Putting Evidence-Based Programs into Practice:

Health and Wellness Programs

Ohio Association of Area Agencies on Aging Annual Conference
November 1, 2018
Today’s Discussion Points

• History
  – Funding and Partnership
• Deployment Philosophies and Strategies
• Programs in Use in Ohio
• EB Strategies in Ohio’s State Plan on Aging, 2019-2022
Funding of EB program in Ohio

- Empowering Older People to Take Control of Their Chronic Diseases Through Evidence-Based Prevention Program – A Public/Private Collaborative.
  - AoA 2006-2011, ARRA 2010-2012
  - CDSMP, DSMP, Healthy IDEAS, Matter of Balance
  - $2,000,000
Funding of EB programs in Ohio

- Alzheimer's Disease Support Services Program (ADSSP)
  - AoA/ACL 2008-2018
  - EDDI/SHARE, RDAD, Creating Dementia Capable Communities in NW Ohio
  - $2,227,283
Funding of EB programs in Ohio

• Accelerating Integrated, Evidence-Based, and Sustainable Service Systems for Older Adults, Individuals with Disabilities and Family Caregivers (Part A)
  – AoA/ACL 2012-2016
  – Supported Evidence-based programming
  – $2,342,066
Funding of EB programs in Ohio

• Creating Dementia Capable, Sustainable Service Systems For Persons With Dementia And Their Family Caregivers (Part B)
  – AoA/ACL 2012-2017
  – Partners in Dementia Care, BRI Care Consultation, Music and Memory in the Community
  – $1,004,243
Funding of EB programs in Ohio

- OAA Title III D Disease Prevention and Health Promotion Services
  - Evidence-based programs are now required for Title III-D-funded activities. This change followed a decade of progress by the aging services network to move efforts toward implementing disease prevention and health promotion programs that are based on scientific evidence and demonstrated to improve the health of older adults.
  - Since October 1, 2016, Title III-D funds may only be spent on health promotion programs that meet the current, highest-level criteria definition.
  - $900,000/year
Partnerships

• Ohio Department of Health – Diabetes and Falls
• Health Services Advisory Group - Diabetes
• Reimbursement
  – OPERS
  – Medicare (Diabetes Education)
• Local Property Tax Levies
• Many others
Deployment Philosophies and Strategies

• Stage of Development
  – New program (BRI CCP)
  – Replication to the Community (RDAD, Music and Memory in the Community)
  – Tested/Off-the-Shelf (CDSMP, MOB)

• Format
  – One-on-One
  – Group/Workshop Setting
  – Imbed in existing activities (e.g. case management, in-take)
ONE-ON-ONE
Music and Memory in the Community
BRIA, RLTCOP 7, 10B & 11, LCAP, NCR, SCP – mmolea@age.ohio.gov

Program Goals

• Help people who suffer from a wide range of cognitive and physical challenges to find renewed meaning and connection in their lives through the gift of personalized music.

• https://musicandmemory.org/

Program Characteristics

• Home and Community Based setting program delivery.

• Care professionals were trained to set up personalized music playlists, delivered on iPods and other digital devices, for those in their care.
Reducing Disability in Alzheimer's Disease
Linda Teri, BRIA, Alzheimer's Assoc. Chapters – mmolea@age.ohio.gov

Program Goals

• To help reduce functional dependence
• To reduce frailty and thus delay institutionalization of the person with dementia

Program Characteristics

• Home-based Intervention
• 12 1-hour sessions over 3 months, then monthly follow-up for 3 months
• Exercise training - Aerobic/ endurance activities, Strength training, Balance and Flexibility training
• Problem-solving/behavior management techniques - Maximize cognitive function, learn how to address problem-solve difficulties, pleasant events and enhance caregiver resources and skills
BRI Care Consultation™

Alzheimer's Chapters, AAAs, VA – bprimetica@benrose.org

Program Goals

• Care Coordination
  – links to and monitors the use of health care and community services
  – organizes family and friend assistance,
  – provides information and emotional support.

• Assessment and Reassessment

• Action Planning

• http://www.benrose.org/Services/BRI-Care-Consultation-Services.cfm

Program Characteristics

• Care-coaching program for older and younger adults with chronic health conditions/disabilities and family or friend caregivers

• Delivered via telephone mail, and email by trained Care Consultants

• Core Components
  – Assessment
  – Action Planning
  – Ongoing maintenance and support
Care Transitions Intervention (CTI)
Available in AAAs 1, 7 & 10B, Health Systems

**Program Goals**
- Promote self-identified personal goals around symptom management and functional recovery in the care transition from hospital to home
- Reduce hospital readmissions
- [www.caretransitions.org](http://www.caretransitions.org)

**Program Characteristics**
- Delivered by Transitions Coach that is trained by the Care Transitions Program
- 4-week program that assists individuals with complex care needs to learn self-management skills to ensure needs are met during the transition from hospital to home
- Four conceptual domains:
  - Medication self-management
  - Use of a dynamic patient-centered record
  - Primary care and specialist follow-up
  - Knowledge of red flags
Healthy IDEAS

Multiple AAAs, Providers – mmolea@age.ohio.gov

Program Goals

• Identifying Depression, Empowering Activities for Seniors
• Reduce the severity of depressive symptoms in frail, high risk and diverse older clients of community agencies
• www.careforelders.org/healthyideas

Program Characteristics

• Delivered by trained case manager or other social service provider.
• Four components include:
  – Screening and assessment of depressive symptoms
  – Education about depression and self-care for clients and family caregivers
  – Referral and linkage to health and mental health professionals
  – Behavioral activation
• Minimum of 3 in-person visits in the client’s home and 5 or more telephone contacts
SBIRT

Multiple Providers – Ellen.Augspurger@mha.ohio.gov

Program Goal

• Screening, Brief Intervention and Referral to Treatment (SBIRT)
• Identify, reduce, and prevent problematic use, abuse, and dependence on alcohol and illicit drugs.
• https://mha.ohio.gov/Treatment/SBIRT
• https://www.integration.samhsa.gov/resource/sbirt-resource-page

Program Characteristics

• SBIRT Consists of Three Components:
  — Screening — a healthcare professional assesses a patient for risky substance use behaviors using standardized screening tools.
  — Brief Intervention — a healthcare professional engages a patient showing risky substance use behaviors in a short conversation, providing feedback and advice.
  — Referral to Treatment — a healthcare professional provides a referral to brief therapy or additional treatment to patients who screen in need of additional services

• Reimbursable through Medicare and Medicaid
SHARE for Dementia

Multiple Providers  Silvia Orsulic-Jeras – sjeras@benrose.org

Program Goals

• SHARE - Support, Health, Activities, Resources, and Education
• Help care partners to communicate effectively, participate in fulfilling activities, and plan for the future
• Promote health and well-being, decrease stress, and learn about resources that reflect care partners’ values and preferences
• Provide education about dementia, how to manage the changes that lie ahead, and creating a balanced plan of care that both care partners can accept
• http://www.benrose.org/SHARE/INDEX.cfm

Program Characteristics

• Planning counseling intervention for persons living with early-stage dementia and their family caregivers.
• Delivered by SHARE counselors include social workers, counselors, geriatric case managers, and nurses.
• Participants work with a SHARE Counselor to identify sources of support, (i.e., family, friends, and service providers), in order to build a balanced and realistic plan of care for the future.
The Otago Exercise Program

120 health care professionals trained to deliver the Otago in Ohio

Program Goal

• Increase strength, balance, and endurance.
• Lifestyle change to incorporate strength and balance training a minimum of 2 hours per week.
• Reduction in falls
• http://www.med.unc.edu/aging/cgec/exrise-program

Program Characteristics

• Focuses on 17 exercises
• 4-5 visits with a physical therapist (PT) over 8 weeks with monthly phone calls for a year and optional follow up visits at 6, 9, and 12 months.
• The initial evaluation and prescription are done by a licensed PT. The follow up visits can be done by a licensed PT assistant. The follow up phone calls can be done by the PT, a health coach, or other individual who is able to communicate progress to the PT.
• The older adult does the exercises for approximately 30 minutes three times a week.
• The exercises can be done independently or supervised in a one on one or group setting.
Geri-Fit® Strength Training Workout

Multiple providers in Ohio

Program Goals

• Increases strength, flexibility, range of motion, mobility, gait and balance.

• www.gerifit.com

Program Characteristics

• Geri-Fit is a group setting class led by an individual currently certified as a Group Fitness instructor or Personal Fitness trainer, OR have a degreed health professional (e.g. in kinesiology, physical therapy, occupational therapy, athletic training, nursing)

• An ongoing, 45-minute, twice-weekly progressive resistance strength training exercise program.

• Participants start out using a set of 2-pound dumbbells and then, as their strength increases, they can use heavier weights in order to build more strength and balance.

• Exercises are performed seated in chairs (optional standing)
Adult Vision Screening

Multiple Providers – lauras@pbohio.org

Program Goals

• Early detection of possible vision problems
• Educate people about how to keep their sight safe and healthy for a lifetime
• Reduce the number of workplace injuries
• Control vision loss due to diseases such as glaucoma, diabetic eye disease, and age-related macular degeneration.
• [https://ohio.preventblindness.org/adult-vision-health-programs](https://ohio.preventblindness.org/adult-vision-health-programs)

Program Characteristics

• After completing the Adult Vision Screening Training Program, you will be able to:
  — Perform near and distance visual acuity screenings
  — Educate people about “aging eye” diseases and disorders
  — Describe Adult Vision Screening Guidelines Published by Prevent Blindness
• Upon successful completion of the training, individuals will be nationally certified to provide adult vision screenings for three years and are eligible to receive FREE vision screening equipment
CAPABLE
Available in AAA 1

Program Goals
Community Aging in Place—Advancing Better Living for Elders (CAPABLE)
  • Reduce fall risk
  • Reduce fear of falling
  • https://nursing.jhu.edu/faculty_research/research/projects/capable/index.html

Program Characteristics
  • Individually-tailored, delivered at home by OT, nurse and handyman
    – Occupational Therapy visits
    – 4 Nurse visits
    – Budget for home repairs, modifications, and installation of assistive devices
    – Occurs over a 4-5 month period
GROUP/WORKSHOP SETTING
Matter of Balance (MOB)

Available in all 12 PSAs – tgulley@age.ohio.gov

Program Goals

• Reduce fall risk and fear of falling
• Improve falls self-management
• Improve falls self-efficacy and promote physical activity
• www.mainehealth.org/mob

Program Characteristics

• 8 weekly or twice weekly sessions
• 2 hour per session
• 8-12 group participants
• 2 coaches (volunteer lay leaders) trained by Master Trainers
Powerful Tools for Caregivers

Available in AAAs 2,3,5,7,8, 10A &11 – ejackson@age.ohio.gov

Program Goals

• A self-care education program for family caregivers to improve:
  – self-care behaviors
  – management of emotions
  – self-efficacy
  – use of community resources


Program Characteristics

• Community-based group program
• Six consecutive weeks
  ▪ 90 minutes or 2-1/2 hours per week
• ▪ 10-15 participants
• Caregiver classes co-led by certified, trained class leaders
Chronic Disease Self-Management Program (CDSMP)
Available in All 12 AAAs – bmabins@age.ohio.gov

Program Goals
• Enable participants to build self-confidence to take part in maintaining their health and managing their chronic health conditions.
  http://patienteducation.stanford.edu/programs/cdsmp.html

Program Characteristics
• Workshops are facilitated from a highly detailed manual by two trained Leaders, one or both of whom are peer leaders with a chronic disease
• 6 weeks
• 2.5 hours per week
• 12-16 people
Diabetes Self-Management Program (DSMP)
Available in all 12 AAAs – bmabins@age.ohio.gov

Program Goals
• Teaches the skills needed in the self-management of diabetes and to maintain and/or increase life’s activities
• http://patienteducation.stanford.edu/programs/diabeteseng.html

Program Characteristics
• Workshops are facilitated from a highly detailed manual by two trained Leaders, one or both of whom are peer leaders with diabetes
• 6 weeks
• 2.5 hours per week
• 12-16 people with type-2 diabetes
Chronic Pain Self- Management Program (CPSMP)
Available in AAAs 2,3,6,7,8,9,10 &11 – bmabins@age.ohio.gov

Program Goal
• Provides information and teaches practical skills for managing the challenges of living with chronic pain.
• http://patienteducation.stanford.edu/programs/cpsmp.html

Program Characteristics
• Highly interactive and participative workshops are facilitated by two trained leaders, one or both of whom are non-health professionals with chronic pain
• 6 weeks
• 2.5 hours per week
• 12-16 people
Better Choices, Better Health

Online Chronic Disease Self-Management Program

Program Goal

• Enable participants to build self-confidence to take part in maintaining their health and managing their chronic health conditions

• [https://www.ncoa.org/healthy-aging/chronic-disease/better-choices-better-health/](https://www.ncoa.org/healthy-aging/chronic-disease/better-choices-better-health/)

Program Characteristics

• Two trained peer facilitators per workshop

• 2 hours per week for 6 weeks

• Participants log on at their convenience 2-3 times per week for a total of about 2 hours per week. Participants do not need to log on at the same time.

• Program is offered on a dedicated website utilizing discussion boards and weekly lessons.

• Approximately 25 people per workshop.
Diabetes Prevention Program

Multiple Providers in Ohio, YMCAs, Health Systems

Program Goal

- Lifestyle changes to help prevent or delay type 2 diabetes
- CDC-recognized

Program Characteristics

- In-person, online, distance learning, or combination delivery options
- A trained lifestyle coach leads the program to help individuals change certain aspects of their lifestyle, like eating healthier, reducing stress, and getting more physical activity.
- The program also includes group support from others who share your goals and struggles.
- A year-long program focused on long-term changes and lasting results.
Diabetes Empowerment Education Program™
Available at AAAs, Health Departments, Health Systems, HSAG

Program Goals
• Improving and maintaining the quality of life of persons with pre-diabetes and existing diabetes
• Preventing complications and incapacities
• Improving eating habits and maintaining adequate nutrition
• Increasing physical activity
• Developing self-care skills
• Improving the relationship between patients and health care providers
• Utilizing available resources
• [https://mwlatino.uic.edu/program-description-2/](https://mwlatino.uic.edu/program-description-2/)

Program Characteristics
• Eight learning modules, taught over six weeks
• Twelve to fifteen people per class
• Participatory teaching and learning
• Classes approximately one to two hours in length, depending on class size
• Can be taught by peer educators or community health workers (CHWs) who are usually lay people within the community
• Graduation after completion of at least 80 percent of the modules and completion of a pre and a post test
• Supported by Health Services Advisory Group (HSAG) in Ohio - bhollopeter@hsag.com
Tai Chi for Arthritis

Master Trainers’ Workshop in Ohio w/I next six months

Program Goals

• Improve movement, balance, strength, flexibility, and relaxation
• Decrease pain and falls
• [link](https://taichiforhealthinstitute.org/)

Program Characteristics

• Attend a minimum of 16 hours of Tai Chi per week. (One hour per week for 16 weeks or 2 hours per week for 8 weeks.)
• Must be led by a certified Tai Chi for Health Institute instructor.
• Strongly encourage participants to practice the Tai Chi program at home for half an hour daily, at least four days per week.
• Participants must attend at least one in-person class per week.
## Tai Chi Quan: Moving for Better Balance

### Program Goals
- Improve balance, strength, and performance in functional walking activities
- Prevent falls
- [https://tjqmbb.org/](https://tjqmbb.org/)

### Program Characteristics
- Attend TJQMBB a minimum of 48 hours, preferably through one 24 week class, twice a week.
- The duration of each session is 60 minutes.
- TJQMBB uses an 8 form Tai Ji Quan core
- Recommended class size is 8-10 participants for new instructors and
- 10-15 for experienced instructors.
Walk with Ease

Fairhill Partners

Program Goal

• Reduce pain and discomfort of arthritis, increase balance and strength, build confidence in the ability to be physically active and improve overall health among older adults.

• [http://www.arthritis.org/wwe](http://www.arthritis.org/wwe)

Program Characteristics

• Community-based group program:
  — 6 weeks
  — 1 hour, 3 times a week
  — 12-15 recommended participant group size

• Self-directed program that combines self-paced walks with health-topic related discussion also available:
  — 6 weeks
  — 30 min, 3 times a week
Stepping On
Available in AAA 1

Program Goal
• Offer strategies and exercises to reduce falls and increase self-confidence in making decisions and behavioral change in situations where older adults are at risk of falling
  • http://www.ncoa.org/improvehealth/center-for-healthy-aging/stepping-on.html
  • http://wihealthyaging.org/stepping-on

Program Characteristics
• Workshops are facilitated by trained Leaders
• 7 weeks, 2 hrs per week
• A home visit or follow-up phone call by the program leader to facilitate follow-through with preventive strategies and to assist with home adaptations
• 2-hour booster session after 3 months
Opening Minds through Art (OMA)
89 Sites in Ohio/211 Worldwide – lokonej@MiamiOH.edu

Program Goals
• Building genuine friendships between people with dementia and volunteers as they engage in art-making.

Program Characteristics
• People with dementia (artists) are paired with volunteers (students, families, caregivers) who are trained to rely on imagination instead of memory and focus on remaining strengths instead of lost skills. OMA enables people with dementia to assume new roles as artists and teachers and leave a legacy of beautiful artwork.
State Plan on Aging 2019-2022

• Opportunity to:
  – Strengthen existing evidence-based programs
  – Explore and develop new evidence-based programming. (i.e., Research, Funding)
State Plan Strategies

• 1.1 **Promote and offer** interventions that assist older adults in prevention of chronic disease. *(Chronic Disease)*

• 1.2 **Rebrand** the department’s health and wellness initiatives and programs to promote a holistic approach to improving health of older adults, particularly those most at-risk and vulnerable. Include research on the **return on investment** of prevention. *(Chronic Disease)*
State Plan Strategies

• 1.3 Enhance education, awareness and promotion of health and wellness programs and **expand the capacity of sites and trainers** to deliver these programs. (Chronic Disease)

• 1.4 Research, identify and leverage **additional funding streams** for sustainability of chronic disease prevention and management programs. (Chronic Disease)
State Plan Strategies

• 1.5 Assess and determine viability of emerging technologies that may positively impact the improved health and management of chronic issues among Ohio's older adult population. (Chronic Disease)

• 5.1 Increase access to dental, vision and hearing health screenings and services for older adults. (Dental, Vision and Hearing)
State Plan Strategies

- 6.1 Develop and house an online resource library accessible to professionals and the public. (Dementia)

- 7.1 Implement a research study that considers what education and best practices will keep direct care workers fulfilled and more equipped to work with people living with dementia, and if enhanced training retains workers. (Dementia)
State Plan Strategies

• 8.2 Monitor **emerging technologies** and pilot programs of viable interventions that would mitigate safety risks faced by people with dementia. (Dementia)

• 10.2 Expand the availability of **Tai Chi and other evidenced-based fall prevention classes** statewide. (Falls)
11.1 Evaluate current needs and gaps relative to older adults’ management of pain, identify evidenced-based pain management interventions (including technology-based solutions) and advocate for adoption in appropriate settings. (Pain Management)

11.3 Expand availability, capacity and use of the Chronic Pain Self-Management Program and list as an education option under Take Charge Ohio. (Pain Management)
State Plan Strategies

• 11.4 Educate and encourage physicians and allied health professionals to refer patients and clients to pain management resources through development of a toolkit and collateral materials. (Pain Management)

• 12.2 Explore mental health evaluation tools used with older adults to identify preferred standards and options for use among medical professionals. (Mental Health)
State Plan Strategies

• 12.5 Adopt training curriculum specific to the aging network’s ability to screen and address unique care delivery of older adults with mental health issues. (Mental Health)

• 14.4 Support the adoption and implementation of technology-based interventions to curb and stop the abuse of opioids in Ohio through solutions of the Ohio Opioid Technology Challenge. (Substance Abuse and Addiction)
State Plan Strategies

• 1.1 Research and assess the effectiveness of current interventions and explore best practices to develop a full-service caregiving solution. (Caregiving)

• 1.2 Pilot promising interventions that benefit caregivers (e.g., technology-based solutions or other emerging innovations, evidence-based and evidence-informed training programs for caregivers). (Caregiving)
Contact Information

Marcus J. Molea, Chief
Strategic Partnerships
Elder Connections Division
Ohio Department of Aging

mmolea@age.ohio.gov
614-752-9167

http://aging.ohio.gov