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## **Howard County Local Health Improvement Coalition**

Healthy Aging Work Group Delegate Report

June 28, 2018

**FY 18-20 Healthy Aging Priority 1:** Reduce Alzheimer's and dementia-related emergencies in Howard County.

**FY 18-20 Healthy Aging Priority 2:** Reduce fall-related deaths in Howard County.

### **FY 18-20 Healthy Aging Goals:**

**Goal 1.1a:** Provide referral/linkage to brain health education, future and advanced care planning for healthy aging and aging-related services through community partnerships and outreach programs for priority populations.

**Goal 1.1b:** Engage HCLHIC member organizations in coordinated communication through social, print and other media on brain health education, future and advanced care planning for healthy aging and aging-related services for priority populations.

**Goal 2.1a:** Provide referral/linkage to fall prevention, adaptive device resources and awareness services through community partnerships and evidence-based education programs for priority populations.

**Goal 2.1b:** Engage HCLHIC member organizations in coordinated communication through social, print and other media on falls prevention, adaptive device resources and awareness services for priority populations.

### **FY 18-20 Healthy Aging Process Objectives:**

- By June 30, 2020, participation in evidence-based Alzheimer's and other dementia programs and fall prevention programs for priority populations will be increased by 20%.
- By June 30, 2020, 4 educational symposia/CE opportunities for providers, other care professionals working with priority populations will be provided.
- By June 30, 2020, 6 educational symposia/CE opportunities for caregivers to priority populations will be provided.
- By June 30, 2020, 20% of HCLHIC partner organizations will provide Alzheimer's and dementia-related resources for priority populations and integrate fall prevention practices in standard operations.

- By June 30, 2020, 20% of HCLHIC partner organizations will be engaged in education/future planning; and, fall prevention, adaptive device resources and awareness for priority populations by utilizing communication action alert tool.

**FY 18-20 Q4 Progress Report**

	<b>Discussion</b>
<p><b>List the action item (s) that this work group will complete by June 2018.</b></p>	<p><b>The action items this group will complete by June 2018 are as follows:</b></p> <ul style="list-style-type: none"> <li>A. Increase participation in evidence-based Alzheimer’s and other dementia and fall prevention programs for priority populations by 5%.</li> <li>B. Healthy Aging specific presentation/training held during 1 full HCLHIC meeting /1 work group meeting annually</li> <li>C. Hold one provider-focused symposia/continuing education opportunity with Alzheimer’s and other dementia; and, fall prevention focus.</li> <li>D. Hold two community-based presentation/training opportunities with Alzheimer’s and other dementia; and, fall prevention focus.</li> <li>E. Include Brain health education, future and advanced care planning for healthy aging and aging-related services; and, fall prevention, adaptive device resources and awareness actions/messages in a minimum of 2 HCLHIC Action Alert Tools per topic.</li> <li>F. Engage a minimum of 5% of HCLHIC partner organizations in Brain health education, future and advanced care planning for healthy aging and aging-related services; and, fall prevention, adaptive device resources and awareness actions/messages through the HCLHIC Action Alert Tool.</li> <li>G. Engage a minimum of 5% HCLHIC member organizations in integrating Alzheimer's/Dementia related resources into standard screening/educational services provided for older adults by their organization.</li> <li>H. Engage a minimum of 5% HCLHIC member organizations in integrating falls prevention practices into standard screening/educational services provided for older adults by their organization.</li> </ul>
<p><b>What is the current status of the action item (s) above during this month?</b></p>	<p><b>The current status of the action items are as follows:</b></p> <ul style="list-style-type: none"> <li>A. Baseline data for evidence-based Alzheimer’s and other dementia and fall prevention programs were collected; Work group members have been educated on all evidence-based programs identified in the Healthy Aging objectives of the FY 18-20 HCLHIC Strategic Plan. HCLHIC staff has engaged in individual meetings with specific HCLHIC member organizations to discuss organizational planning for evidence-based programming.</li> <li>B. Horizon Foundation offered a presentation of its Speak(<i>easy</i>) program to the full HCLHIC in Q1 – FY 18 objective met.</li> </ul>

	<p>C. Healthy Aging work group members identified caregiver support and healthy aging practices integration as priority topics for continuing and community education; HCLHIC Healthy Aging Community Education programming implementation plan has been drafted and an action group convened to develop a “Caregiver Resources 101” presentation for providers that will be completed in Q4. Key partners have been identified for the project (CCT, MAP, OOA Caregiver support program). Each partner will highlight information in a short vignette that will be utilized in both a presentation and for social media purposes.</p> <p>HCLHIC Coordinator Sharif Braxton provided a caregiver support presentation at the First Baptist Church of Guilford’s annual health fair on May 19, 2018 reaching 27 participants.</p> <p>D. See above.</p> <p>E. Completed for FY18</p> <p>F. Completed for FY18</p> <p>G. HCLHIC member organizations presented examples of integration practices they implement within their own organizations at the March HA work group meeting. Partner organizations to pilot various forms of integrative services/messaging (e.g. Giant Nutrition) are being identified.</p> <p>H. See above.</p>
<p><b>What are the next steps and projected timelines for the next month to accomplish the action item (s) above?</b></p>	<p><b>The next steps in order to accomplish the action items are as follows:</b></p> <p>A. HCLHIC staff will convene a formal action group to engage organizations that provide evidence-based programs for falls, caregiver and other programs in the county during Q1 of FY 19.</p> <p>B. Speaker/Topic for spring 2019 Full HCLHIC presentation to be identified/secured in FY 19 Q1.</p> <p>C. HCLHIC Healthy Aging Vignettes will be implemented in FY 19 Q1.</p> <p>D. FY 19 educational event plan will be developed in FY 19 Q1.</p> <p>E. Work with over-arching HCLHIC Communications action group to determine FY 19 approaches using action alert tool and coordinated communications.</p>

	<p>F. See above.</p> <p>G. Convene action group to generate strategies, resources and standards for HCLHIC member organizations to integrate Brain health education, future and advanced care planning for healthy aging and aging-related services; and, fall prevention, adaptive device resources into standard referral and other business processes during FY 2019 Q1.</p> <p>Utilize work group and action group to identify and implement methods to engage faith-based and service-oriented clubs and organizations in Brain health education, future and advanced care planning for healthy aging and aging-related services; and, fall prevention, adaptive device resources and awareness actions/messaging during FY 2019 Q1.</p> <p>Organizations that implement falls-related services will be engaged to determine specific protocols/checklists they utilize. Additional organizations will be identified as early adopters to improve falls integration into their practices during FY 2019 Q2.</p> <p>H. See above.</p>
<p><b>List specific action(s) needed from HCLHIC members; specific work group(s); leadership; and/or others to successfully implement next steps for the month ahead.</b></p>	<p><b>The specific actions that are needed from HCLHIC members are as follows:</b></p> <ol style="list-style-type: none"> <li>1. Participation in action groups</li> <li>2. Engagement in Action Alert Tool calls to action</li> <li>3. Participation in pilot of integration messaging and services</li> </ol>

Respectfully submitted by  
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Howard County Local Health Improvement Coalition