

### **Partner Spotlight Series**

### **Vermont Department of Health - BOLD Grantee**



**Edwin M. DeMott III** is the Vermont BOLD Alzheimer's Disease and Healthy Aging Program Manager. **Rhonda Williams** is the Vermont BOLD Alzheimer's Disease and Healthy Aging Program Director and serves on the BOLD Center of Excellence on Dementia Caregiving Stakeholder Engagement Advisory Group.

#### **Key focuses of the Vermont BOLD program:**

- Increase awareness and engagement among Vermonters age 45+ in dementia risk reduction through health promotion communications and My Healthy VT.
- Invite diverse and ongoing input to create an aspirational and functional ADRD and Healthy Aging Action Plan.
- Develop and promote multi-sectoral training opportunities to increase capacity among clinical teams to screen, diagnose, and care for those with dementia and their family care partners

## Please start by telling everyone a bit about the work that you're doing.

The Alzheimer's Disease and Healthy Aging Program sits in the Health Promotion and Disease Prevention Division at the Vermont Department of Health and is the functional unit of BOLD ADRD in Vermont. We have developed a collaborative network of internal and external partners, in particular with the Department of Disabilities, Aging and Independent Living. Focusing on the four public health domains to increase awareness, engagement, measurement and impact in Alzheimer's Disease and brain health, our team meets regularly with CDC-funded program leads overseeing cardiovascular health, diabetes prevention and control, oral health, physical activity/nutrition, tobacco treatment and You First, Vermont's breast and cervical cancer initiative. We cover communications, surveillance, and evaluation at these meetings. Together we have produced an Alzheimer's and Brian Health BRFSS Data Brief and integrated brain health and chronic disease campaign messaging on social media to increase traffic to and registration for My Healthy VT chronic disease self-management programs available statewide. We are working with our ACO, OneCare VT to circulate risk reduction messaging through the healthcare network and digitally promote tobacco cessation and brain health. Work is underway to revamp the program webpages to serve more as the core for information on ADRD resources and risk reduction per input received by stakeholders as part of our new state plan in ADRD and Brain Health to be published spring 2022. We continue to work on building relationships prioritizing organizations representing Vermont's Abenaki, African Americans, LGBTQ+, low-income, caregivers and persons with lived experience.

Our Hub and Spoke ADRD workgroup and our interagency Alzheimer's Disease and Healthy Aging workgroup were established prior to receipt of the BOLD funding, but these robust collaborations are spearheading our most substantive efforts to increase capacity for strategic planning and dementia diagnosis and management by primary care. We are focused on several



initiatives including gaining broad input into the new state plan, coordination, and integration with other state plans (including State Plan on Aging and new Action Plan on Aging Well), and supporting PCPs to address ADRD through three initiatives: Project ECHO, VT Health Learn, and Dementia Corner Consults. Project ECHO and VT HealthLearn are designed to increase primary care proficiency and capacity to diagnose and manage ADRD. The Corner Consults give providers a regular opportunity to engage remotely with one of the Medical Directors of the UVMHN Memory Program. These initiatives aim to increase early detection and initiate management of dementia at community practices, thus alleviating an onerous wait list at the state's Memory Program. We recently released an Evaluation Brief for our Hub and Spoke ADRD Initiatives. The Hub and Spoke for ADRD touts an everincreasing membership of multiple interprofessional partners including DAIL, VDH, UVMMC Memory Program, UVM Center on Aging, AHEC, VAHHS, Bi-State Primary Care, OneCareVT (ACO), VT Chapter of the Alzheimer's Association, VDH Chronic Disease Programs.

For more information, please visit: Brain Health Page and My Healthy VT.

#### What is the story behind why you're doing what you're doing?

Vermont is one of the most rapidly aging states in the United States (U.S.) with 20% of residents 65 years and over and is currently the second oldest state in the country (United States Census Bureau, 2019). Alzheimer's disease is Vermont's fifth leading cause of death (National Center for Health Statistics, 2019). Vermont's population of individuals 65 years and over is projected to increase to nearly a quarter of the state's residents (24%) by 2030 (Vermont Agency of Human Services Department of Disabilities Aging and Independent Living, 2018). Over 14,000 Vermont adults (11.3%) are estimated to have Alzheimer's disease. Moreover, Vermont has a higher than the national average of individuals with an Alzheimer's diagnosis living alone (35%) which makes early interventions including robust screening and diagnosis critical for population health and to enable residents to age in place.



Among adults with a disability, compared to those with no disability the rate of subjective cognitive decline is 6x higher (24% vs. 4%, respectively). Adults who identify as lesbian, gay, bisexual, transgender, or other sexual identity (LGBT) have a significantly higher rate of cognitive decline (20%), compared to non-LGBT adults (9%). While the proportion of Black, Indigenous, and people of color reporting cognitive decline is higher than that among white, non-Hispanic adults, the difference is not statistically significant. Cognitive decline is similar between males and females, as well as adults 45 to 64 years and those 65 and older. Of the adults who reported cognitive decline, less than half (46%) have themselves (or through someone else) discussed their confusion or memory loss with a health care professional.

In partnership with a number of organizations including the Governor's Commission on Alzheimer's and Related Dementias, the BOLD Program is seeking to reframe aging. In collaboration with the state's Unit on Aging (DAIL), we are shifting the perspective to view the increase in ADRD as less of a crisis and more as an opportunity. We are working on the state's first tenyear plan for aging well that will support the principles of the Older Vermonter's Act for aging in place, in health and with dignity.

#### Tell us about some parts of your projects that you're working on now that you are really excited about.

Reviewing the first draft of our Action Plan for Alzheimer's Disease, Related Dementias, and Healthy Aging with an ad hoc committee comprised of Governor's Commission on ADRD members for input prior to a public comment period. Planning events for June Alzheimer's Disease and Brain Awareness Month: Grand Rounds to be presented by the Co-Director of the UVMMC Memory Program addressing "Risk Reduction for Alzheimer's Disease." ." This will take place on June 23, 2022. Additionally, a panel discussion on Chronic Disease Management and Alzheimer's risk will feature our Commissioner of Health, our program, Executive Director of Age Well (AAA), and chronic disease program leads from the Health Promotion and Disease Prevention Division of the Health Department.



#### Other Initiatives in progress:

- Project ECHO on Dementia with an enrollment of over 100 hosted by the University of Vermont's Area Health Education Council with Co-Directors Mary Val Palumbo, APRN, and John Taylor, MD
- Twice monthly Corner Consult with the Co-Director of the UVMHN Memory Program providing one-on-one discussion slots for complex dementia issues
- A new Dementia Curriculum on the Vermont Health Learn offers asynchronous learning with continuing medical education credits.
- Training series for Offices of Local Health directors and chronic disease staff on warning symptoms and signs of dementia and the value of talking to one's doctor about memory concerns.

# For people who want to know more about your current work and programs, what are 1-2 pieces of information you think is important for them to know?

Brain Health is a public health imperative and one of our most overarching goals is to promote public awareness of the signs and symptoms of cognitive decline and the realization that dementia is not an inevitability but a disease the onset of which can be prevented or delayed with lifestyle modifications and clear communication with a primary care provider.

The caregiver needs to be recognized as an integral member of the care team. Caregivers have cumulative perspective and information that is unlikely to be observed in a standard office visit. Their role is the cornerstone of an effective management plan.



# What would you tell someone who wanted to start a similar program like yours in their own setting (i.e., another state, county, or city)?

COLLABORATE! Fortify existing traditional partnerships, but also seek new non-traditional partnerships with organizations that may look askance at your invitation to participate. Making connections for new partners can help broaden your reach as a program so that advances can be made. Working at every level of the social-ecological model with partners is the key to this work.

## Where else can people look to find out more about all the great work that you're doing?

Our Action Plan for Alzheimer's Disease, Related Dementias, and Healthy Aging will be finalized in June. This resource contains background, history, and data about ADRD in VT and uses NAPA goals, and HBI actions to guide our work.

Construction of our Alzheimer's Disease and Brain Health webpages is underway and, when launched, will provide information on prevention, treatment, awareness, data/impact, and links to data briefs, relevant plans, and other resources.

Our program also produces a monthly newsletter that covers a gamut of relevant topics pertaining to ADRD.

## What is one thing that you wish people knew more about early detection of dementia?

Dementia is not an inevitability. Nor should there be any stigma associated with a dementia diagnosis. Medicare beneficiaries should request an Annual Wellness Visit with a cognitive screening. Only 46% of Vermonters have talked with a healthcare provider about memory or cognitive concerns.



#### **About the Authors**

Edwin M. Demott III, Program Manager - After spending more than a decade in biotechnology producing biologics and piloting projects in collaboration with international biotech companies I pursued an advanced degree in Nutritional Science, moved to Vermont, and altered my professional course. My public health roles in Vermont have included Public Health Nutritionist/Supervisor working with individuals and families in federally funded nutrition programs and Chronic Disease Program Specialist working with communities, municipal governments, and planning commissions to cultivate an inclusive health focus through Health Impact Assessments and Healthy Community Design principles. Having been a caregiver for my father who had Alzheimer's Disease, I became passionate about exploring and sharing resources to help navigate this journey. My experiences as a caregiver combined with my expertise in chronic disease prevention and local health policy inspired me to seek a new role as Program Manager for Vermont's BOLD Alzheimer's Disease and Healthy Aging Program and I couldn't be happier or more fulfilled.

Rhonda Williams, Program Director - My professional experience is in environmental and public health, with a focus on interagency collaboration, academic partnership, and state and local initiatives to advance chronic disease prevention. I have been the director of Vermont's Tobacco and Asthma Control Programs since joining the health department in 2011 after serving as co-Pl of a 5-year community participatory study looking at ways to improve health outcomes in Chicago communities with high asthma prevalence rates and as Deputy Director of Policy and Programs with the Respiratory Health Association of Metropolitan Chicago. I'm excited to be applying my planning, strategic partnership, and performance management experience to Alzheimer's Disease and Related Dementias with a focus on risk reduction. Being a part of CDC's BOLD Healthy Brain Initiative is advancing our state's efforts in healthy aging. I serve on the BOLD Center of Excellence on Dementia Caregiving Stakeholder Engagement Advisory Group and am a non-federal member of the National Advisory Council on Alzheimer's Research, Care, and Services. Both my mother and grandmother were diagnosed with mixed dementia; together with Ed in we started an "All in to End Alzheimer's" team to raise funds for research.

