



To: Representative Klevorn, Chair, Legislative Task Force on Aging
Members of the Legislative Task Force on Aging

Subject: Minnesota Department of Health - Considerations for the Legislative Task Force on Aging

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In July of 2024, we had the opportunity to meet with you and discuss the contributions the field of public health can make to support healthy aging in our state.

At this time, we would like to share our thoughts with the broader committee to be part of the public record.

Healthy aging requires a public health approach.

Older adults bring tremendous wisdom and value to our communities, especially through participation in the workforce, volunteerism, civic engagement, and childcare. While aging is inevitable, dementia, uncontrolled hypertension, diabetes, arthritis, oral health conditions, falls, social isolation and depression do not have to be. Investments in upstream public health approaches to healthy aging are investments in MN's economic vitality and wellbeing, allowing older adults the opportunity to age in place with independence, happiness, and social connection.

Coordination between state agencies on aging is critical.

State agencies such as MDH, DHS, and MBA- currently work together to support many strategies and policies to ensure Minnesotans can age in place. However, as has been shared with the Taskforce, the alignment and coordination of this work can be improved. With support, state agencies will have the ability to collaborate with each other, community partners, and health systems on life course approaches to healthy aging across all levels (public policy, community, organizational, family, and individual) and along the continuum from health promotion and disease prevention to long term services and supports.

Ways MDH and other state agencies can contribute:

- **Name MDH as a member of any entity or entities charged with addressing aging** in the years to come.
- **Allocate budget for staffing to convene state agencies and community partners** to focus on Legislative Task Force recommendations.
- **Provide resources to foster cross agency work.** Allocate funds for demonstration grants that would require multiple state agencies to collaborate together with local entities to test how programs and resources can be braided to address upstream prevention approaches.

- **Prioritize a lifespan approach to healthy aging** that includes population level or public health approaches – see recommendation below of different public health frameworks to consider. –
- **Ensure diverse voices are at the table.** Require meaningful involvement of community elders, older adults, and family caregivers. Prioritize input from those of us living with Alzheimer’s and related dementias, living in rural areas, and most impacted by the social drivers of health including older people of color and American Indian elders. Empower an official community advisory group to provide guidance and inform work.
- **Assess impact.** Require evaluation of strategies to assess impact and identify ways to strengthen approaches. Support state agencies to develop data surveillance systems to report statewide, regional, and local indicators determined to be most relevant to understand progress towards meeting the needs of aging Minnesotans.

Public Health has strengths to integrate into future solutions.

MDH has existing capacity to guide effective approaches to ensure all MN age well. This capacity includes:

- **Statewide public health infrastructure to create statewide coordinated approaches for healthy aging.** MDH has 8 regional offices, 51 Community Health Boards, 74 public health departments, and strong working relationships with 11 sovereign tribes.
- **Community Vibrancy and Health Promotion:** MDH has the capacity and experience to implement and evaluate prevention programs that are community led.
- **Policy and Planning:** MDH has capacity and systems to conduct statewide and place-based assessment and strategic planning to identify community-driven and culturally specific policy, systems, and environmental solutions for aging well.
- **Prioritize older adults in essential public health programs and functions:** MDH has the capacity to ensure that older adults are prioritized in state and local planning for emergency preparedness, climate health, health regulation, healthcare workforce, injury and violence prevention, substance use, health promotion, and chronic and infectious disease programs.
- **Data, Metrics, and Accountability:** MDH has capacity to analyze and disseminate data to guide effective interventions to meet the needs of those of us aging in Minnesota.
- **Educate and Train the Workforce:** MDH can provide evidence-based education and training for healthcare providers and caregivers to improve the quality of care for older adults.
- **Clinical-Community Linkages:** MDH can help build linkages between health systems and community-based services and supports to better meet our health and social needs as we age.
- **Health Care Access and Quality:** MDH can support integration of evidence-based frameworks and strategies for age-friendly health care approaches within MN health systems.

See Appendix 1 for more specific information about MDH capacities and strengths.

National frameworks with a public health approach offer strategies that are important to consider and integrate into recommended solutions.

Several organizations have established frameworks to address aging in the US. These frameworks elevate healthy aging as a core public health issue and promote policies and initiatives that address the social determinants of health and ensure we can all remain active and engaged in our communities as we age.

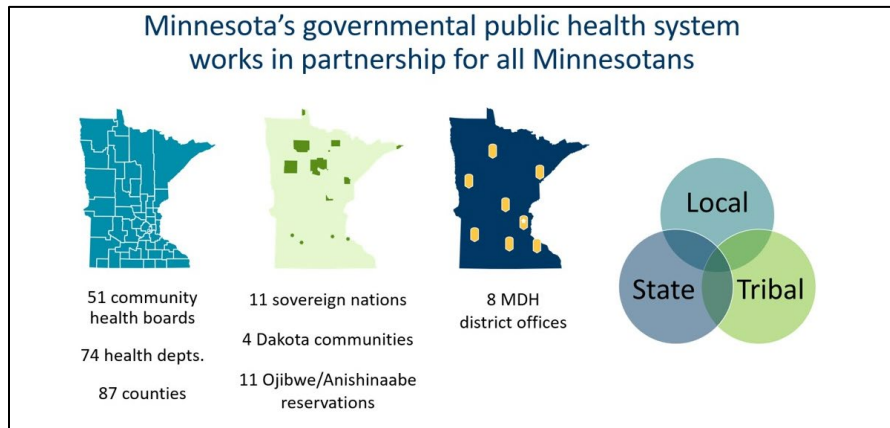
See Appendix 2 for more specific information about national frameworks.

APPENDIX 1

Leveraging Public Health Role

MDH has the infrastructure in place to contribute to statewide implementation of aging strategies to ensure a comprehensive and coordinated approach.

Minnesota's public health system includes entities at the local, state, and tribal levels.



The department has the expertise and capacity to advance:

- **Community Vibrancy and Health Promotion:** Educate and empower Minnesotans who are aging to prevent and manage risk factors and chronic conditions that impact healthy aging, including social isolation, falls and other injuries, hearing and vision loss, memory loss/Alzheimer's Disease and Related Dementias, cancer, diabetes, heart disease, stroke, long Covid, and oral health issues.

MDH related sections: Center for Health Promotion, Injury and Violence Prevention Section, Cancer Control and Prevention, Chronic Disease and Environmental Epidemiology, Office of Statewide Health Improvement Initiatives

- **Policy and Planning:** Connect and convene multi-sector stakeholders (state agencies, local public health system, Tribal Nations, community-based organizations, health care organizations, Minnesotans who are aging) in statewide and place-based assessment and strategic planning to identify community-driven and culturally specific policy, systems, and environmental solutions that address the underlying causes and conditions that impact healthy aging.

MDH related sections: Center for Health Promotion Aging and Healthy Communities Unit, Center for Public Health Practice, Health Equity Strategy and Innovation Division, Office of American Indian Health, Office of African American Health, Office of Rural Health and Primary Care, Health Care Homes

- **Prioritize older adults in essential public health services and functions:** Ensure that older adults are prioritized in state and local emergency preparedness planning, environmental health

including climate and health initiatives, infectious disease, chronic disease, and injury prevention.

MDH related sections: Center for Health Promotion, Injury and Violence Prevention Section, Cancer Control and Prevention, Chronic Disease and Environmental Epidemiology, Infection Disease Epidemiology, Prevention, and Control Division, Environmental Health Division, Emergency Preparedness and Response Division

- **Data, Metrics, and Accountability:** Collect, analyze, and disseminate data to understand the health needs of Minnesota’s aging population and guide effective interventions.

MDH related sections: Center for Health Promotion, Center for Public Health Practice, Office of Statewide Health Improvement Initiatives

- **Educate and Train the Workforce:** Provide evidence-based education and training for healthcare providers and caregivers to improve the quality of care for older adults.

MDH related sections: Office of Rural Health and Primary Care, Health Care Homes, Center for Health Promotion, Community Health Worker Training Program

- **Clinical-Community Linkages:** Support systems for screening, referral, and follow up between clinical and community organizations for social determinants of health, injury and disease risk factors, and health conditions.

MDH related sections: Office of Rural Health and Primary Care, Health Care Homes, Center for Health Promotion, Community Health Worker Training Program, Office of Statewide Health Improvement Initiatives

- **Health Care Access and Quality:** Support and integrate evidence-based frameworks and strategies for age-friendly health care approaches such as Minnesota’s Health Care Homes model, the 4M Model For Age Friendly Care, telehealth solutions, and increased utilization of the Medicare Annual Wellness Visit.

MDH related sections: Office of Rural Health and Primary Care, Health Care Homes, Center for Health Promotion, Community Health Worker Training Program, Office of Statewide Health Improvement Initiatives, Health Regulation

APPENDIX 2

Public Health Aging Frameworks –Upstream Approaches to Aging

The following frameworks and strategies highlight the importance of public health’s role in coordinating a comprehensive approach to support us as we age, ensuring we can all lead healthy, fulfilling lives.

We recommend that taskforce review and consider including these frameworks as part of its final report.

Report Title	Summary/Why an important resource to consider	Link
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National Public Health Frameworks and Policy Recommendations		
Trust for America's Health, Age-Friendly Public Health Systems	To encourage the adoption of healthy aging as a core public health function, TFAH has created the AFPHS Recognition Program that recognizes healthy aging programs and priorities within health departments, public health organizations, and by individuals.	Age-Friendly Public Health Systems - TFAH AFPHS-Two-Pager-002.pdf
ASTHO Supporting Healthy Aging and Older Adult Health: The Role of State and Territorial Health Agencies	"State and Territorial Health Agencies are well positioned to champion and support population-level actions that provide all people with the opportunity to age healthily and achieve equitable health and social outcomes through older adulthood. The 5 approaches in this ASTHO technical package highlight actionable and evidence-informed strategies that health agencies can implement in collaboration with partners to promote healthy aging and older adult health in their jurisdictions."	supporting healthy aging and older adult health .21.pdf 1) Expand Paid Family and Sick Leave 2) Support Healthy Community Design 3) Promote Fall Prevention and Mobility 4) Increase Telehealth Access 5) Strengthen the Long-term Care, Health Care, and Public Health Workforce
ASTHO Healthy Aging and Older Adult Health Policy Statement	Summary of Recommendations <ul style="list-style-type: none"> • Adopt a Health in All Policies approach to improve health outcomes and reduce health disparities over the life course. • Support community-based service delivery and health promotion activities to help older adults age in place safely and healthily. • Improve older adults' access to healthcare services and quality of care. • Strengthen supports for family caregivers. • Collect comprehensive data on aging topics 	Healthy Aging and Older Adult Health Policy Statement (astho.org)
Healthy People 2030	Healthy People 2030 addresses the health and well-being of older adults through several upstream objectives and initiatives with identified metrics in place for outcomes. Focus areas include reducing health problems, preventing falls, enhancing preventative care, improving quality of life, and supporting caregivers.	Older Adults - Healthy People 2030 health.gov
National Strategy to Support Family Caregivers	Recommends public health related legislative and policy changes including: <ul style="list-style-type: none"> • Increase funding for state, territorial, tribal, and local health departments to systemically embed family caregiving into public health infrastructure and planning • Provide funding for the development, implementation, and evaluation of a public health national and culturally competent awareness campaign regarding caregiving 	2022 National Strategy to Support Family Caregivers (acl.gov)
Minnesota Local Public Health Examples		
Ramsey County Healthy Aging:	-Uses a public health approach to aging and is based on the knowledge of aging experts in Ramsey County. -Identifies key elements for healthy aging in the county.	Healthy Aging_A Public Health Framework_02.2020.pdf (ramseycounty.us)

A Public Health Framework	-Establishes guiding principles and opportunities for action - Could consider this framework at a state wide scale	
Cook County Public Health	Collaboration between Cook County Public Health and Care Partners to better understand the experience of aging in Cook County communities and guide public health planning and collective action.	Age Friendly Communities Survey and Forums Age Friendly Cook County
Example State Initiatives		
Socially Connected Communities Action Guide for Local Government and Community Leaders	Local government leaders and others who influence community-level policies, systems, and environments are well positioned to help. This includes mayors, city and county managers, councils of government, and leaders in transportation, housing, parks and recreation, and public health. Leaders of other sectors, nonprofits, and community-based organizations can also be allies.	Socially-Connected-Communities Action-Guide-for-Local-Government-and-Community-Leaders.pdf (healthyplacesbydesign.org)
Wisconsin’s Memory Screening in the Community Program	Memory screening in the community helps to identify dementia before a crisis occurs. Early detection strategies use a number of different approaches. Screening for dementia can be done in the community and is not the same as getting a diagnosis from a health care provider. Screening and early detection can be a first step to earlier diagnosis, and therefore better outcomes for people living with dementia and caregivers. 1) The Minnesota Department of Health’s Aging and Healthy Communities Unit currently partners with community-based organizations to use trusted messengers (ex: African American beauty salons/barbershops) to educate their community about signs and symptoms of dementia. 2) The University of Minnesota’s Center for Healthy Aging and Innovation has adapted the ALTER Dementia program for African American churches in Minnesota. 3) Minnesota Board on Aging trains their Caregiver Consultants to be dementia capable, including identification of early signs and symptoms of dementia. These efforts could be expanded and amplified in an adaptation of Wisconsin’s model.	Dementia Care: Memory Screening in the Community Wisconsin Department of Health Services
Michigan Poll on Healthy Aging	“Starting in May 2024, the Michigan Poll on Healthy Aging will regularly tap into the perspectives of Michiganders age 50 and older on a wide range of health-related topics, with support from the Michigan Health Endowment Fund. The poll grew out of, and uses the same infrastructure as, the National Poll on Healthy Aging that has been run by the U-M Institute for Healthcare Policy and Innovation since 2017, with support from AARP and Michigan Medicine.”	Michigan Findings National Poll on Healthy Aging (healthyagingpoll.org)