# AFPHS 6Cs Training and Implementation Guide



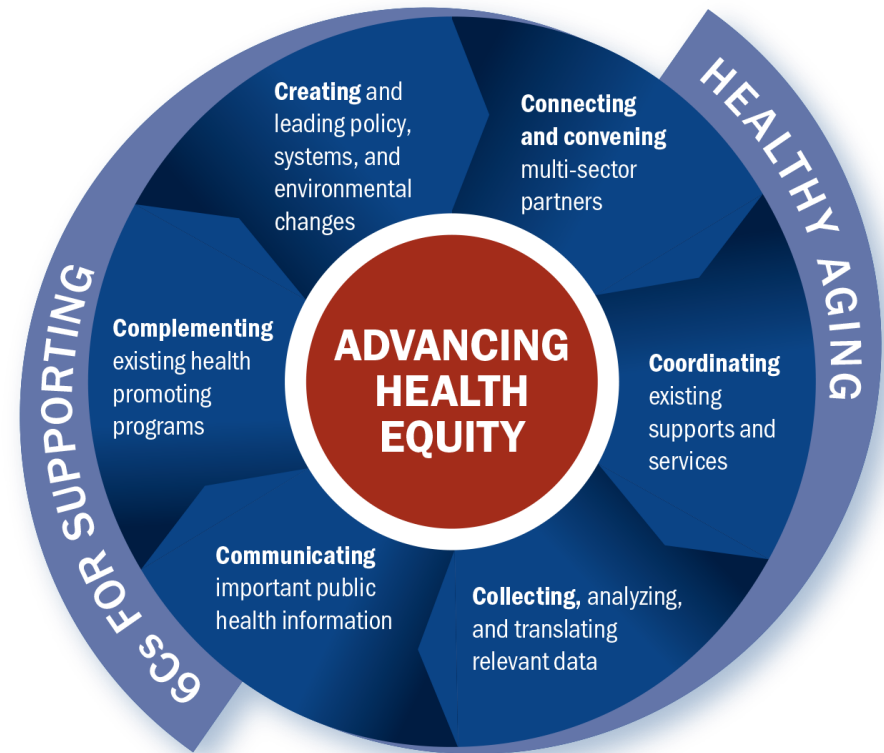Part I: Introduction to AFPHS and 6Cs Framework

Part II: Building the Foundation for AFPHS Adoption

Part III: Capacity Building— Module Specific

Part IV: Development and Adoption of AFPHS Action Plan

# AFPHS 6Cs Framework

➢C1: Importance and value of having a champion

➢C2: Multi-sector collaboration

➢C3: Acknowledge historical roles in serving older adults

➢C4: Data is crucial for making the case

➢C5: Engage partners, community, policymakers

➢C6: So many roles for public health!

Module 3: Coordinating (C3)

# Module 3: Coordinating Existing Supports and Services

1. Define "Coordinating Existing Supports and Services"

2. Identify at least three strategies that demonstrate " Existing Supports and Services"

3. Describe how to operationalize health equity approaches

4. Identify challenges to and opportunities for public health coordinating efforts

5. Identify potential partners that can enhance adoption of policies and engagement

# Capacity Building Strategies: Structure and Steps

➢ Identify at 2-3 strategies to explore.

➢ Answer all questions and identify the next steps for that strategy.

➢ Select the tools and resources you can use to better understand how to move toward completion of that strategy.

➢ Identify other healthy aging strategies that are achievable and sustainable within this tenet.

**Module 3: Capacity Building Strategies for "Coordinating Existing Supports & Services"**

Module 3 is intended to expand understanding and build public health connections and networks to promote healthy aging. After completing the steps outlined below, public health practitioners should be able to identify programs, practices, and services that could be considered for expansion and inclusion into a broader system of support for older adults.

**Definition**: Coordinating existing supports and services to help older adults, families, and caregivers navigate and access services and supports, avoid duplication, and promote an integrated system of care.

**Module 3 Learning Objectives:**

1. Define "Coordinating Existing Supports and Services"
2. Identify at least three strategies that demonstrate "Coordinating Existing Supports and Services"
3. Describe how to operationalize health equity approaches
4. Identify challenges to and opportunities for public health support of policies and engagement in activities
5. Identify potential partners that can enhance adoption of policies and engagement

## Policy and Practice Strategies

The strategies listed below have been compiled based on current activities of state, local, tribal, and territorial health departments that are building age-friendly public health systems. Some are very practical and may be easier to adopt and implement (Tier One) and some will be more challenging, requiring more time, resources and potentially funding (Tier Two). No policy or practice change is too large or small for consideration and should be considered in the context of department leadership, existing partnerships, and appetite for change. Also, consider working on a part of a strategy that can be built into a longer-term approach.

The steps below are intended to guide exploration of healthy aging with a view toward full adoption of healthy aging as a core public health function. Practitioners are encouraged to consider additional strategies based on the healthy aging work already underway, the structure of the public health agency, and the unique needs of older adults and caregivers in their own jurisdictions. Steps:

1. Identify at least two strategies to explore.
2. Answer all questions and identify the next steps for that strategy. If working with a committee, discuss the feasibility of the strategies.
3. Select the tools and resources you can use to better understand how to move toward completion of that strategy.
4. Identify other healthy aging strategies that are achievable and sustainable within this tenet.

| Strategies | Questions to Consider: These are meant to expand your thinking around the strategies and prompt further exploration of other approaches. | Resources to Explore These resources may or may not be directly related to the questions on the left, but will help to increase awareness of additional approaches to various aspects of this work. | Selected Strategies |
|---|---|---|---|
| | | | |

# Policy and Practice Strategies Tier 1

➢Identify existing programs and services

➢Coordinate with disease-focused coalitions

➢Food distribution

➢Walking groups/physical activity

➢Community social service programs (Y)

| Tier One | | | |
|---|---|---|---|
| Identify existing programs and services that already serve older adults in your jurisdiction. | -What opportunities exist to leverage these programs or services to engage agency leadership or serve as a model for coordination? <br>-Are there partners in your agency or other state or community agencies with whom you might engage to coordinate programs and services? | ◊ Denver Regional Council of Governments— Boomer Bond Assessment tool <br>◊ Asset Mapping - Age-Friendly World (who.int) | |
| Connect existing public health education or counseling programs for older adults with those provided through the aging services network or other state or community programs (e.g., provide blood pressure tests, biometric health screenings, Alzheimer's screenings, and fall risk assessments) | - What partnerships exist that could be helpful in planning, executing, and expanding these programs and classes? <br>- Are there existing resources from partner organizations that can be used to identify health screenings and individualized health counseling? For example, through the Y, local libraries or senior centers. If not, what resources are needed? | ◊ Communicating with Older Adults <br>◊ Health Risk Assessments <br>◊ Screening for Alzheimer's Disease <br>◊ CDC's Fall Risk Assessment tool <br>◊ Fall Risk Assessment: Univ of North Dakota | |

# Policy and Practice Strategies Tier 2

➢Assess agency programs across the jurisdiction

➢Healthcare system partners

➢No Wrong Door programs

➢Prioritize older adult health in SHIP/CHIP

➢Elder mistreatment: MDTs

➢Website hub for public use

| Tier Two | | | |
|---|---|---|---|
| Adapt existing tools to assess agency programs that support older adult health and use the results to engage leaders in healthy aging efforts (e.g., Age-Friendly Communities). | - What tools already exist that could be used in this process?<br>- Does your organization have existing relationships with leaders that could be used to promote healthy aging efforts?<br>- What other partners should be engaged to prioritize healthy aging? | ◊ AARP survey tool<br>◊ American Hospital Association Community Health Assessment toolkit<br>◊ NACCHO: MAPP 2.0 | |
| Engage health systems in your state or community to provide care coordination for older adults. Activities may include hospital discharge counseling, fall awareness and prevention, fall risk assessment, medication management review, hearing assessment, and diabetes screening. | - Does your jurisdiction/organization have an existing relationship with healthcare systems, clinics, an Aging and Disability Resource Center or other facility?<br>- What resources or relationships are needed to successfully provide care coordination for older adults? | ◊ Three Keys to Cross-sector Age-Friendly Care<br>◊ Age-Friendly Health Systems | |
| Lead a workgroup to develop a "No Wrong Door" program, building a coordinated system for older adults and caregivers who need assistance navigating and accessing services and supports. | - Has my jurisdiction/organization begun this process?<br>- If not, which partners should be invited?<br>- What resources or relationships are needed to successfully develop a No Wrong Door system? | ◊ No Wrong Door: A Guide for Community Organizations | |

# Strategies to Address Barriers and Opportunities

➤ Enhance communication with other agencies, external partners, and the public

➤ Address social drivers of health, e.g., transportation, housing, social engagement

➤ Enhance caregiver support

## Strategies to Address Barriers and Opportunities

Public health professionals are strategic leaders and planners and well positioned to coordinate existing supports to help older adults, families, and caregivers navigate and access resources, avoid duplication, and promote an integrated system of care. Public health professionals should assess what barriers exist within their jurisdiction that may prevent them from effective coordination. In this section we list specific actions that public health professionals can take to address barriers that they may experience in their efforts to improve healthy aging.

Steps:

1. Identify which challenges you may face in your efforts to advance healthy aging and the related strategy.
2. Answer all questions and identify the next steps for that strategy.
3. Select the tools and resources you can use to better understand how to move toward completion of this strategy.
4. Identify other healthy aging strategies that are achievable and sustainable within this tenet.

| Strategies | Questions to Consider | Resources to Explore | Selected Strategies |
|---|---|---|---|
| Address coordination challenges among partners and the public that depend on effective communication. | *Partners*<br>◊ *What partnerships already exist? What additional organizations or institutions should be considered for new partnerships?*<br>◊ *Who are the key interested parties to involve?* | ◊ Providing Care to a Diverse Older Adult Population \| National Institute on Aging (nih.gov)<br>◊ The Spectrum of Community Engagement to Ownership | |

# Competence Check

◦ Describe tenet

◦ Identify examples

◦ Challenges and opportunities described

◦ Potential partners considered

◦ Coordinating SDOH to address disparities

## Module 3 Competence Check

Congratulations on completing Module 3! You should be able to define Coordinating Supports and Services and identify a few strategies to pursue and adopt. This final exercise will provide you with an opportunity to reflect on the content you learned and consider how you can apply it to your work.

| Question | Response |
|---|---|
| Define and provide an example of Coordinating in your community. | |
| Identify at least three strategies from the Module 3 guide (or others you have identified) to demonstrate Coordinating Supports and Services in your jurisdiction. Consider examples that may apply directly to your work. | |

# TFAH is Here to Help!

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Age-Friendly PUBLIC HEALTH SYSTEMS