels comparable to those who don't smoke.
-  **Reduce alcohol consumption** - Alcohol interferes with the brain's communication pathways, and can affect the way the brain looks and works.
-  **Get enough sleep** - Not getting enough sleep due to conditions like insomnia or sleep apnea may result in problems with memory and thinking.

-  **Take care of your mental health** - Seek medical treatment if you have symptoms of depression, anxiety or other mental health concerns. Also, try to manage stress.
-  **Understand medications** - Medicines can treat health problems and help you live a healthier life. When used incorrectly, medicines can also cause serious health problems. Many of these problems can be prevented.
-  **Buddy up** - Staying socially engaged may support brain health. Pursue social activities that are meaningful to you. Find ways to be part of your local community.
-  **Stimulate your mind** - Take a class, read a book, build a puzzle or do something artistic. Challenging your mind may have short and long term benefits.
-  **Prevent head injuries** - Reduce brain injury by wearing a seat belt, wearing non skid shoes, using a helmet if riding a bike, and doing exercises to improve balance and coordination.

Supplemental Information

Exercise routines can be modified to fit your individual fitness level and schedule.

It may look hard now, but you can **quit smoking**. It may take you more than one try to do it. Free quit line: 1-800-QUIT-NOW (1-800-784-8669).

Some **health conditions**, such as diabetes and heart disease, can be made worse by consumption of alcohol.

As we get older, the risk of falls and other accidents that can cause **brain injury** increase.

Falls are the leading cause of both fatal and nonfatal injuries for people 65 years and older.

Older adults should aim to get between 7-8 hours of sleep each night.

Get regular health screenings and talk to your doctor about any issues you may have.

*Start now. It's never too late or too early to incorporate healthy habits.

How can "YOU" Reduce your Risk?

GETTING ENOUGH SLEEP QUIT SMOKING

MANAGE YOUR CHOLESTEROL LEVELS

MANAGING CHRONIC CONDITIONS

STAY PHYSICALLY ACTIVE

MAINTAINING A HEALTHY WEIGHT

CONTROL YOUR BLOOD SUGAR EAT HEALTHY

MAINTAIN A HEALTHY BLOOD PRESSURE LEVEL

STAYING SOCIALLY CONNECTED

IF YOU DRINK ALCOHOL, DRINK IN MODERATION

TALK TO YOUR DOCTOR

Supplemental Information

- **Blood Pressure:** What is the patient doing to maintain control? What support is needed?
- **Cholesterol:** Is patient taking medication? Adherence? Lab tests? What support is needed?
- **Healthy diet:** Does patient have access to healthy foods? Have recommendations been made in EHR? What support is needed?
- **Exercise the body and mind:** What is the patient's activity level? What support is needed?
- **Stop smoking:** If applicable, what is the patient doing? What support is needed?
- **Avoid excess alcohol:** If applicable, what support is needed?
- **Stay socially connected:** What is the patient social network? Is isolation a factor? What support is needed?

AltaMed Brain Health and Aging

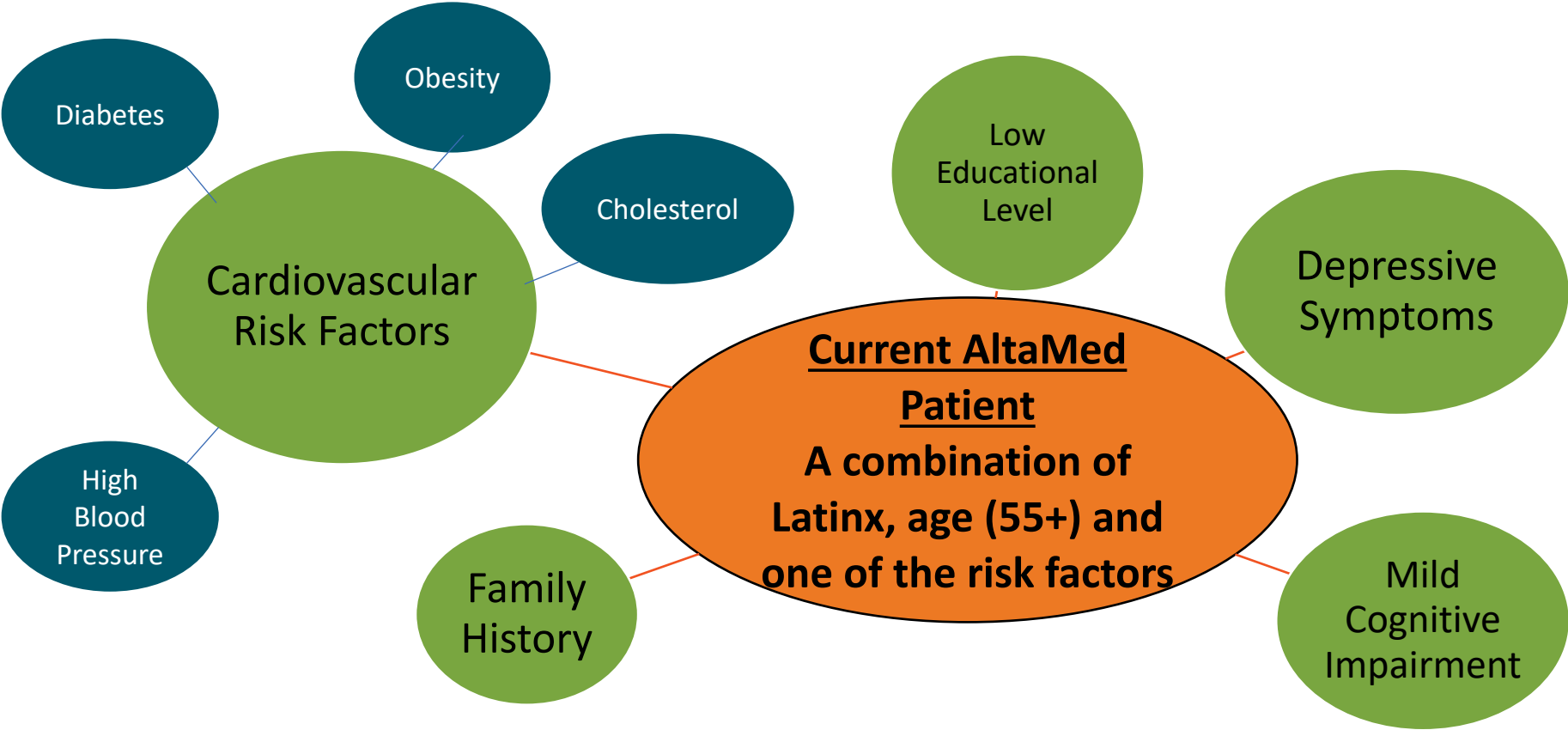
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AltaMed Brain Health and Aging

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For ease of use, the left side of the slide provides talking points to address with the patient and the right side provides supplemental information as needed.

Brain Health Eligibility Criteria: The at Risk Patient



Brain Health Identification Approach: The at Risk Patient

- Identify patients through reports using ICD-10 codes
- Referrals from providers and other patient facing staff
 - Epic (electronic health system)
 - Referral Order to “*Dementia Support Services*”
 - In-Basket (inbox)
 - Instant Messaging
- Email



Brain Health Education Implementation: The At-Risk Patient

Upon referral/identification of patient, the Health Educator contacts the patient.

- Health Educator introduction
- Explains the purpose of the call
- Obtains consent for participation
- Conducts brain health pre-test
- Shares brain health information or schedules a follow-up call for when information can be provided
- Warm-handoff of patient to USC for brain health post-test
- Mail education resource packet

Brain Health Education Design: Provider

Approach to developing materials

- Reviewed materials from credible sources
- Considered the audience
- Designed for virtual delivery by Provider Champion



This 1-hour presentation is designed to help providers learn about dementia identification and screening scoring interpretation.

The slides cover:

- What are memory disorders?
- Normal versus abnormal changes that occur with aging
- How common are memory disorders?
- What are the warning signs for memory disorders?
- How to evaluate memory disorders:
 - History and exam
 - Screening tools
 - Lab tests
 - Imaging
 - When to refer for further evaluation

Brain Health Education: Provider

Case: Rosa, 68 y/o Returns with DM

- 68 y/o female with h/o DM & Dyslipidemia returns with husband.
- Patient appears well but cannot provide details; no concerns brought up; responds to questions but does not ask for help with any problems
- Medications: patient knows she takes some for diabetes and cholesterol but cannot provide details or names of medications
- Groomed, pleasant, cooperative; symmetric exam, fluent, no lateralizing signs; normal base gait, follows basic instructions
- 3rd grade education
- Mini-cog: see attached Clock Drawing; recall 2/3 post clock drawing
- Is this normal or should we investigate it?

Lab Studies in Work-Up

- Commonly ordered tests: CBC, kidney/liver/electrolyte panel, b12, tsh/reflex t4; calcium;
- Sometimes ordered: tox screen/alcohol depending, HIV/RPR depending on risk;
- Not commonly ordered: genetic tests for apo-E4 alleles; mutations in presenilin 1/2, A-beta precursor protein,
- CSF: not prime time, research mostly: CSF A-beta 42 concentrations decrease in AD (moderate specificity); CSF Tau proteins (3x higher in AD than normal)

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CADI Accomplishments



- Patient identification process
- Robust database
- EHR referral enhancement
- Flag/alert for patient
- Flag/alert for caregiver
- Call message and script
- Brain Health and Aging Presentation
- The Basics of Memory Disorders Presentation
- Education/resource packets
- CADI internal webpage

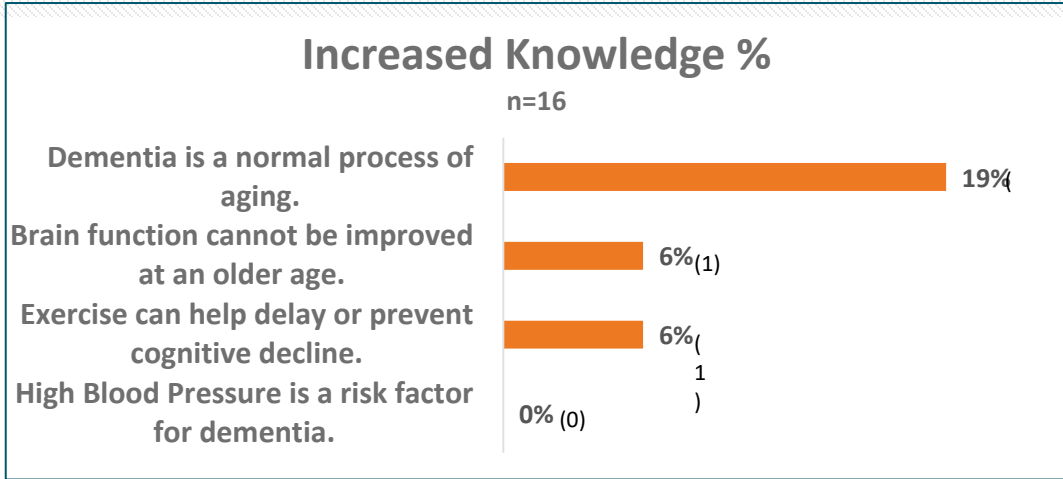
Results At-A-Glance



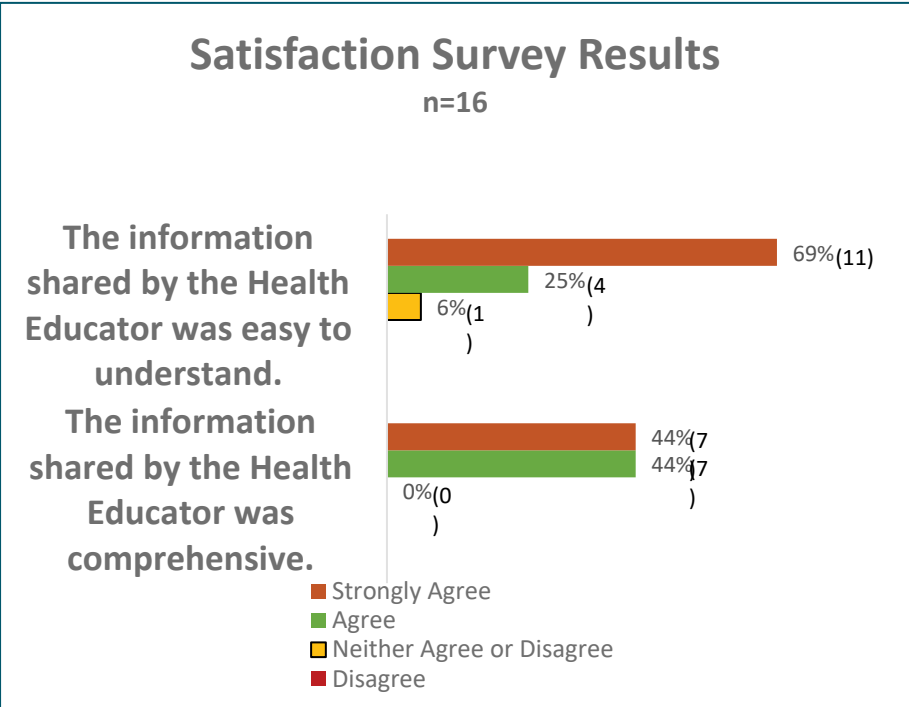
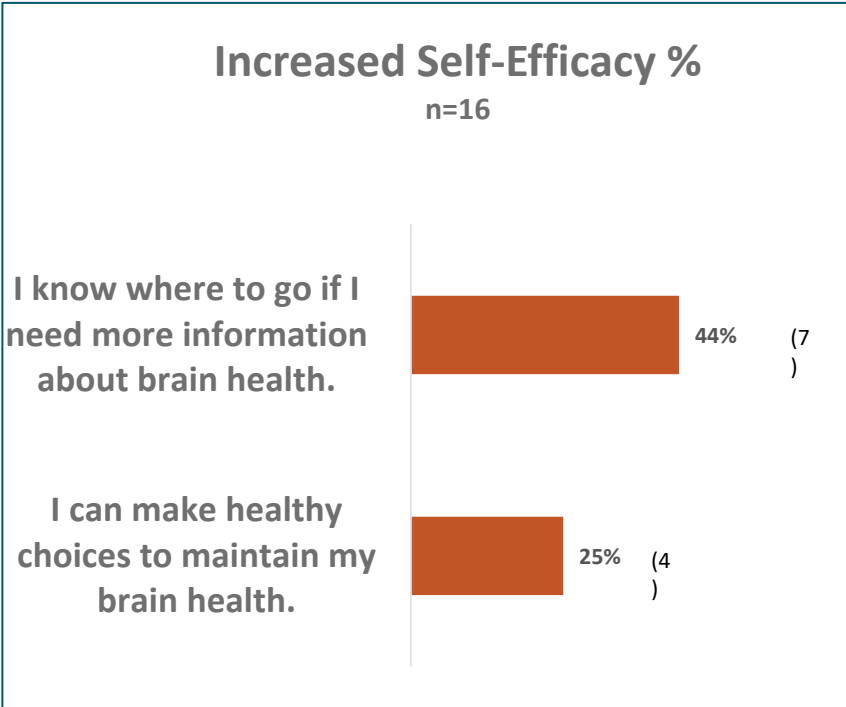
Implementation Timeline

- Patients with Dementia and Caregivers
September 2020 (Active 1 year)
Served to date: 271
- Professional Staff
February 2021 (Active 8 months)
Served to date: 51
- Providers
August 2021 (Active 2 months)
Served to date: 54

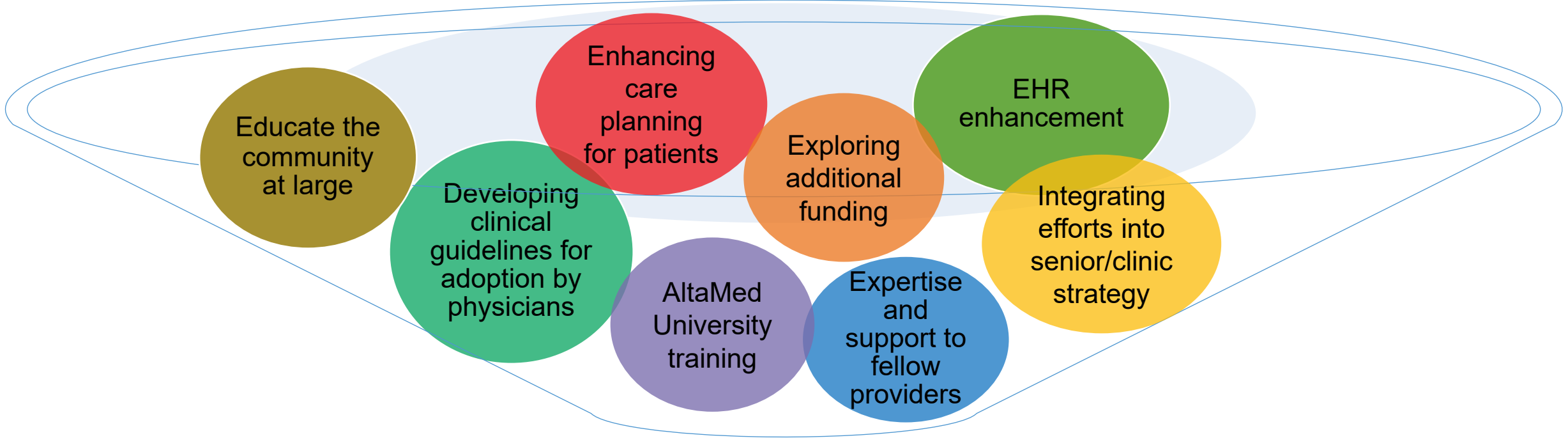
- Patients at risk of ADRD
August 2021 (Active 2 months)
Served to date: 32
Pre/Post data: 16



Results At-A-Glance Cont.



Opportunities and Sustainability



**Dementia Capable
Healthcare System**

THANK YOU

Lourdes
Birba, MSG

VP, Aging Services and Product Development -
AltaMed Health Services Corp.

lbirba@altamed.org



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Questions and ADPI Funding Announcements

Thank you for your attendance today.

- To be alerted when the next round of Alzheimer's Disease Programs Initiative funding is announced, sign up for Grants.gov notifications (<https://www.grants.gov/>)
- Search term: Alzheimer's Disease Programs Initiative (ADPI)

