Local Health Department Dementia-Friendly Efforts Summary Report

During the key stakeholder discussions, many statewide community needs were identified, including enhanced community awareness of dementia-friendly programs and caregiver resources, volunteer services that provide breaks for caregivers, and robust local data collection. Breaking down barriers for the elderly, such as social isolation and lack of transportation, were also identified as areas of interest. Stakeholders also considered various actions that could be taken throughout the community to improve the lives of people with dementia.

Health departments statewide are approaching EMS, law enforcement, faith-based communities, and local community government officials to inform them of the importance of dementia-friendliness. One health department is partnering with the local fire and rescue community paramedic program to integrate the identification and ongoing support of people with dementia. Another health department is establishing a “one phone call” resource connection for people with dementia and their caregivers.

Public health’s role in dementia-friendly efforts can be defined to include prevention and health promotion, community education, and use of existing coalitions and partnerships.

ACTIONABLE STEPS TO ADVANCE DEMENTIA-FRIENDLY COMMUNITY EFFORTS

Most local health departments are actively working toward building a dementia-friendly community. Some have contacted local restaurants and businesses, while others have made plans to train internal staff. Specific plans that have been established include a community showing of “Still Alice,” dementia-friendly presentations at future meetings, and various community outreach and education efforts. Additionally, memory cafés are being organized in a number of Wisconsin communities. Select health departments are working on collecting local data, through either the CHIP process or a Community Health Needs Assessment. Most respondents noted ongoing communication with caregiver coalitions, county-based dementia care specialists, and other dementia care network team members, including local Alzheimer’s agency staff. One county is in the process of creating a county-specific dementia resource guide.

BOARD OF HEALTH DEMENTIA-FRIENDLY COMMUNITY EDUCATION PLANS

Most local health departments intend to educate their board of health through ongoing updates of activities and data. Many have invited members of their Board of Health to participate in various activities, including a dementia virtual tour. Some have provided printed copies of the dementia-friendly toolkit to their board.
DEMENTIA-FRIENDLY COMMUNITY STAKEHOLDERS

Local stakeholders include the following individuals and organizations:

- Senior centers
- Dementia care specialists
- Aging units
- Area Agencies on Aging (AAAs)
- Local health departments
- UW-Extension
- Aging and Disability Resource Centers (ADRCs)
- Dementia-friendly community initiatives
- Human services departments
- Local hospitals and clinics
- Paramedics
- Caregivers
- Dementia-related support groups
- Caregiver coalitions
- Registered nurses
- Local Alzheimer’s Association chapter
- Dementia Alliance of Wisconsin
- Boards of health

SUCCESSFUL EFFORTS

Common successes noted by Wisconsin local health departments include starting the conversation on dementia at the community level and cultivating public interest in taking action. Other successes cited include an increased number of local dementia-friendly businesses, a notable reduction in stigma associated with dementia, increased participation by people 50 and older in community activities and programs, and the development of sustainable dementia coalitions.

CHALLENGES AND BARRIERS

While a few local health departments were unable to identify specific barriers in the completion of their projects, most encountered at least one of the three most common barriers: insufficient funding, lack of local data, and inadequate staffing. Additionally, many were not expecting the lack of public knowledge regarding dementia and the underestimation of dementia prevalence throughout their communities. Given their high caseloads, some health departments found difficulty in setting project priorities and sticking to deadlines. Most noted that the addition of a local dementia care specialist would be beneficial in overcoming these challenges.

TECHNICAL ASSISTANCE AND RESOURCE REQUESTS

The need for local data and funding are consistent concerns among the majority of Wisconsin local health departments. Many suggested providing educational materials for community members and businesses as a beneficial resource option. In order to save time and effort, other ideas included producing detailed resource guides related to the initiatives mentioned in the toolkit, providing timely updates on initiatives and links to additional materials, and offering networking opportunities. Other potential resource options included sample dementia-related questions for the next Community Health Assessment and a prototypical assessment for new construction projects on how dementia-friendly buildings function. One health department identified additional needs, including screening tools for providers and pharmacies, information on developing capacity for adult day care, and information on support for children affected by a loved one with dementia.