

# Age-Friendly Public Health System Celebration and Town Hall Northeast Tennessee

# Welcome

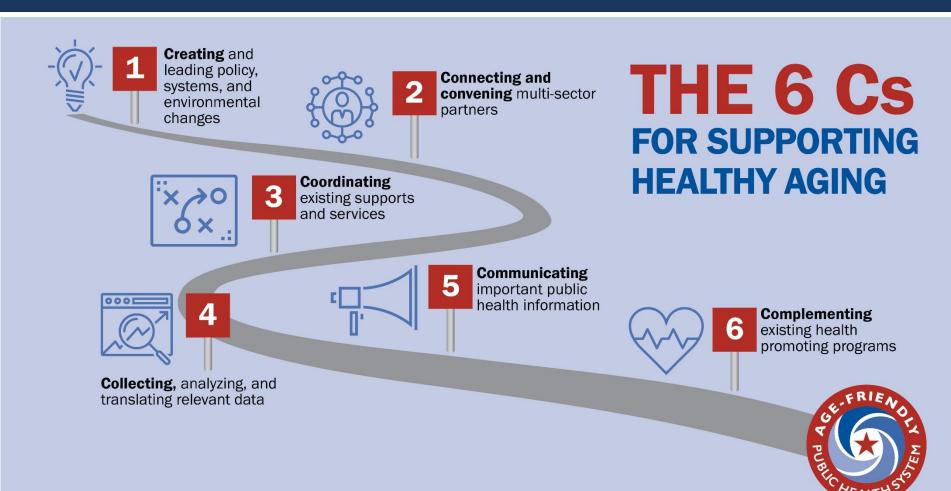
#### **Objectives**

- Discover how public health is prioritizing healthy aging as a fundamental aspect of its mission
- Examine Tennessee's Age-Friendly Ecosystem
- Gain insights on available resources and actions to advance your community's age-friendly initiatives





# **Creating an Age-Friendly Public Health System**





#### Cross-Sector Collaboration is a Public Health Best Practice

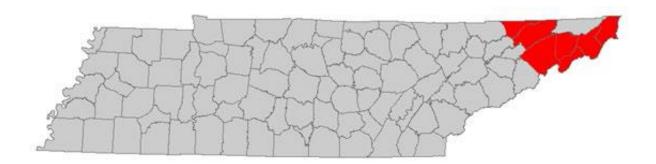


Improving the health and well-being of older adults and caregivers

- 7 Northeast Tennessee
   Local Health Departments
   recognized as Age-Friendly
   Public Health System!
- Multi-sector partnerships

# Let's Stay in Touch!

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# Megan Wolfe, JD

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# Celebrating Age-Friendly Public Health Advancement in Northeast Tennessee

Megan Wolfe, JD January 31, 2025

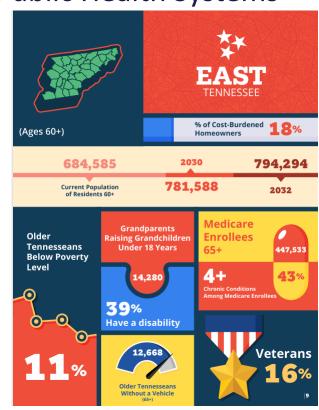






#### Tennessee's Age-Friendly Public Health Systems







## **AFPHS** Departmental Recognitions

- Carter County
- Greene County
- Hancock County
- Hawkins County
- Johnson County
- Unicoi County
- Washington County







# AFPHS Recognitions—Champions 45 Champions in the state!

- Carter County: Shana Johnson, Rachael Cunningham
- Greene County: Madison Huffine
- Hancock County: Sonya Winkle
- Hawkins County: Mikaela Sugga
- Johnson County: Angie Stout
- Unicoi County: McKenna Conway
- Washington County: Emilie Bordeau, Anna Carpenter, Jenny Donaldson





## AFPHS Recognitions—Action Plans

Carter County Health Department will introduce Age-Friendly Public

community p

Health Systen Greene County Health Department will lead the

Senior's Cent CHA/CHIP process every three years and consider older

adul Hancock County Health Department will establish a

senior

Hawkins County Health Department will partner with TN Alzheimer's Association and local law enforcement agencies

to host Johnson County Health Department will review and update and car its emergency preparedness plans annually to ensure they

addr Unicoi County Health Department has brought

othe awareness on scams, online and social media safety to

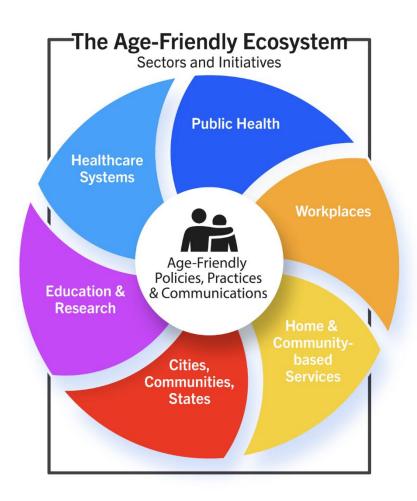
Gove Washington County Health Department will implement older adult health education (e.g., diabetes, falls risk, dementia, etc.) at health fairs and collaborate with aging sector partners to ensure older adults participate in events.



# Age-Friendly Ecosystem

#### What is it?

A comprehensive, collectively built, ever-expanding platform whose goal is to improve quality of life for older adults through enhanced, collaborative impact.

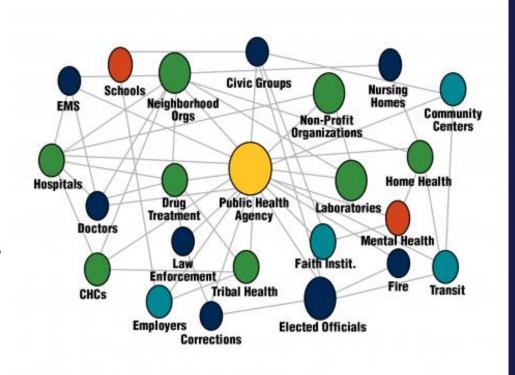




### Age-Friendly Ecosystem

#### Why is multi-sectoral collaboration needed?

- Eliminate silos
- Prioritize common goals
- Elevate older adult voice
- Target limited resources
- Share expertise
- Expand and deepen partnerships
- Policy, systems, environmental change

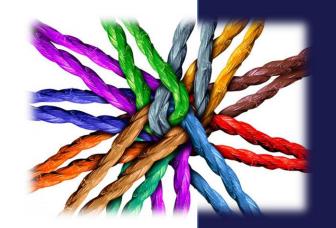






#### Age-Friendly Ecosystem Workshop Learnings

- Leadership is crucial: continuity is key
- Cross-sector understanding: ROI for each sector will vary
- Partnerships: think outside the box
- Funding: it's not just how much, but how can it be used?
- Time: it takes time to build buy-in and trust
- Creativity: be nimble and recognize opportunities
- Job descriptions: AFE efforts not the norm





## Age-Friendly Ecosystem Opportunities





Collection

#### Tennessee Multi-Sector Plan for Aging Data Dashboard

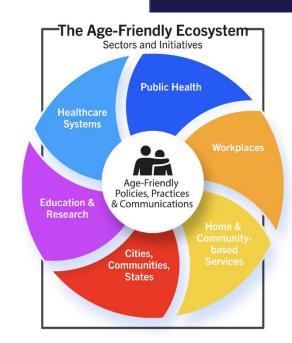






#### The Promise of an Age-Friendly Ecosystem

- AFPHS Recognitions: Tennessee Department of Health and 29 local health departments
- Age-Friendly Universities: East Tennessee State University; others seeking designation
- Age-Friendly States and Communities (AARP): 40
- Age-Friendly Health Systems (IHI): 37 hospitals, medical centers, clinics
- Other geriatric accreditations (surgery, Eds): 7 hospitals and medical centers
- Multi-sector Plan for Aging & Data Dashboard

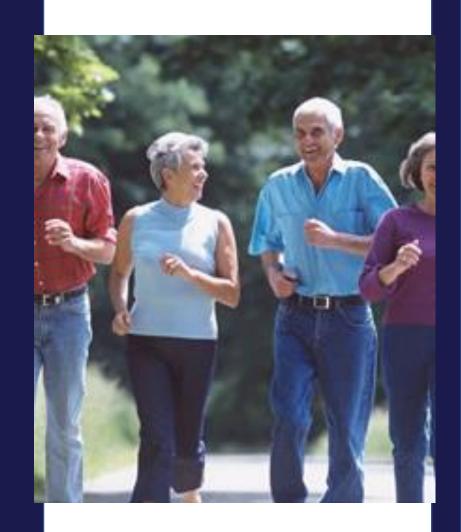




#### Call to Action: What Can You Do?

- Creating and Leading: Become a champion for systems change
- Connecting and Convening: Bring partners together across sectors around common goals
- Coordinating Existing Programs: Use your agency's website as hub for healthy aging resources, programs, and services
- Collecting and Translating Data: Share data from MPA data dashboard to build partnerships and advocate for policy change
- Communicating: Share opportunities with partners for collaborating to improve older adult health and well-being
- Complementing Existing Services: Work with AFE partners to identify gaps in services and which organizations can best fill them

Age-Friendly Public Health
Systems
www.afphs.org
www.tfah.org
afphs@tfah.org





# Town Hall Session

Dr. Ralph Alvarado, Dr. Kristi Wick, and Rebekah English

## **Call to Action: Northeast Tennessee Opportunities**



Fight Flu



Ready's

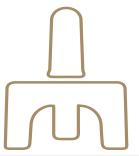
**Program** 



Health Council Community Connections



Mental Health
First Aid (MHFA)



Naloxone Training Demonstration





## **Call to Action: Statewide Opportunities**



Food & Nutrition Security Coalition











TBI FIND App



**Blue Zones** 







# **Rochelle Roberts**

Email: Rochelle.Roberts@tn.gov



# Alzheimer's Disease & Related Dementias

#### **Tri-Cities**



# **Statewide**

7,117,168

1,254,587

17.6%



## **Northeast**

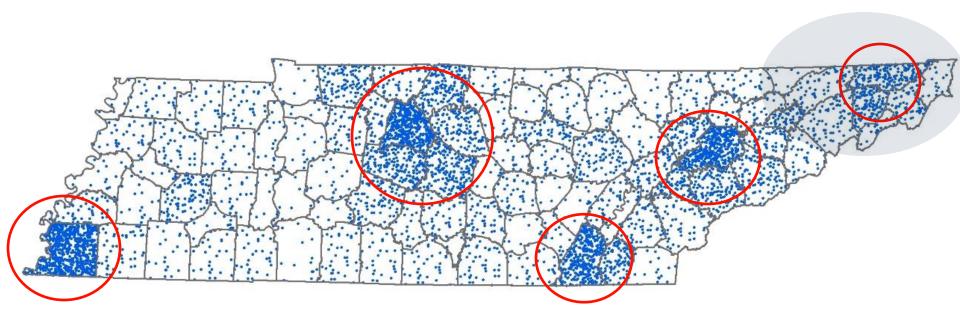
531,841

116,411

21.9%



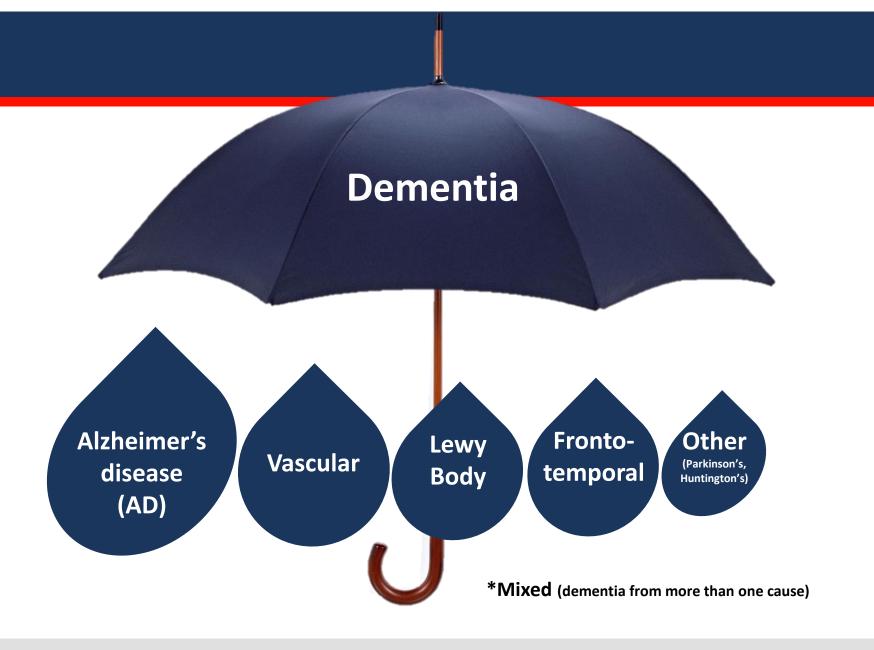
# **Aging Population Density**





43<sup>rd</sup>







811,500





# AD Cases Age 65+





# **Dementia Caregivers**





## **Sandwich Generation Caregivers**

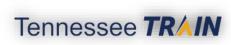
47% of adults in their 40s & 50s.



#### **Call to Action**

- Integrate dementia messaging into current health promotion strategies and plans.
- 2. Promote statewide training to strengthen understanding of dementia and brain health.
- **3. Become a member of TDAC** to engage key state and community partners.
- 4. Dementia: CARE RFA will be released early Spring 2025 providing up to \$10k to local/metro HDs or governments to implement initiatives focused on caregiver supports and emergency preparedness for individuals with dementia.











# Office of Healthy Aging



Sally Pitt | Director

Rochelle Roberts | State Dementia Director

Mark Lollis | BOLD Program Coordinator

Kimothy Warren | Program Consultant

Chelsea Ridely | Aging Strategic Initiatives Director





# Mia McNeil, JD

Email: mmcneil@aarp.org



## On Aging 2024

A Dozen Years of Discovery from AARP's Age-Friendly Network: Lessons, Insights, and the Path Forward

> January 31, 2024 Northeast Tennessee Town Hall East Tennessee State University

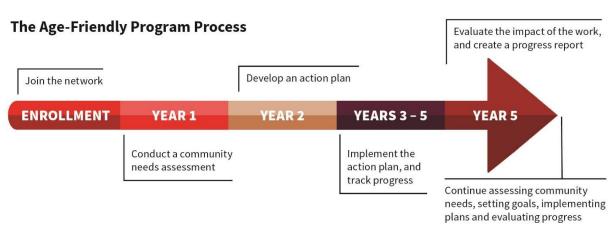


# **Age Friendly Communities Presenter**



Mia McNeil, Esq. State Director AARP Tennessee





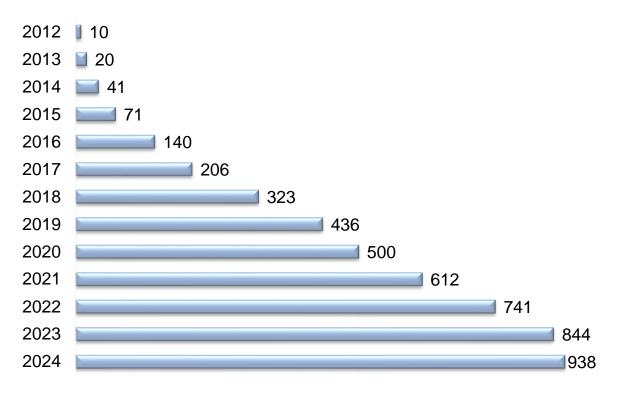


- Step 2: Conduct a community needs assessment
- Step 3: Develop an action and evaluation plan based on the assessment results
- Step 4: Implement and work toward the goals of the plan
- Step 5: Assess the impact of implementing the plan and submit progress reports
- Step 6: Share solutions, successes and best practices across the Network





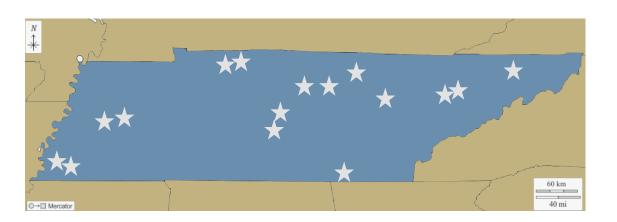
# Growth of the Network







#### 15 Tennessee Age-Friendly Communities



Brownsville
Chattanooga
Clarksville Crossville
Franklin
Gallatin

Hawkins County
Jackson
Knox County
Knoxville
Livingston

Memphis Montgomery County Nashville Shelby County Wilson County





### Age-Friendly in Public Health

• **Enhanced Health Services**: Age-friendly communities improve access to health services, outdoor spaces, and social participation, boosting older adults' self-rated health.

 Improved Public Space Use: These communities enhance mobility and independence for older adults by improving access to public transit and reducing various accessibility barriers.

• Integrated Public Health Initiatives: Initiatives like those by Trust for America's Health integrate health promotion across sectors, highlighting public health's role in active aging.

 Social and Physical Infrastructure: Age-friendly communities provide green spaces and infrastructure that promote physical activity and social interactions, essential for mental well-being.

 Multi-Sectoral Collaboration: Collaborative efforts across sectors in AFCs enhanced both the physical and social well-being of older adults, supporting engaged community living.

• **Positive Outcomes in Rural Areas**: In rural settings, age-friendly networks increase social connectedness and improve life satisfaction and health among older residents.





### Examples of community focus

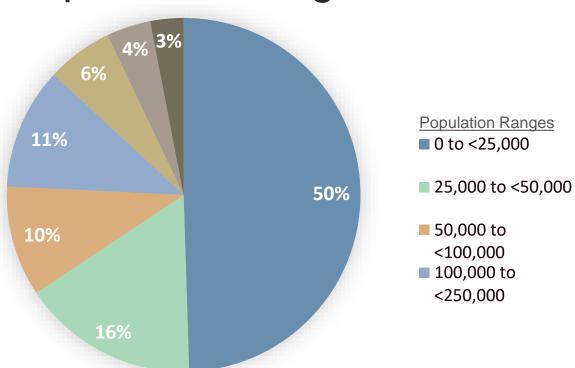
- Health and public health outcomes (62%)
- Access to health care (50%)
- Social isolation (52%)
- Family caregivers (45%)
- Dementia-related activities (36%)
- Telehealth/telemed (9%)
- Food insecurity/food deserts (32%)
- Transportation infrastructure (71%)
- Access to public transportation (50%)
- Volunteer driving programs (31%)
- Public safety (27%)



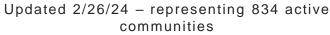


#### **Network Communities**

# Population Range





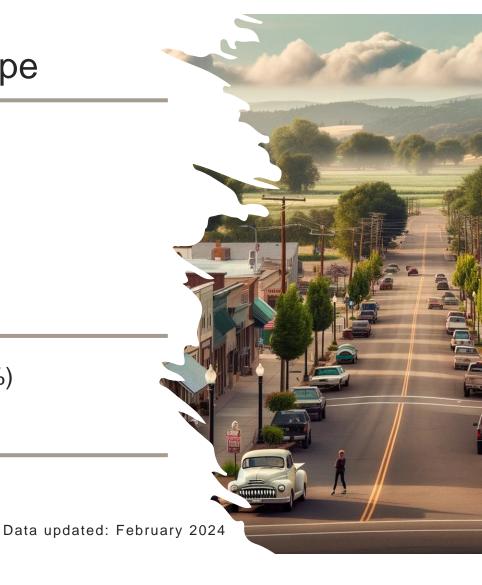




## Municipalities Enrolled by Type

- Cities (40%)
- Towns (25%)
- Counties (27%)
- Other\* (5%)
- Multi-community efforts: 47 regions (35%)
- States and Territory (11)

\* village, township, municipio, unincorporated, borough





## Community Characteristics & Stage

Urban (31%)

Rural (40%)

Suburban (52%)

- Recently Enrolled (8%)
- Conducting Assessment (8%)
- Developing Action Plan (16%)
- Implementing Action Plan (28%)
- Writing Progress Report (4%)
- 2nd or 3rd Cycle (26%)

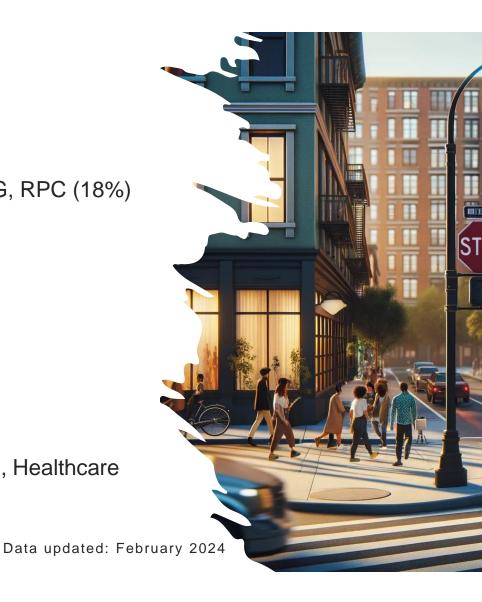
2023 Age-Friendly Community Leadership Survey





## Who's Leading Age-Friendly?

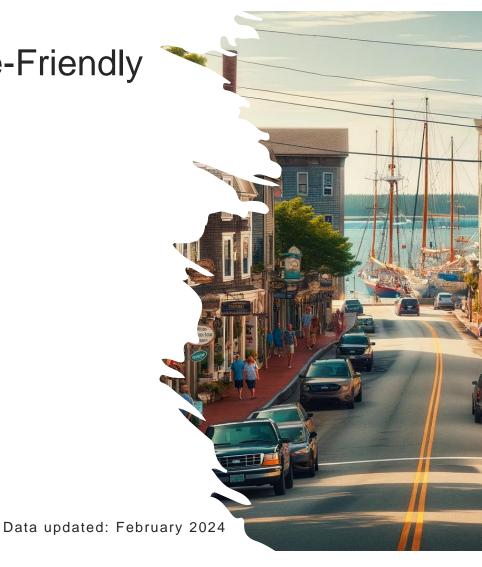
- Municipality (47%)
- Regional Planning Organization: MPO, COG, RPC (18%)
- Taskforce/Advisory Council (12%)
- Nonprofit (8%)
- Senior Center (5%)
- Coalition (4%)
- Volunteers (2%)
- Higher Education (2%)
- Funders (1%), Chamber of Commerce (1%), Healthcare (<1%)</li>





## Municipal Dept. Leading Age-Friendly

- Aging Services (40%)
- Elected Leadership (17%)
- Planning (12%)
- Parks and Recreation (11%)
- Health and Human Services (9%)
- Community Outreach (8%)
- Economic Development (2%)
- Housing (<1%)</li>





### **Funding**

#### **Communities reporting funding from:**

- Municipal/Public Sector (63%)
- AARP/Challenge (44%)
- Private Sector (41%)
- Foundations (27%)

#### Public and private sector support, 2021 - 2023

	2021		2023	
Public Sector	57%	$\longrightarrow$	63%	
Private Sector	34%	$\longrightarrow$	41%	

2023 Age-Friendly Community Leadership Survey





#### Municipal Plans Integrating Age-Friendly Lens

Respect and Social Inclusion

Comprehensive plan (76%)

Public Spaces

Parks and trails (12%)

Transportation

Transit/public transportation (45%)

Bike/pedestrian/walk (51%)

Housing

Land development, planning, zoning (44%)

Communication and Information

Digital/broadband (10%)

Community and Health Services

Disaster resilience/mitigation (43%)

Climate/energy (30%)

Civic Engagement and Work

Economic development (45%)

Community business plan (13%)

None (4%)

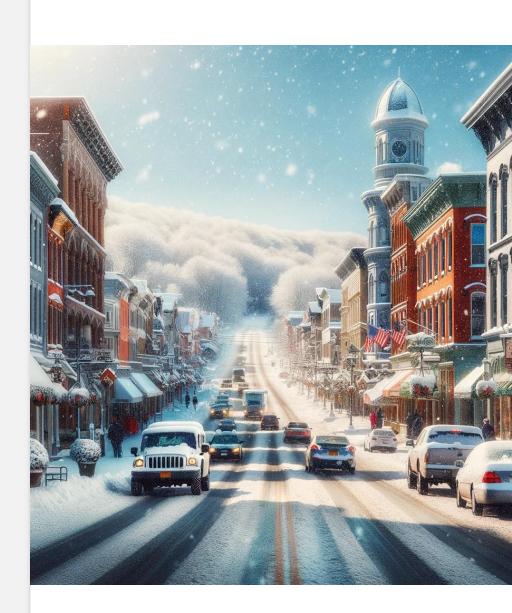




For more information about Age Friendly

#### **AARP.ORG/Livable**

- Information about Age Friendly
   Network
- AARP Community Challenge Grant
- AARP Livable Map
- Livable Community Resources
- AARP Livable Newsletter
- AARP Livabilty Index



## **Contact Me:**



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# Liz Hall

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Age-Friendly Health Systems

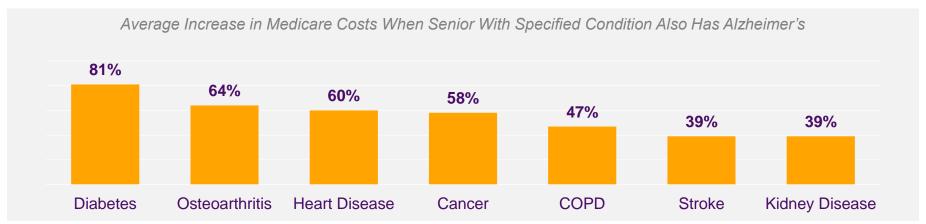


# The Association works with health systems and clinicians to:

- Improve health outcomes
- Enhance the patient experience
- Reduce the burden on clinicians
- More effectively manage the cost of care

### The Importance of Detecting and Managing Comorbidities

- More than 95% of people living with Alzheimer's have at least one other chronic condition
- Mismanagement or additional management increases health care costs



<sup>\*</sup>Chronic Conditions Warehouse, Centers for Medicare and Medicaid Services

Graph: Calculated from 2021 Alzheimer's Disease Facts and Figures, pg. 59, except Osteoarthiritis figure: Unpublished data from the National 5% Sample Medicare Fee-for-Service Beneficiaries for 2014

Age-Friendly Health Systems is an initiative of <u>The John A. Hartford</u>
<u>Foundation</u> and the Institute for Healthcare Improvement (IHI), in partnership with the <u>American Hospital Association (AHA)</u> and the <u>Catholic Health</u>
<u>Association of the United States (CHA)</u>, designed to meet this challenge head on.

#### Age-Friendly Health Systems aim to:

- Follow an essential set of evidence-based practices;
- Cause no harm; and
- Align with What Matters to the older adult and their family caregivers.



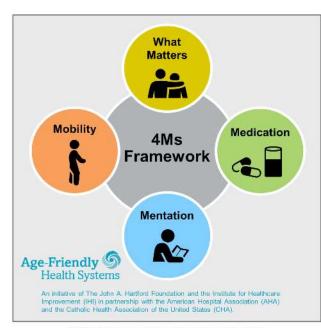
## **NEW Age-Friendly Hospital Measure**

- 1. Eliciting Patient Healthcare Goals
- 2. Responsible Medication Management
- 3. Frailty Screening and Intervention (i.e. Mobility, Mentation, and Malnutrition)
- 4. Social Vulnerability (social isolation, economic insecurity, ageism, limited access to healthcare, caregiver stress, elder abuse)
- 5. Age Friendly Care Leadership

#### TABLE IX.C-1. THE AGE FRIENDLY HOSPITAL MEASURE'S FIVE DOMAIN ATTESTATIONS

Attestation Dominios	Attentation Solvements: Aftent "yes" or "no" to each element. (Note: Affirmative attentation of all elements within a domain would be required for the benefits of briefly system to remove a point fill that domain.
Domain 1: Eliciting Patient Braitheare Goals This shomain focuses on obtaining parisms is health related goals and treatment preferences which will autorus dured decision making and goal concordant care.	(A) Established protection are in place to ensure patient pools related to feathbaser (health paids, teachemit pauls, bring wills, shoulifearing in Chealthoure province, advance care planning are obtained reviewed and decommand in the swelland record. These guide are updated before major procedures and spine nightfrent shanges in a factor dataset.
Donain 2: Responsible Medication Management Dis domain across optimize medication turningement through monitoring of the durancological occord for drug that may be considered mappengrate in older adults due to necessed only of futer.	(A) Modications are reviewed file for purpose of skentifying potentially inappropriate moliculation (PIMs) for older adults in defined by standard evidence-based galactions, circuit, or pretencies. Review should be undertakes upon advantages, before major practicates, surface questioners, before adjustment of a language in almost status. Once identified, PIMS deadle be considered by discontinuation, and/or dose adjustment in inflication.
Danaia 3: Frailty Screening and Intercentine This dorman name to screen patients for granters some related by tasky including organizes requirement/richatean, physical lawtives randelly, and maintaining for the suppose of castly dominion and intervention where appropriate.	(A) Patients are screened for risks regarding maintains, mobility, and multistrices using validated instruments shouly upon admission, before major procedures, analysis agentlesser stranges in clinical status. (II) Positive screene small in smagnerized plans including the risk intended to enterministrating defirmant misks, encouraging only mobility, and amplementing retrieve plans where appropriate. These plans should be included in discharge multicoline and contraterizated to prod-discharge features.  (C) Data are collected on the rate of Yalls, densition where, and 30-day readmission for patients = 65. These data are stratified by demographic analysis would feature.  (B) Proceeding civil to relate of or risk of corresponsy department decisions by enducing length of emergency department stay with a good of transforming a targeted preventings of older passions out of the invergency department stop with a good of transforming a targeted preventings of older passions out of the invergency department stop with a good of transforming a targeted preventings.
Domain 4: Social Vulnerability This domain units to remote that heapitals recognize the importance of social vulnerability secretary of older adults and have systems in place to ensure that social means in identified and addressed as part of the east of an	(A) Effekt adults an screened for periodic specific social valuerability including social inclusion, economic resourcity, limited access to hashbeam, cangious stress, and older phase to identify those who may benefit from ears plan modification. The assessments are performed in admission and against price to discharge.  (B) Positive servers for social valuerability (including those that identity patients at risk of minimateral) are addressed through inserved in materials. These strategies should not agreement referrable and resources for potents upon discharge.
Donaio 5: Ago-Friendly Care Lendership Team of motion needs to ensiste consistent quality of one for older adults through the about learness of muse Petrolic plant advantage on the season of the season and the transpiration with all components of this researce.	(A) Our bespital designation a point person and/or interpreferenceal committee to operationly ensure upon formally can make our practition, including those within this measure. This individual or committee revisions such things on quality related to other patterns, individual or deducation to restart, and updates benegital basheship on most related to practically ages friendly care. (B) the hospital sumpakes quality that related to the Age Priceally Respital resource. These data are stratified by detrographic and/or social factors and should be used to drive improvement cycles.

## **Age-Friendly Ecosystem**



For related work, this graphic may be used in its entirety without requesting permission. Graphic files and guidance at thi org/AgeFriendly

#### **What Matters**

Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care.

#### Medication

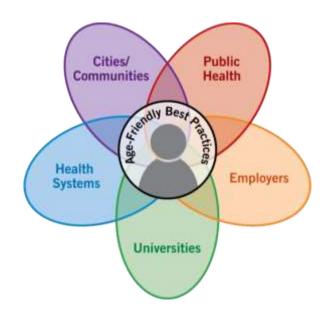
If medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care.

#### Mentation

Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

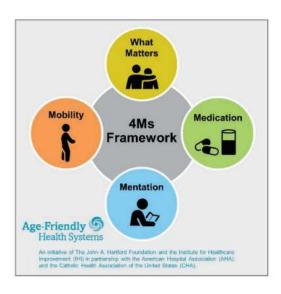
#### Mobility

Ensure that older adults move safely every day in order to maintain function and do What Matters.





#### Overlap of Age- and Dementia-Friendly Care



4Ms of Age-Friendly Care



8 Core Elements of Comprehensive Dementia Care



https://pblob1storage.blob.core.windows.net/public/nadrc/docs/6-20-23%20NADRC%20Webinar-Age%20Friendly%20Dementia%20Capable%20Health%20Systems.pdf

# Age-Friendly Tennessee

#### **Level One**

Boliver Hospital
CenterWell Senior Primary Care
Encompass Rehab
Indian Path Hospital
Livingston Regional Hospital
Oak Street Health
VA Medical Centers in Johnson City,
Chattanooga, Nashville, and Memphis



#### **Level Two**

Cherokee Health Systems – all clinics in East TN
CHI Memorial
Vanderbilt Medical Center
VA Medical Centers in Mountain Home and Murfreesboro

## IHI Age-Friendly Resources

- Guide to Using 4Ms
- EHR Implementation Guides <u>Epic</u> & <u>Cerner</u>
- ROI Calculator
- Case Studies
- Action Communities
- Getting Started Open School Course
- Hospital Form
- Friends of Age Friendly Recordings





# Dr. Jodi Southerland

Email: southerlanjl@mail.etsu.edu



# From Campus to Community:

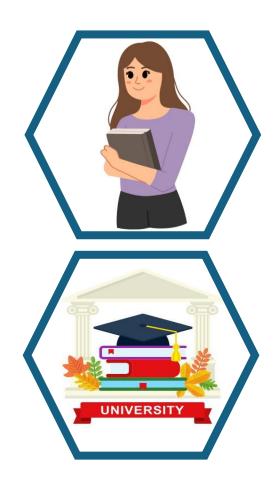
Advancing Healthy Aging Through Age-Friendly Universities

Jodi Southerland, DrPH

East Tennessee State University, College of Public Health

January 31, 2025



































UNIVERSITY





































































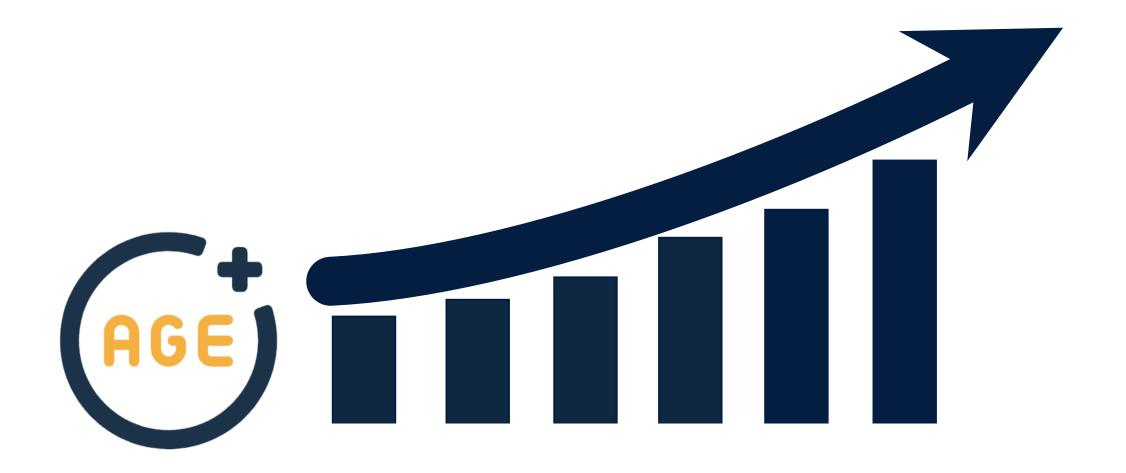




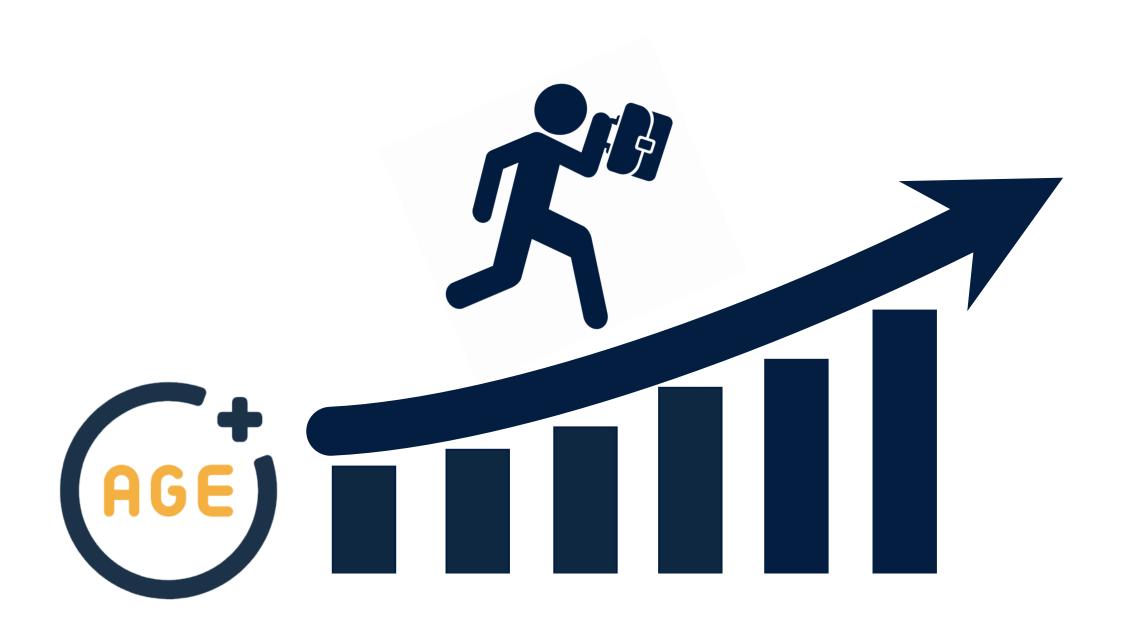


























































































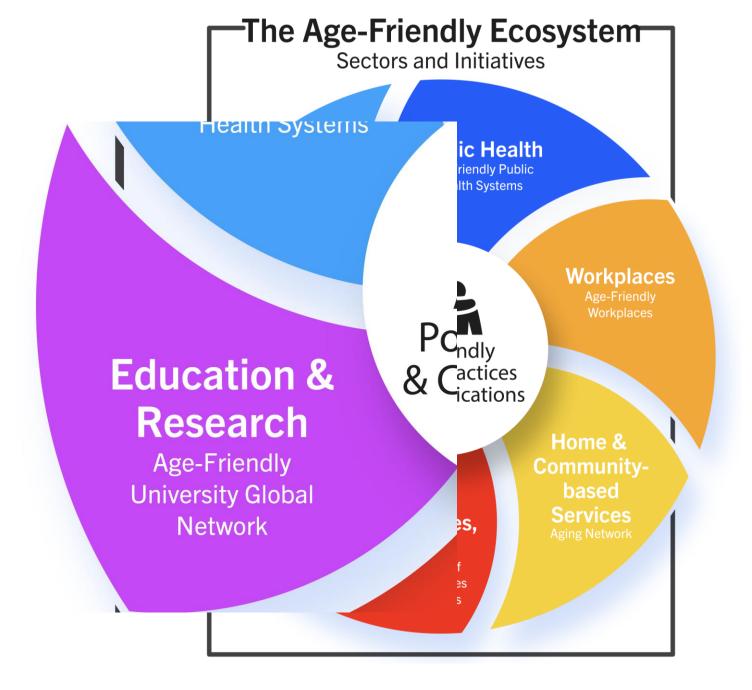








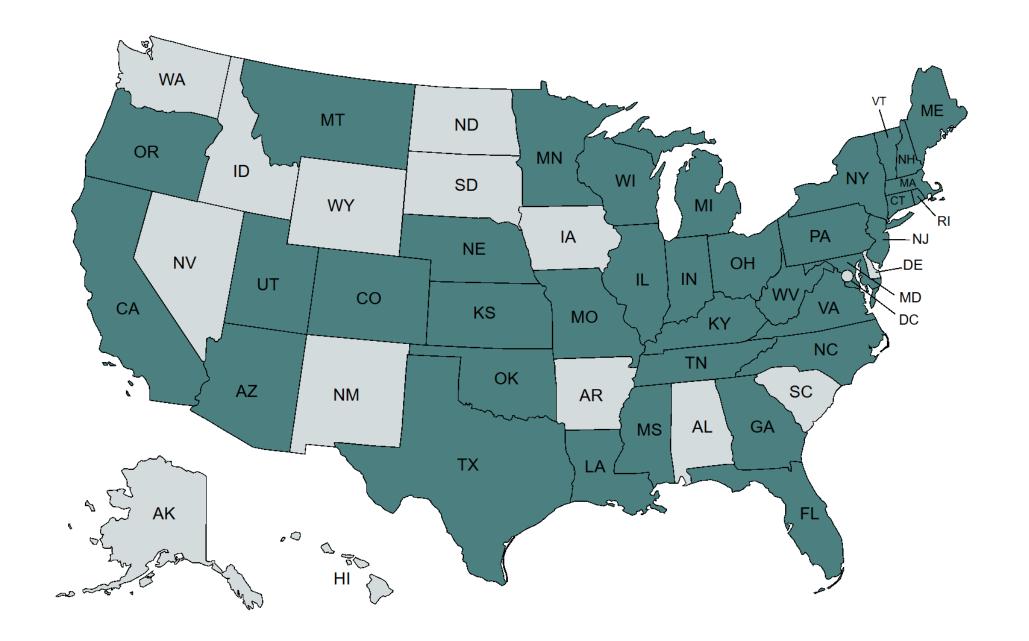


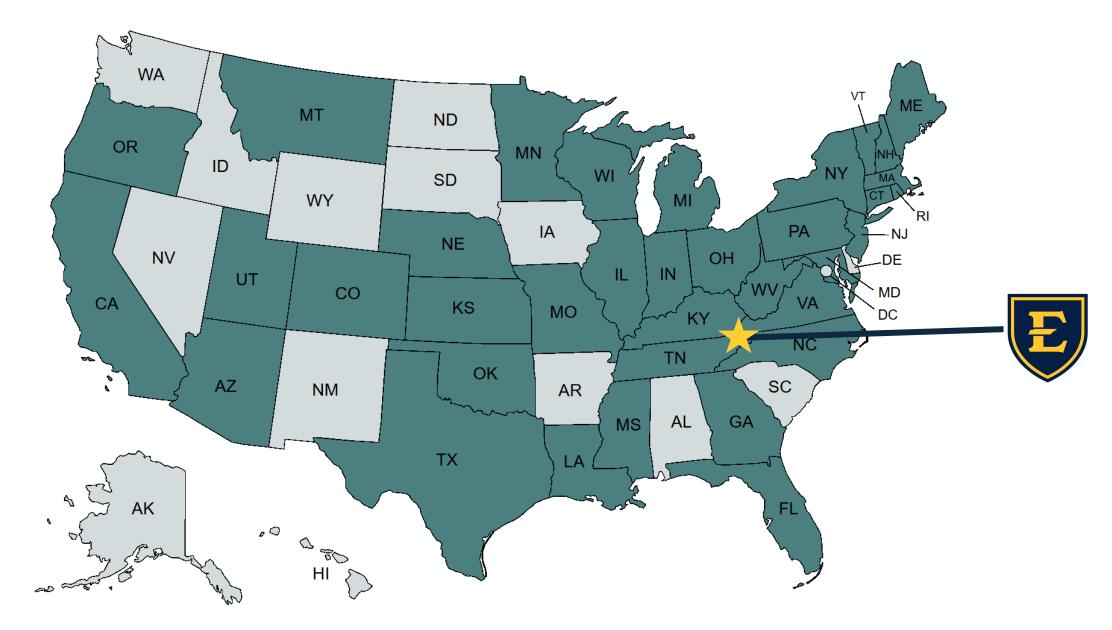




- Formed in 2012 at Dublin City University
- Consists of 120+ institutions of higher education and growing
  - North American Lead: Dr. Aaron Guest, Arizona State Univ
- Newest member: MTSU

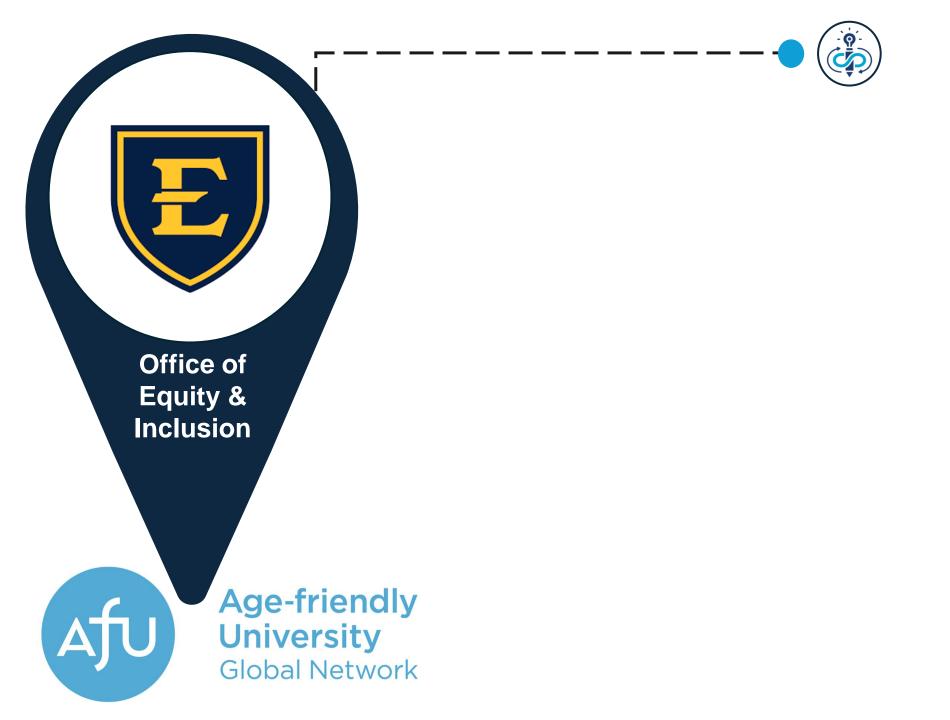




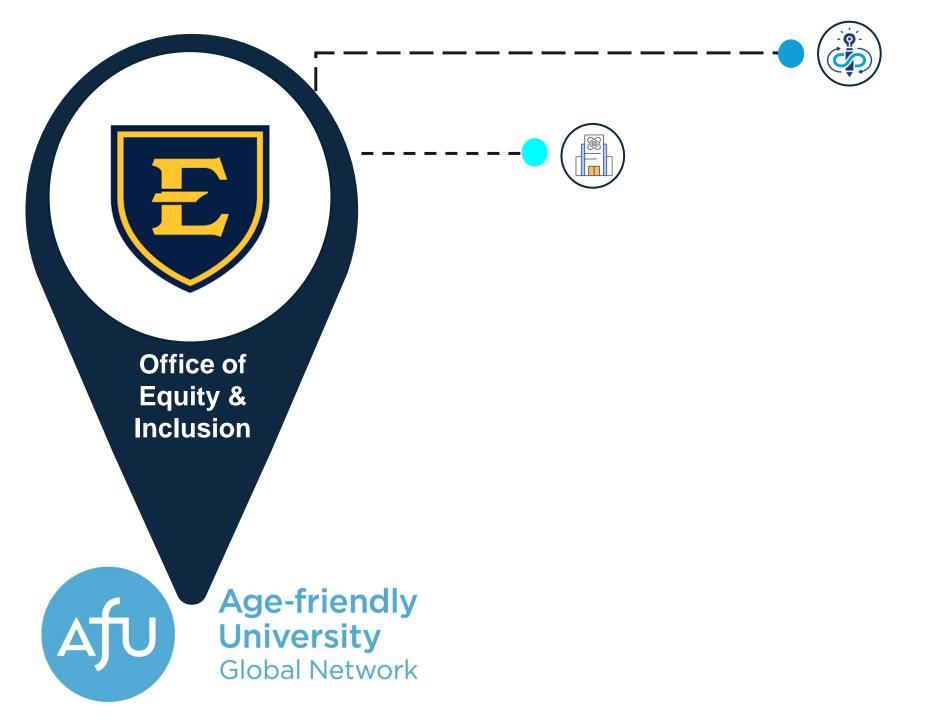




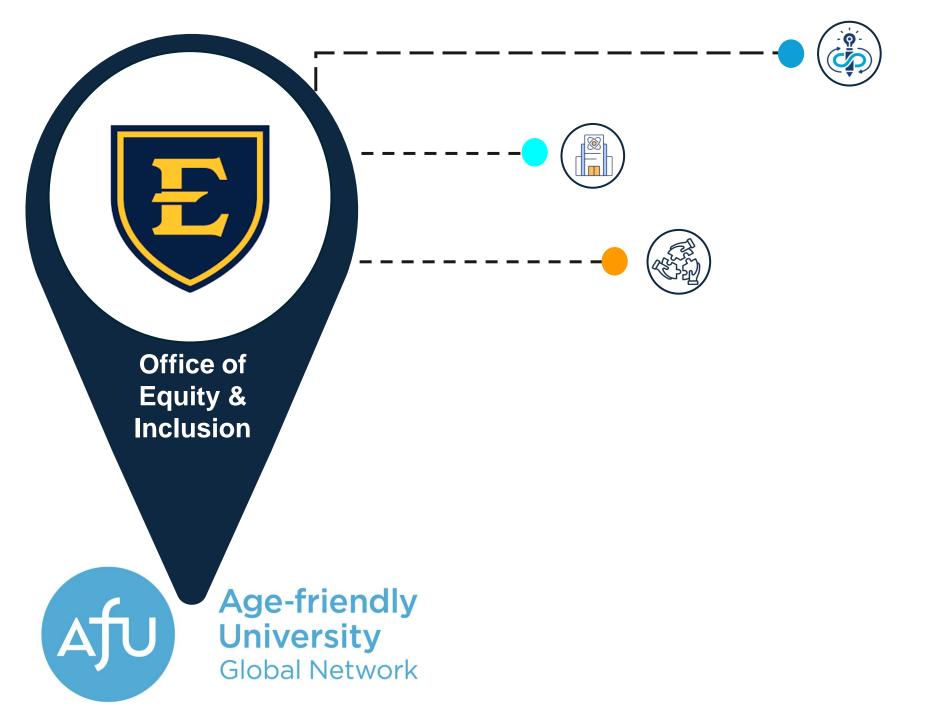


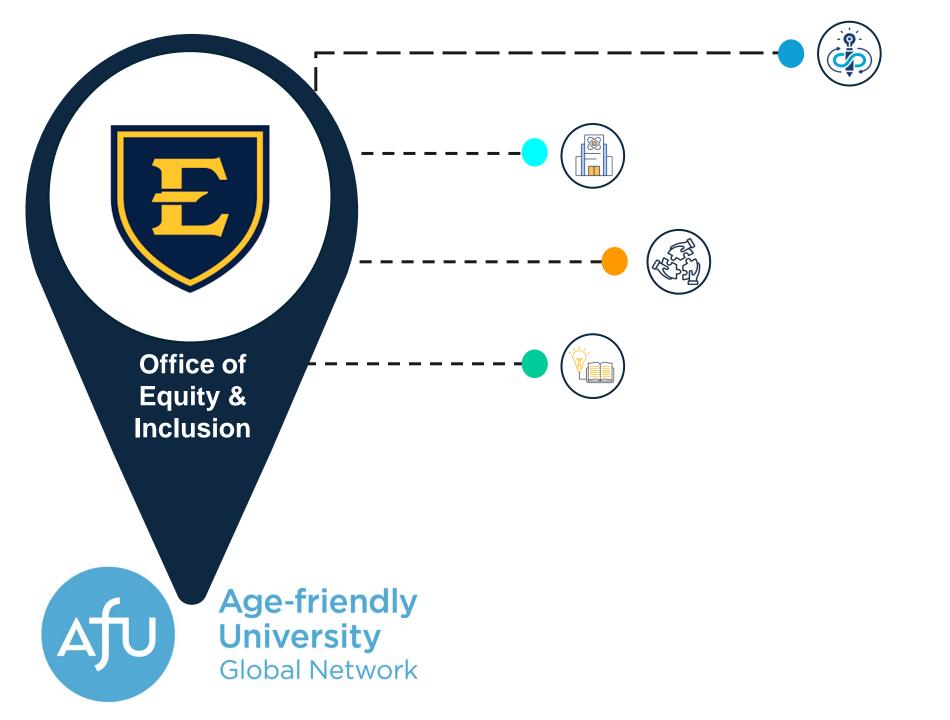




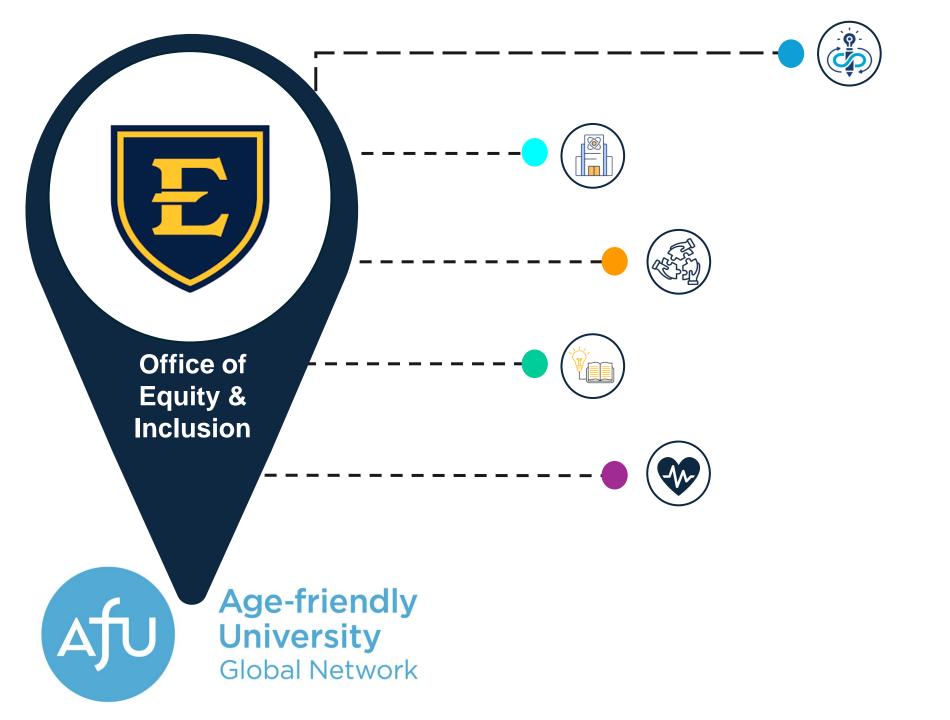




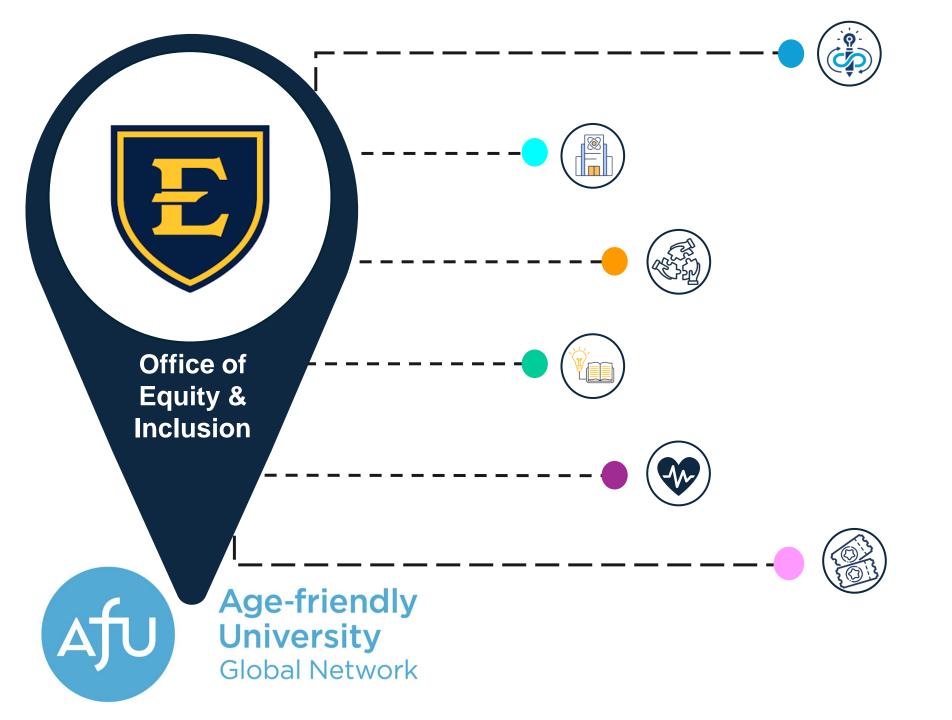


























































































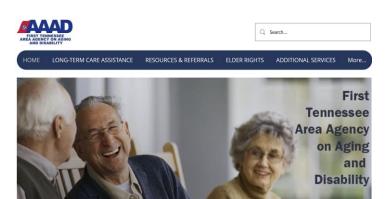










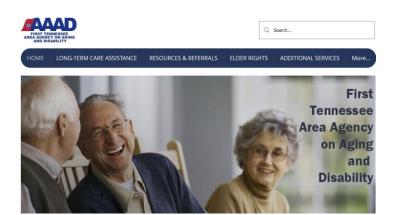














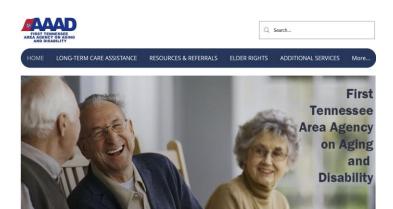












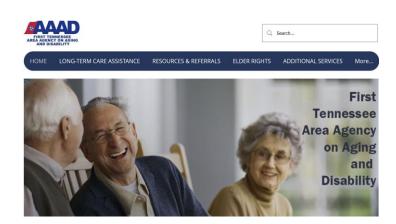
















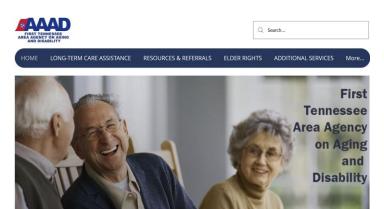






















### DEPARTMENT of PHYSICAL THERAPY

College of Clinical and Rehabilitative **Health Sciences** 

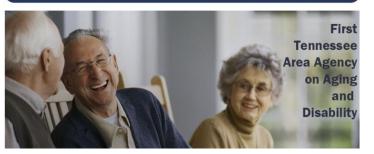
EAST TENNESSEE STATE UNIVERSITY







LONG-TERM CARE ASSISTANCE RESOURCES & REFERRALS ELDER RIGHTS













### DEPARTMENT of PHYSICAL THERAPY

College of Clinical and Rehabilitative **Health Sciences** 

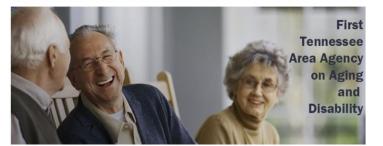
EAST TENNESSEE STATE UNIVERSITY







LONG-TERM CARE ASSISTANCE RESOURCES & REFERRALS ELDER RIGHTS











THE ART OF AGING

IN EAST TENNESSEE

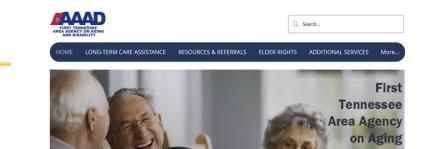
August 7th 8:00 -3:30



#### College of Clinical and Rehabilitative **Health Sciences**

#### EAST TENNESSEE STATE UNIVERSITY













Disability











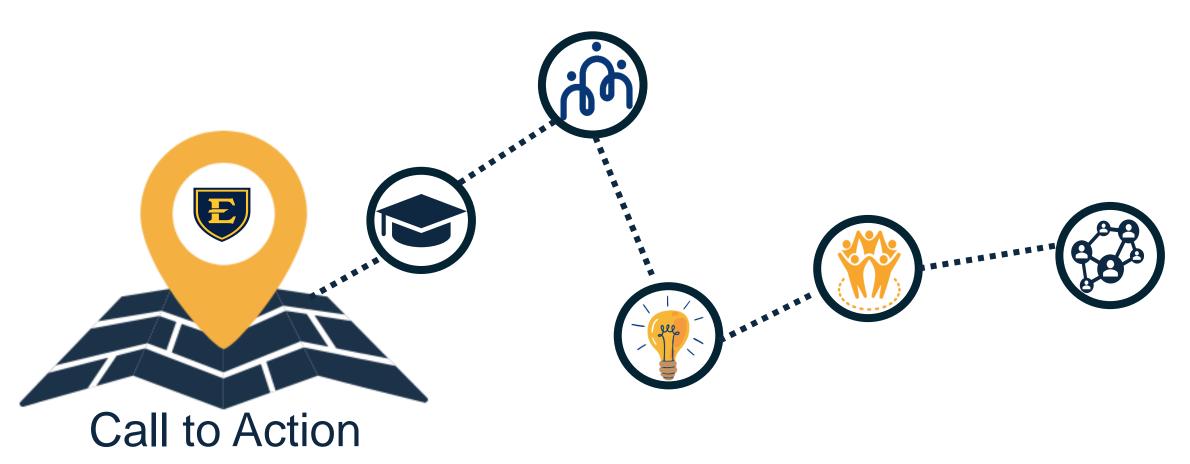




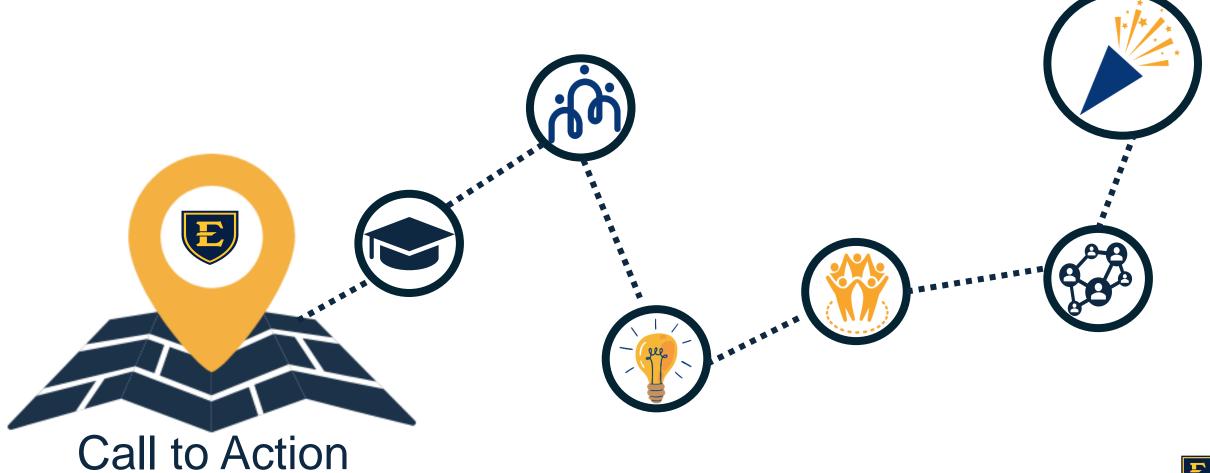
















### MOSAIC

CENTER FOR AGING & INTERGENERATIONAL CAREGIVING

### **LET'S CONNECT!**

### Jodi Southerland, DrPH

E: southerlanjl@etsu.edu

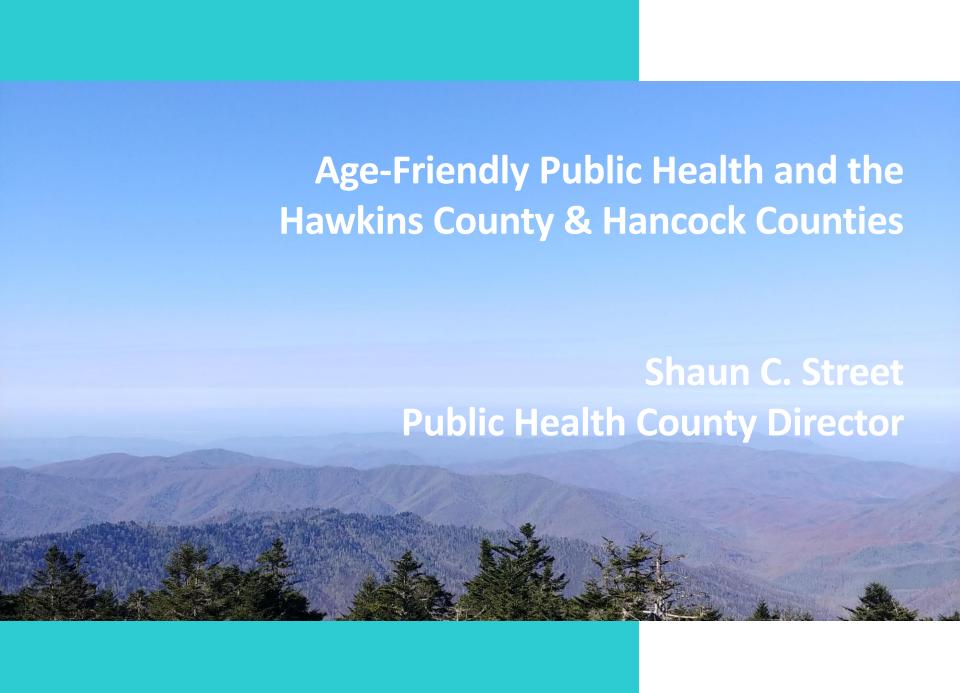
Assistant Professor
Dept Community & Behavioral Health
College of Public Health, ETSU





### Shaun Street

Email: Shaun.Street@tn.gov



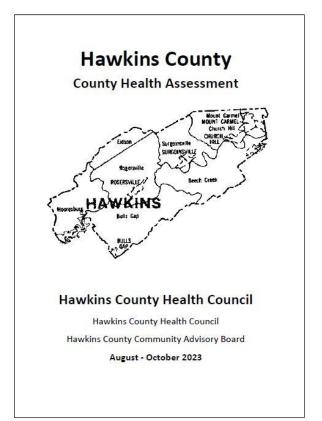
#### The Why

- Demographics of Aging Population in America
- Public Health and Healthy Aging
- Social Determinants of Health: Social Isolation and Caregiving Are Public Health Issues
- Perspectives on Social, Economic, and Health Inequalities in Later Life



The Addison Deviction of the American		
The Why By Numbers?	Hancock County	Hawkins County
Persons 65 years and over, percent	22.7%	17.7%
Population		
Population estimates, July 1, 2023	6,956	58,600
Population estimates base, April 1, 2020	6,661	56,724
Population, percent change April 1, 2020 (estimate base) to July 1, 2023	4.4%	3.3%
Population, Census, April 1, 2020	6,662	56,721
Population, Census, April 1, 2010	6,819	56,833

- The Hawkins County Health Council started its CHA on August 1<sup>st</sup>, 2023 and completed it on October 20<sup>th</sup>, 2023.
- The council collected 204 surveys from county residents and held two listening sessions.
- Over 50% of participants were aged 50 and up.
- Nearly 50% of participants had a household income of \$50,000 or less.
- 80% of participants stated that abuse and neglect among older adults was an issue in Hawkins County.
- Adult Mental Health, Cancer, Diabetes, Access to Health Insurance, and Heart Disease were all considered major issues to Hawkins County residents who participated in the survey.



#### Community Health Improvement Plan (CHIP)

- Needs of Older Adults Subcommittee
  - Objective: Create a transportation survey to collect data and determine need.
  - Objective: Conduct meetings with senior center directors to determine the transportation needs of older adults.
- General Health Subcommittee
  - Objective: Expand access to healthcare that is already in existence & covering multiple areas of need.
    - Focus is set on aging adults.
- Hawkins County Health Council is one of two Health Councils in the state that currently has a priority that focuses on the needs of the aging population.

#### Extreme Heat Tabletop Exercise

- Hawkins County Health Council partnered with the Tennessee Public Health Association and Surgoinsville First United Methodist Church to hold the Extreme Heat Tabletop Exercise on June 3, 2024.
- There were 37 local and regional partners who participated.
- The exercise focused on the needs of the aging population in the county.
- Sharing, educating, planning, and awareness.
- Future plans and accomplishing goals.



#### Extreme Heat Tabletop Exercise – Next Steps

- TPHA has submitted application for grant to create Train-the-Trainer Program on Climate Education for Resiliency Workshops in Hawkins County
- Hawkins County Health Council will reconvene in Spring 2025 to continue discussion and formalize local response building on success of June 2024 event
- Future plans and accomplishing goals.
  - Invite additional community partners to the table
  - Formalize Plans for county-wide action
  - Replicate Plan for Extreme Cold Weather Events



VIII. IECC IIIII.



#### READYs Program

- National public service campaign designed to educate and empower the American people to prepare for, respond to and mitigate emergencies and disasters.
- The goal of the campaign is to promote preparedness through public involvement.
- Hawkins County Health Department secured READYs Training for Public Health Week 2024
  - Church Hill Senior Center 21 participants
  - Rogersville Senior Center 13 participants
  - Mt. Carmel Senior Center 25 participants



READYs Program

Continue partnering with Senior Center in Hawkins and Hancock Counties in offering READYs Training

Naloxone Training

Continue partnering with Sullivan County Anti-Drug Coalition in conducting Naloxone and Harm Reduction Training in Hawkins and Hancock Counties

- Preventative Services and Education
  - Oral Health Education with older adults
  - Continue partnering to provide vaccine clinics specific for older adults
  - Collaborate with UT Extension to provide social media and online scam education to aging adult population.
  - Collaborate with UT Extension to provide fall prevention classes at local senior centers and older adult apartment complexes (2 completed).
  - Provide tobacco cessation information including QuitLine to senior centers and older adult apartment complexes.



SPENCER COUNTY,
STATE OF FRANKLIN
AND
HAWKINS COUNTY.
STATE OF NORTH CAROLINA

1786 - 1788
AND BECAME
HAWKINS COUNTY, TENNESSEE
IN
1796

### Thank you

**Questions?** 



### Thank you!