

# Beyond Sustainability to Dissemination & Replication



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# AoA Evidence-Based Prevention Initiative

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- Assist States and local organizations to implement and sustain evidence-based programs that have proven effective in helping older adults to reduce their risk of chronic disease and disability
- Accelerate the translation of HHS-funded research (from NIH, CDC, AHRQ and others) into practice
- Public-Private Collaboration with AoA, Atlantic Philanthropies and NCOA
- Criteria for selecting programs to implement:
  - Based upon rigorously conducted research
  - Developed and tested with older adults
  - Replicable in community-based settings

# Core Features of AoA Demonstration Projects




- Requires partnership between state agencies on aging and public health
- Requires adoption of evidence-based programs in at least 3 geographic areas
- Requires Stanford CDSMP in at least one area
- Requires implementation through local aging service organizations
- Emphasizes reach to diverse and at-risk populations
- Encouraged use of (P)RE-AIM Framework

# (P)RE-AIM Framework for Translating Research into Practice



- Planning and Partners
- Adoption- Recruiting Sites and Staff
- Reach- Recruiting Participants
- Implementation- Fidelity
- Effectiveness
- Maintenance

# What Are Maintenance and Expansion Goals?



- For each of the 24 demonstration states: Sustain & expand programming.
- For NCOA, AoA and partners: Expand programming to the rest of the nation.
- For the movement: Make programming available to approximately 22 million older adults.



## Overview – 3 Pieces of the Puzzle

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- Community-level attention to detail: Case study of successful sustaining and replicating
- National organization identifies and spreads promising opportunities and seeks policy change
- Researchers build “system” to facilitate replication

# Maine's Experience



From Research Translation to Sustained  
Community-based Health Programming

# Project Leadership and Advisory Committee



- Southern Maine Agency on Aging
- MaineHealth's Partnership for Healthy Aging
- Maine Medical Center Division of Geriatrics
- University of Southern Maine, School of Social Work
- A Matter of Balance Participant and Coach
- AARP Maine
- City of Portland
- Maine Center for Disease Control and Prevention
- Maine Nutrition Network
- Maine Office of Elder Services
- Maine State Housing Authority
- New England Rehabilitation Hospital
- University of New England, Geriatric Education Center
- Osher Lifelong Learning Institute



# Advisory Committee Roles

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- Program champions
- Committed participants
- Content experts
- Dissemination strategies/partners
- Problem-solving
- Legislative advocates

# Older Adults as Advocates – Voice of the Consumer is Critical



- Satisfied participants who experience improvements in health and quality of life are great advocates.
  - Help them to tell their stories
  - Help them to become effective advocates
  - Help them to stay involved as peer leaders

# Adopting Organizations as Advocates – They Must See the Value



- Satisfied agencies that see improvements in health and quality of life of clients and benefits to the organization are great advocates.
  - Help them to tell their stories
  - Help them to become effective advocates
  - Help them to stay involved as training sites



# Replication – Building New Partnerships

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- Challenges:

- No funding for Master Trainer sites
- Rural nature of Maine
- Few formal senior center settings

- Opportunities:

- AAAs as service providers
- Healthy Maine Partnerships
- Growing interest in Healthy Aging
- Ground-work done with mini-grants
- RSVP statewide objective - MOB

# Request for Partners (Master Training Sites)

RE-AIM Component	RFP Measure
Reach	<ul style="list-style-type: none"><li>▪ Capacity and experience - programming, recruiting, marketing, reporting</li><li>▪ Affordability - reach</li></ul>
Efficacy/Effectiveness	<ul style="list-style-type: none"><li>▪ Fidelity through training and outcome measures</li></ul>
Adoption	<ul style="list-style-type: none"><li>▪ Collaboration - community partners, health care,</li><li>▪ Experience - recruitment of volunteers, participants,</li><li>▪ Environmental - barrier-free, easy access, private space, etc.</li></ul>
Implementation	<ul style="list-style-type: none"><li>▪ Program Support - coach support, marketing, funding, transportation, partnerships</li><li>▪ Maintenance of Fidelity in delivery</li></ul>
Maintenance	<ul style="list-style-type: none"><li>▪ Sustainability - on-going commitment</li></ul>

# Partnerships are the Key to Successful Maintenance & Replication



- Partnership takes time and patience.
- Shared leadership - Different partners take the lead in different areas based on strengths.
- Spread - each partner works with their network to disseminate.
- Every partner's wisdom and experience adds to the whole.
- One collaboration leads to another, follow the threads.
- Use the political capital within the collaboration to bring others on-board.

# CDC-NCOA Study on Financial Sustainability

- To help states achieve financial sustainability for evidenced-based community health promotion programs for older adults
- To increase understanding about and dissemination of financial sustainability models and strategies




# Methodology




- Reviewed some literature and past studies
- Worked with national leaders to frame the approach
- Developed and pre-tested protocol for telephone interviews with state leaders
- Conducted telephone interviews with 15 states (state public health departments and state units on aging)
- More literature review

# What We Learned: Ways of Thinking About Sustainable Financing



- Find more resources to support new programs
- Institutionalize new programs within existing funding streams
- Change the social norm
  - Older adults “demand the program”
  - Through strong demand the program sells itself



# What We Learned: Sources of Financing

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- State and federal grants
- State and federal formula dollars
- Medicaid
- Philanthropy (foundation, corporate)
- Healthcare organizations
- Senior housing
- Employers
- Continuing education
- Advocacy strategies
- Charging for services
- Bequest marketing

# What We Learned



- The prospects for financial sustainability are improved with
  - Conscious effort
  - Accountability
  - Tailored approaches
  - Leverage unique strengths and opportunities
- Build and manage partnerships
  - Partnerships are a lot of work
  - Partnerships entail pitfalls and potential




# Six Principles for Sustainable Funding

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- Engage in financial planning
- Diversify your sources of income
- Involve community leaders
- Identify and support a program champion(s)
- Incorporate the program into existing budgets
- Recognize the link between marketing & financial sustainability

# National Strategies



- New language in Older Americans' Act
- Public-Private partnerships
- Systems changes that support widespread replication
  - Volunteers, housing, health care
- Ongoing data collection and analysis
- "Ensure" successful replication



# Dissemination Centers for the Long Haul

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- In Academe: Stanford Chronic Disease Self-Management Program
  - 1985 - Publication of Arthritis article
- Agency-Academic Partnership: Enhance Fitness and Enhance Wellness
  - 1998 - Publication of first articles
- Agency Led: Matter of Balance
  - 1998 - Publication of first article
- Others ...

## For More Information -

- [www.healthyagingprograms.org](http://www.healthyagingprograms.org)
- [www.aoa.gov](http://www.aoa.gov)
- [nancy.whitelaw@ncoa.org](mailto:nancy.whitelaw@ncoa.org)

