

Massachusetts Advisory Council on Alzheimer's Disease and All Other Dementias

Meeting Minutes
February 6, 2024
3:00-5:00 pm

Date of meeting: Tuesday, February 6, 2024

Start time: 3:00 pm

End time: 5:00 pm

Location: Virtual Meeting (Zoom)

Members participating remotely		Vote 1*	Vote 2	Vote 3
1	Secretary Elizabeth Chen – Executive Office of Elder Affairs (EOEA) (<i>chair</i>)	X	X	X
2	Susan Antkowiak – Alzheimer's Association - MA/NH Chapter	X	X	X
3	Hugo Aparicio – Boston University School of Medicine	-	-	-
4	Andrew Budson – VA Boston Healthcare System	X	X	X
5	Jatin Dave – Chief Medical Officer, MassHealth	X	X	X
6	Brent Forester – Tufts Medical Center	-	X	X
7	Patricia Jehlen – Mass. Senate	-	-	-
8	Rhiana Kohl – Caregiver	-	-	-
9	Barbara Meehan – Alzheimer's Advocate/Formal Caregiver	X	X	X
10	Hector Montesino – Alzheimer's Advocate	X	X	X
11	Bernice Osborne-Pollard – Caregiver	-	-	-
12	Linda Pellegrini – UMass Memorial Medical Center	-	-	-
13	Christine Ritchie – Department of Public Health (DPH)	X	X	X
14	Heather Sawitsky – Fox Hill Village Homeowners Corp.	A	X	X
15	Thomas Stanley – Mass. House of Representatives	X	X	X
16	James Wessler – Alzheimer's Association	X	X	X

* (X) Voted in favor; (O) Opposed; (A) Abstained from vote; (-) Absent from meeting or during vote

Proceedings

Secretary Chen called the meeting to order at 3:00 pm. She welcomed members and reminded members that the Council is subject to the Open Meeting Law, noting that all votes taken during the meeting would be conducted via roll call.

Vote 1 to approve the 11/7/2023 minutes: Members voted to approve the minutes from the Council's previous meeting on November 7, 2023. Dr. Ritchie introduced the motion, which was seconded by Ms. Meehan and approved by roll-call vote (see detailed record of votes above).

Chris Wight from MGH and Alina Sibley from Baystate Health, co-leads of the Council's Interprofessional Dementia Care Workgroup, presented on the group's work to ensure staff in primary care settings receive training and support for building and retaining interprofessional dementia care teams. Members comments reflected the challenges of fully-funding dementia care programming. For additional details, refer to the meeting presentation on the Council's [Meeting Materials webpage](#).

Link provided by Dr. Forester shared in the chat during the discussion:
<https://sites.tufts.edu/chsp/2023/05/18/primary-care-for-you-pc4you/>

Pam MacLeod provided an overview of the draft annual report, which had been shared with Council members prior to the meeting. While members did not have feedback on the draft report, multiple members shared their gratitude to Pam for her dedication to the work of the Council.

Vote 2 to approve the Council's annual report: Secretary Chen requested a motion to approve the annual report. Mr. Wessler introduced the motion, which was seconded by Dr. Dave and approved by roll-call vote (see detailed record of votes above).

Secretary Chen facilitated a discussion of the Council's role around early dementia detection and diagnosis, explaining that while promising new treatments emerge, they continue to require timely detection and diagnosis. She asked members to identify practical strategies that the group could implement as part of the work of its existing teams to significantly enhance detection and/or diagnosis, offering the following suggestions to help structure the discussion:

1. Equitable access to screening, assessment, and diagnosis;
2. Culturally-sensitive provider/patient communication that respects culturally-diverse beliefs, which may include stigmatizing perceptions of dementia;
3. Mild cognitive impairment (MCI) and early dementia detection and screening by health care workers;
4. Access to culturally sensitive cognitive assessments, including family observations, clinician interviews, and diagnostic testing (biomarkers);
5. Public awareness of early warning signs (individuals and health care providers);
6. Role of emerging technologies on access to screening and diagnosis; and
7. Effective communication of diagnosis.

Members expressed support for a number of areas, including increasing public awareness of early warning signs; promoting initiatives to elevate caregivers' concerns regarding early warning signs; initiatives promoting access to culturally-sensitive approaches to diagnosis and cognitive assessments; initiatives that target community health centers, specifically within underserved communities. Secretary Chen proposed that the Council consider targeting its work in the 10 health equity communities outlined in the Healey-Driscoll Administration's ongoing plan for Advancing Health Equity in Massachusetts (AHM).

Secretary Chen facilitated a discussion of the Council's work and planning for the future of the Council, asking members to comment on their feedback on the Council's progress, whether there are any gaps or areas that need more attention, and whether there are challenges or concerns that may be hindering the group's progress. Some of the comments members shared included the need for representation of women living with dementia on the Council; continuing to focus on increasing access to treatment; viewing AD/RD as a public health issue; focusing on social determinants of health and how the healthcare system addresses

the needs of vulnerable populations, particularly those without natural care partners; including an evaluation framework into the Council's work to measure impacts; the need for a panel of LGBTQ+ individuals living with and caring for someone with dementia; the need to address the lack of knowledge about dementia and amplify messaging about dementia diagnosis; explore partnerships with other state councils and commissions.

In response to a proposal from Secretary Chen regarding the development of resources for caregivers and families related to navigating financial matters following an ADRD diagnosis, Ms. Antkowiak highlighted the Association's "Managing Money" program and package of resources on the topic.

Members also proposed that the Council consider discussing a variety of additional topics at future meetings, including supports for unpartnered ADRD patients; increasing partnerships with primary care providers related to ADRD diagnosis and referrals and the need for a consumer-facing guide to help patients navigate discussions with their providers; support for scaling up hub and spoke models for dementia care delivery; dementia care financing and payment models.

Vote 3 to adjourn the meeting: Secretary Chen requested motions to adjourn the meeting, which members approved by roll-call vote (see detailed record of votes above).

Secretary Chen thanked members and noted that the Council's next meeting is scheduled for May 7, 2024.

The meeting was adjourned at 5:00 pm.

Meeting Materials

1. Draft 11/7/2023 meeting minutes
2. Council meeting presentation
3. Draft annual report