

BACKGROUND

State Alzheimer's disease plans provide a comprehensive blueprint to guide a state's strategy for confronting the Alzheimer's crisis. State plans address many issues including dementia training standards, caregiver support, public awareness, research, legal issues, and early detection.



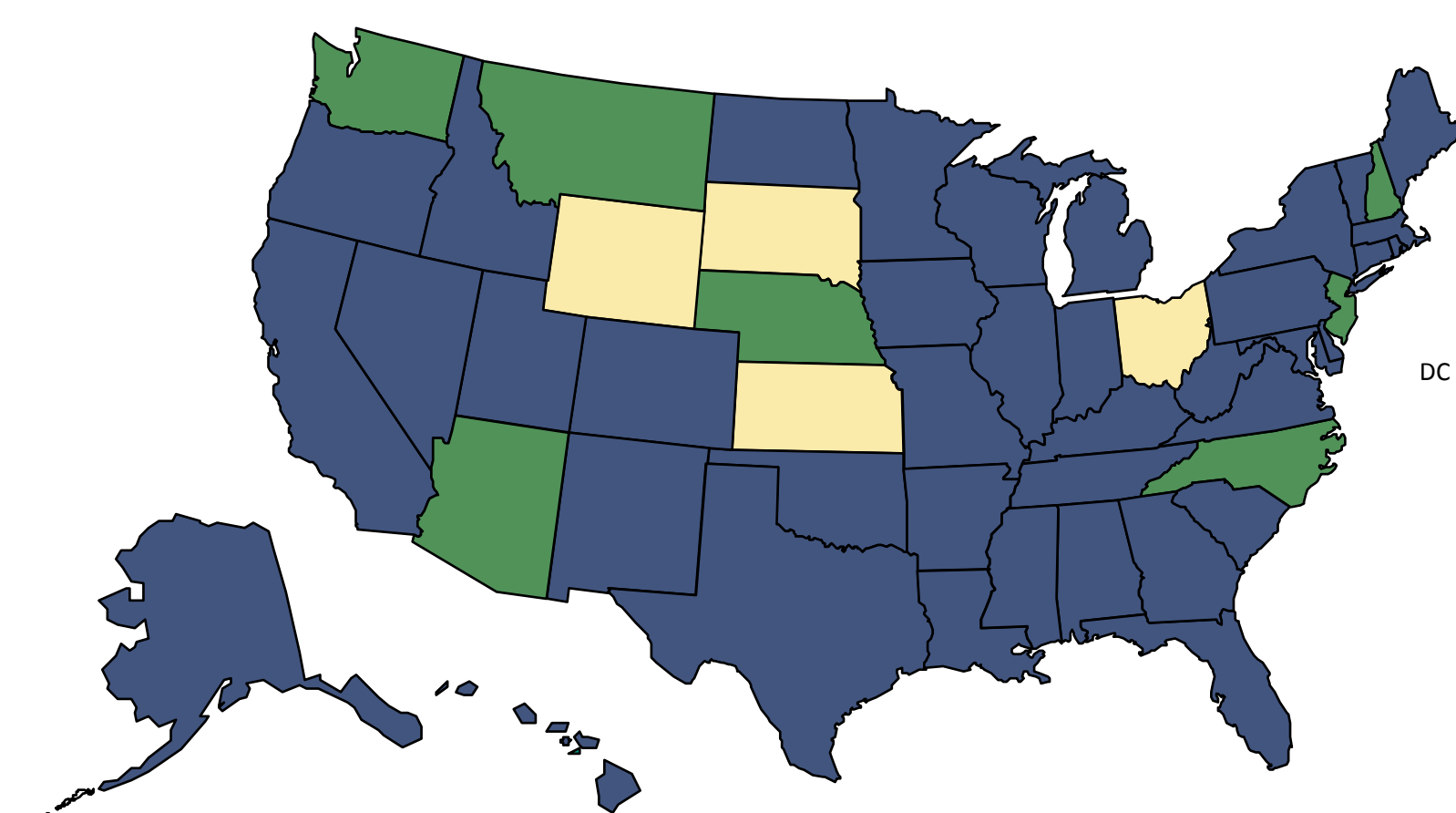
State plan development and implementation are recognized in both the National Alzheimer's Plan, which is the national strategic plan to address the rapidly escalating Alzheimer's disease crisis, and in the *Healthy Brain Initiative: The Public Health Road Map for State and National Partnerships, 2013 – 2018*, for the public health field.



OBJECTIVES & METHODS

The study examined the extent to which the 37 state Alzheimer's disease plans (published as of December 2014) encompassed 16 components that correspond with the National Alzheimer's Plan and the Road Map. The analysis entailed categorizing plan content and basic quantitative analysis of the components.

STATE PLAN ADOPTION (July 2015)



- Published a state Alzheimer's disease plan
- Task force established to develop a state Alzheimer's plan
- No legislation filed or executive branch activity pending

STATE PLAN POLICY ISSUES

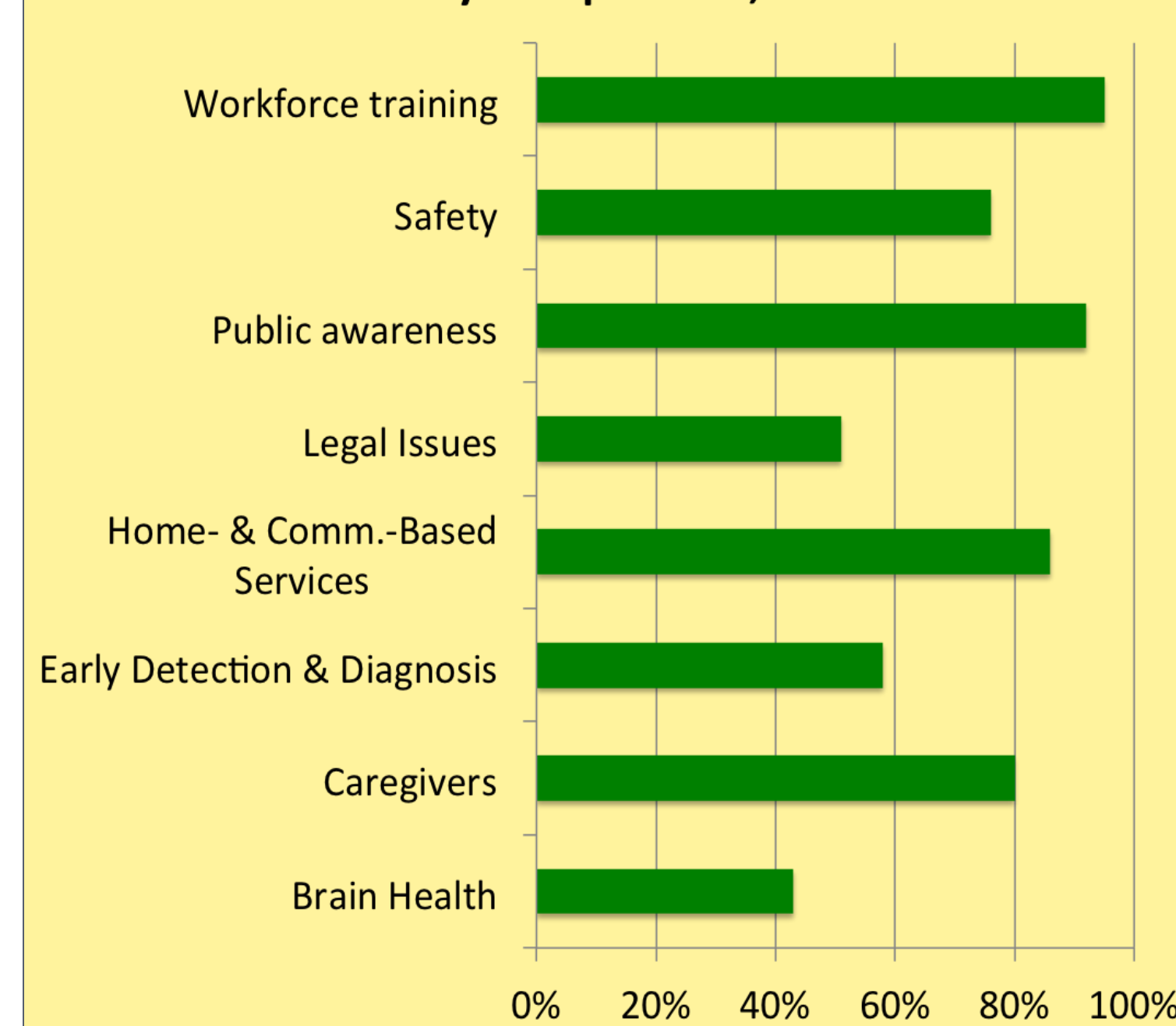
Results indicate that nearly all state plans have two components:

- Train healthcare and other professionals to provide high quality care and support to individuals with Alzheimer's (95%, n=35).
- Increase the public's awareness of Alzheimer's disease (92%, 34).

In contrast, about of half state plans have these policy components:

- Enhance Legal protections for and address other legal issues faced by individuals with Alzheimer's (51%, 19) .
- Encourage early detection and diagnosis of Alzheimer's (58%, 30).
- Promote activities that would maintain and improve brain health (43%, 16).

Percentage of State Plans with Policy Components, 2014



STATE IMPLEMENTATION IN ACTION

OREGON STATE PLAN

Published in 2012

4 Goals

- Enhance public awareness and engagement
- Optimize quality of care and efficiency
- Protect individuals with dementia
- Improve access to quality care

Partnerships

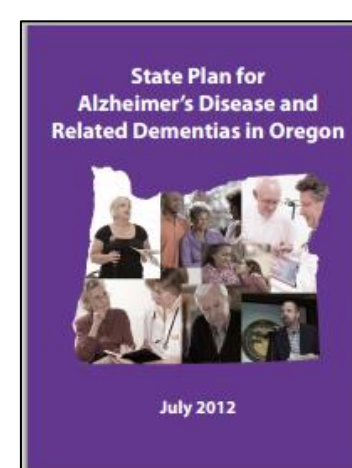
- OR Depts. of Transportation and Human Services; OR Medical Board; Leading Age OR: Office of LTC Ombudsman; Western Univ. of Health Sciences, OR Health and Science Univ.

Specific Implementation Steps

- 3 year grant from ACL to state unit on aging for outreach and marketing, increased training for ADRC staff, and development of Alzheimer's website
 - Unique URL: HelpForAlz.org
 - Website promoted with awareness campaign
 - Specific funding for outreach to Spanish-speaking residents

Guardianship Collaborative with WINGS

- Mandatory training guidelines for all non-professionals
- Resources for and connection provided to dementia training
- Funding appropriated to expand rural transportation needs for seniors/disabled
- Alzheimer's Care via Telemedicine for OR (ACT-ON)



GEORGIA STATE PLAN

Published in 2014

4 Goals

- Ensure the early and accurate diagnosis of dementia
- Use surveillance data to enhance awareness and action in public health programming and state planning
- Recognize Alzheimer's as a chronic disease and develop a public awareness and education campaign that will promote not only a healthy lifestyle, which may reduce the risk of Alzheimer's and related dementias, but also promote early, accurate diagnosis
- Improve the care and health outcomes of people with Alzheimer's disease and related dementia and their families

Partnerships

- GA Depts. of Public Health and Community Health; GA Div. of Aging Services; Emory, Univ. of GA, GA State Univ.; AAAs

Specific Implementation Steps

- Using distance learning tools to help educate physicians about dementia diagnosis; developed physician training course
- Alzheimer's registry housed in GA DPH
- Contract to conduct cognitive and caregiver optional modules as part of BRFSS
- Workforce development workgroups
- Training in reduction of anti-psychotic medication use
- Evidence based training for family caregivers

RECOMMENDATIONS

Once states publish a state Alzheimer's disease plan, they must then act so the vision becomes actual public policy.

- Legislation and regulations are often necessary to carry out plan recommendations for policy, system, and environmental changes.
- Use of the consensus-building in the state planning process creates an important foundation for implementing policy changes that improve Alzheimer's care and support.

States must ensure their state Alzheimer's disease plans are annually reviewed and updated every 3-5 years. (Some states had not updated their state Alzheimer's plans in two decades.)

- The new generation of state plans now recognizes public health as an essential stakeholder and provides state public health agencies with specific implementation responsibilities.
- Use of public health tools in the implementation of state Alzheimer's plans would aid partnership formation, coordination of efforts, monitoring and assessment, and policy development expertise.

The analysis indicates that many state plans have gaps in brain health promotion, legal issues encountered by people with Alzheimer's and caregivers, and early detection and diagnosis.

CONCLUSIONS

Because of public involvement in their development, state plans are one indication of the top concerns of persons with Alzheimer's and caregivers as well as other affected groups (e.g., health systems, aging/disability services, employer, and state/local governments). Periodic updates are essential to assure state plans reflect current science and data and are responsive to the evolving needs of affected populations. Policymakers and stakeholders can use these findings to identify areas to strengthen state plans.

To mitigate the growing impact and burden of Alzheimer's disease at a population level, state plans must be implemented, not just created.

RESOURCES & CONTACT

Alzheimer's and Public Health:
alz.org/publichealth

Alzheimer's Association (incl. chapters):
alz.org

State Alzheimer's Disease Plans:
alz.org/stateplans

Questions or More Info:

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