



Report to the Public Health Committee of the
Connecticut General Assembly
on the
Connecticut Healthy Brain Initiative

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Executive Summary

Section 25 of Public Act 24-19: An Act Concerning the Health and Safety of Connecticut Residents, requires the Connecticut Department of Public Health (DPH) to report annually, within available appropriations, to the Public Health Committee regarding the department's work on the Healthy Brain Initiative (HBI).

The HBI is a Centers for Disease Control and Prevention (CDC) initiative that aims to improve our understanding of brain health as a central part of public health practice. HBI aims to:

- Create and support partnerships to create and promote brain health across the lifespan.
- Collect and report data to inform priorities and decision-making.
- Increase awareness of brain health among members of the public and health professionals.
- Support populations with a high burden of Alzheimer's disease and related dementias (ADRD).

The CDC has partnered with the Alzheimer's Association to develop and release a [Healthy Brain Initiative Road Map \(HBI RM\)](#). The HBI RM outlines actionable steps to promote brain health, address cognitive impairment, and address caregiver needs with the overarching vision that everyone deserves a life with the healthiest brain possible.

Dementia is an overall term referring to loss of memory, language, problem-solving, and other thinking ability, severe enough to interfere with everyday life. Alzheimer's disease is the most common type of dementia, accounting for 60-80% of all dementia cases. An annual report released by the Alzheimer's Association estimated that 80,000 people in Connecticut age 65 and over had Alzheimer's disease in 2020, and this number is projected to grow to 91,000 by 2025.

DPH is currently funded by a CDC Cooperative Agreement which currently funds 1.2 full time employees and programmatic activities. This agreement requires a 30% state match. Since October 2021, with this funding support, DPH released the Connecticut State Plan to Address Alzheimer's Disease and Related Dementias in August 2023. DPH also convenes the CT Alzheimer's Disease and Dementia Coalition with members that represent over 40 organizations across the state. Additionally, DPH works closely with the CT Department of Aging and Disability Services (ADS) on this work. Also of note, Public Act 23-48 (Sec. 6) established a statewide Dementia Services Coordinator within ADS.

Highlighted in this report are DPH's achievements related to brain health including:

- Establishing and growing a statewide CT Alzheimer's Disease and Dementia Coalition.
- Publishing the Connecticut State Plan to Address Alzheimer's Disease and Related Dementias.
- Establishing a partnership with the CT Bureau of Aging within ADS to align related activities.
- Developing an Implementation Plan and ad hoc work group to aid Implementation of the CT Alzheimer's Disease and Related Dementias State Plan.
- Educating the public about brain health and Alzheimer's Disease and Related Dementias (ADRD) topics, including risk reduction.
- Laying the groundwork to educate health care providers and other professionals about ADRD topics.
- Increasing the availability and use of data to improve knowledge, and assess, plan, and implement priorities.

The CT DPH is committed to applying a public health approach through collaboration with key partners to inform policy, systems, and environmental changes to decrease the burden of Alzheimer's disease and related dementias in the state moving forward.

Key Terms

ADRD	Alzheimer's disease and related dementias
BRFSS	Behavioral Risk Factor Surveillance System
BOA	Bureau of Aging
BOLD	Building Our Largest Dementia Infrastructure grant
CDC	Centers for Disease Control and Prevention
CT ADRD State Plan	Connecticut State Plan to Address Alzheimer's Disease and Related Dementias
CT ADS	Connecticut Department of Aging and Disability Services
CT DPH	Connecticut Department of Public Health
DSC	Dementia Services Coordinator
HBI	Healthy Brain Initiative: As used in this legislation, means the National Centers for Disease Control and Prevention's collaborative approach to fully integrate cognitive health into public health practice and reduce the risk and impact of Alzheimer's disease and other dementias.
RM	Healthy Brain Initiative (HBI) Road Map (RM) guides the public health effort to promote brain health by creating a framework for public health action.

Introduction

CGS 19a-6v, requires DPH to report annually to the Public Health Committee, starting January 1, 2025, on the department's work on the Healthy Brain Initiative, defined as the CDC's collaborative approach to fully integrate cognitive health into public health practice and reduce the risk and impact of Alzheimer's disease and other dementias.

The HBI acknowledges brain health as an important part of public health practice. According to the CDC, the HBI creates and supports partnerships, collects and reports data, increases awareness of brain health, and supports populations with a high burden of Alzheimer's disease and related dementias.

Currently there are two HBI RMs: State and Local Road Map for Public Health 2023-2027 Road Map and the Road Map for Indian Country. HBI RMs outline actionable steps to promote brain health, address cognitive impairment, and address caregiver needs.

Nationally, the Building Our Largest Dementia (BOLD) Infrastructure for Alzheimer's Act was passed into law in 2018 (P.L. 115-406) and amends the Public Health Service Act (Section 398A; 42 U.S.C. 280c-3-4). This Act focused on creating a uniform national public health infrastructure and supports efforts across the country related to the HBI RMs, including increasing early detection and diagnosis, risk reduction, prevention of avoidable hospitalizations, and supporting dementia caregiving. The Act has supported ongoing funding to states, including Connecticut, to address Alzheimer's disease and other dementias using a public health approach.

Alzheimer's Disease and Related Dementias in Connecticut

Over 6 million people in the United States age 65 and over, or about 1 in 9 people, are estimated to have Alzheimer's disease, and the number is projected to grow to 14 million by 2060 as more Americans are surviving into their 80s, 90s, and beyond. About three-quarters of people with Alzheimer's disease are age 75 or older. It is estimated that 80,000 people in Connecticut age 65 and over had Alzheimer's in 2020, and this number is projected to grow to 91,000 by 2025.

ADRD includes all disorders that cause dementia. Risk factors for developing ADRD are categorized as modifiable and non-modifiable. Age is nonmodifiable and the most important risk factor for ADRD. In fact, ADRD incidence and prevalence doubles every 5 years after 65 years. Dementia is not a normal part of aging, and young people can develop ADRD. Other nonmodifiable risk factors are having a family history of dementia or having Down syndrome. Modifiable risk factors are behaviors or health conditions people can change or improve to reduce the risk of developing ADRD including lifestyle choices such as exercise, eating nutritious food, and maintaining a healthy weight, as well as identifying and managing existing chronic conditions like hypertension and diabetes.

There is no cure for ADRD. Currently, the US Food and Drug Administration (FDA) has approved some treatments that address the underlying biology. Other medications may temporarily relieve Alzheimer's symptoms, such as memory loss and confusion.

Discussion

In 2021 DPH applied for a CDC grant called *Building our Largest Dementia Infrastructure (BOLD) Public Health Programs to Address Alzheimer's Disease and Related Dementias (ADRD)* or BOLD grant. DPH was

awarded a two-year Core Capacity grant (2021-2023) to assess Connecticut's infrastructure to address the aging population in Connecticut (CT) and rates of those diagnosed with ADRD.

Connecticut ADRD Coalition and State Plan

This grant provided support to DPH to establish a statewide, multi-sector ADRD Coalition tasked with assessing the state's resources and gaps and provided DPH with input and recommendations that would result in the drafting of the first Connecticut State Plan to Address Alzheimer's Disease and Related Dementias Plan (CT ADRD State Plan).

With this federal support, the CT ADRD State Plan was developed as a strategic plan that engaged a wide variety of stakeholders and community partners in determining a common vision for meeting urgent needs and priority actions related to those in Connecticut with ADRD and their care partners. The CT ADRD Plan was informed by the HBI RM and includes many of the 25 actions under six main goals:

- 1) Improve Coordination Statewide Across the Continuum of Care
- 2) Increase Public Knowledge and Awareness
- 3) Workforce Development
- 4) Best Practices for Early Diagnosis and Treatment
- 5) Community Support for Those with ADRD and Their Care Partners
- 6) Data and Surveillance

The final plan is now available to the public on the CT DPH Brain Health web page:

https://portal.ct.gov/-/media/dph/chronic-disease-adrd-heart-diabetes/ct-adrd-state-plan_final-82023.pdf.

Strategic plans are living documents based on a common vision that provide agreed-upon goals and objectives, proposed strategies to meet goals, and measurable expected outcomes. Surveillance data is used throughout the process to identify prevalence, gaps in services, areas of need, and outcomes of interventions. The CT ADRD State Plan is designed to be reviewed and revised annually by the CT ADRD Coalition and other stakeholders. The plan is also designed to identify funding and action priorities. As the plan develops and funding is secured, strategies will be amended, and specific timelines will be added.

ADRD Activities

In 2023, DPH reapplied for the next CDC BOLD competitive grant. Following a successful application, the Department was awarded 5-year implementation funding. The current BOLD grant funding is available through September 2028 and supports 1.2 full time employees and contracted work to implement priority components of the CT ADRD State Plan.

Activities include:

1. [Maintain and grow the CT ADRD Coalition.](#)

The CT ADRD Coalition continues to meet virtually on the third Thursday of the month from 1:30-2:30 PM. Following the drafting of the CT ADRD State Plan in August 2023 all meetings follow a standing agenda featuring ADRD related legislative, treatment and medication, member agency, and BOLD grant activity updates, including data and resources, and a 20-minute educational presentation

on an ADRD topic or initiative. Presentations are conducted by a Coalition member or an invited community partner and support professional development goals. There are currently over 91 members from about 40 organizations. An average of 50 members attend regularly. *For full ADRD Coalition membership and a listing of invited speakers, please see Appendix B at the end of this report.*

CT DPH reviews Coalition membership on a quarterly basis to identify gaps to ensure a comprehensive Coalition that is representative of people with ADRD, various work sectors, diverse ages, cultures, and regions across the state. Representation among people living with ADRD is a priority. During the summer of 2024, 18 new members from different sectors joined the Coalition.

2. Maintain strong partnership with CT ADS's Bureau of Aging (BoA) to align related activities.

In December of 2023, ADS's BoA hired a Dementia Services Coordinator (DSC). This position was established by CGS 17a-862 and was designed to assist the CT DPH BOLD grant work and align services between both agencies. In January 2024, DPH BOLD staff established a monthly meeting schedule with the DSC, which has resulted in strong alignment and partnership. The DSC shares ADS updates during Coalition meetings and assists the BOLD grant staff with implementing the ADRD State Plan.

3. Developing an Implementation Plan and ad hoc work group to aid implementation of the CT ADRD State Plan.

DPH program and Epidemiology staff created a tracking and monitoring tool to document Implementation Plan progress related to the ADRD State Plan. DPH reviews the Implementation Plan quarterly internally and semiannually with the Coalition. This will ensure progress is documented and monitored.

In March 2024, an ad hoc Caregivers Implementation Workgroup was established. Current work includes adapting the [Oregon State Dementia Road Map: A Guide for Family Caregivers and Care Partners](#) for Connecticut. It will be available on the DPH and CT ADS websites, printed in small quantities for primary care offices, and distributed for public use. It is anticipated distribution will occur by June 2025.

4. Educated the public about brain health and ADRD topics.

Educating the public regarding brain health is an ongoing effort. In 2022, DPH created a brain health web page: www.ct.gov/dph/CTBrainHealth and continues to add resources. Utilizing DPH's Facebook and other social media platforms, public messaging on brain health and ADRD continues to be used to educate the public on the importance of brain health across the lifespan.

In 2023, the DPH BOLD team created and conducted a multi-lingual primary prevention brain health public awareness media campaign called "[It's All Connected](#)". Coalition members provided input to ensure its cultural sensitivity and relatability for all audiences and age groups. It was relaunched in the summer of 2024 with BOLD grant funds and is currently on the CT DPH brain health web page. DPH and the Coalition aim to increase awareness of brain health and ADRD risk by conducting a secondary prevention media campaign on the signs and symptoms of ADRD, pending grant funding availability.

5. Educate providers and other professionals about ADRD topics.

With current BOLD implementation grant funding, DPH posted a Request for Proposal (RFP) in October 2023 for a contractor to conduct training for medical professionals and community professionals (police, municipality staff, librarians). The Alzheimer's Association, CT Chapter, was chosen following the RFP review process. This contract will be to conduct training throughout the grant cycle ending September 29, 2028. This contract is expected to begin in January 2025.

6. Increase the availability and use of data to improve knowledge, and assess, plan, and implement priorities.

DPH continues to explore new data sources as the program currently relies on Behavioral Risk Factor Surveillance System ([BRFSS](#)) data, hospital utilization data, and mortality data. The available ADRD data is used to inform the public health program and policy response to cognitive health, impairment, and caregiving on an ongoing basis beyond the project period.

Newly created fact sheets on risk factors "[What you need to know about brain health](#)" and an [ADRD surveillance page](#) were recently added to the CT DPH Brain Health web page. CT DPH BOLD staff was featured on an Association of State and Territorial Health Officials (ASTHO) podcast in August 2024 sharing the importance of using "Data for Action" featuring CT DPH BRFSS-ADRD related data.

7. Annual review of the CT ADRD State Plan and set priority items.

In October 2024, DPH conducted an annual Coalition survey to obtain feedback on potential edits to the existing CT ADRD State Plan and to set priorities items from the Implementation Plan. DPH received feedback in November and is assessing the potential creation of additional ad hoc groups accordingly.

DPH is developing a Steering Committee for the Coalition to begin in 2025 to assist priority activities and implementation, including developing subject matter expert "Champions" to assist with pieces of the plan.

Conclusion

DPH will continue its HBI and ADRD efforts in partnership with the CT ADS and the CT ADRD Coalition membership. With federal funding support in place through September 2028, these efforts will include continuing to convene the CT ADRD Coalition; establishing priority ad hoc work groups; and supporting public awareness, educational initiatives, and resources to assist the public.

Future opportunities to address ADRD will be shaped by changes in diagnostic tests and medication options. This will inevitably act as a catalyst for new phases of treatment and further highlights the importance of early detection and diagnosis. Research studies have also found that up to 40% of dementia cases worldwide could be prevented or delayed by targeting modifiable risk factors.

DPH is committed to strengthening partnerships to advance this work and reach not only an aging CT population but younger CT residents to foster the understanding that healthy behavior choices early in life can contribute to risk reduction and may help prevent chronic diseases, including ADRD, later in life.

Appendix A: Timeline of BOLD Grant Accomplishments

2023 (*Current BOLD Grant award: 9.30.2023 - 9.30.2028*)

- The State ADRD Plan is finalized in August 2023 following extensive Coalition work to assess CT resources, gaps, and provide recommendations. Available to the public on the CT DPH Brain Health web page: www.ct.gov/dph/CTBrainHealth.
- CT ADRD Coalition meets virtually every other month consistently.
- CT DPH created and updated the Brain Health web page to share resources.
- DPH created and launched the primary prevention campaign “[It's All Connected](#)” with Coalition feedback; available on the CT DPH Brain Health web page.
- CT DPH received CDC BOLD grant funds to continue healthy brain initiative work (funded 2023-2028).
- CT DPH holds RFP for Workforce Contract with Medical and Nonmedical Providers to offer training on working with people with ADRD.
- CT DPH drafts implementation plan to drive the Coalition work and establish priority items.

2024

- CT DPH BOLD grant staff meet monthly with the BOLD New England Collaborative featuring other BOLD grantees to share best practices and resources. (Ongoing)
- CT DPH meets regularly with the Alzheimer’s Association, CT Chapter.
- CT DPH BOLD staff establish monthly planning meetings with CT Bureau of Aging Dementia Services Coordinator to align agency efforts related to aging population and ADRD. Meet monthly for ongoing planning and alignment of efforts. (January 2024 – present)
- Coalition established a Caregiver Ad hoc workgroup as agreed upon as priority item.
- CT DPH recruits 18 new members, including four who are members living with ADRD.
- CT DPH is featuring on a National Association of Chronic Disease Directors (NACDD) podcast as an invited guest to speak about how Connecticut uses ADRD data as part of a “Data for Action” project. (August 2024)
- CT DPH conducts the first ever in-person Coalition meeting with strong attendance following two and a half years of meeting virtually (September 2024)
- CT DPH solicits annual feedback on the CT ADRD State Plan and priority items to inform potential need for new work groups.
- Coalition member evaluation survey conducted October 2024.
- CT DPH created an ADRD Surveillance data web page: <https://portal.ct.gov/dph/health-education-management--surveillance/adr-alzheimers-disease/adr-data-surveillance>, and linked it to the existing CT Brain Health web page.

Appendix B: CT ADRD Coalition Membership (as of October 2024)

	Last Name	First Name	Sector	Title	Organization
1	Allen	Kyler	Health Care	MD	Private Practice, Neuropsychologist in Cheshire
2	Barela	Kenneth	Community Agency	CEO	Hispanic Health Council
3	Bennett	Jennifer	Community Agency	Senior Center Coordinator	Avon Senior Center
4	Berg	Karina	Health Care	MD, MS, Associate Professor of Medicine	UConn Center on Aging
5	Bibbins	Deb	Community Agency	Founder & CEO	For All Ages
6	Bormio	Nicholas	Health Care	Clinical Pharmacy Specialist	Advantage Plus Network-Connecticut
7	Boxwell	Rachel	Health Care	Clinical Social Worker II	UConn health-population health
8	Brady	Meghan	Government	Dementia Services Coordinator	CT Department of Aging and Disability Services
9	Brazil	Jodi	Government	Coordinator, CT Statewide Respite Program	CT Department of Aging and Disability Services
10	Brel	Andrei	Community Agency	Member	Connecticut Association of Adult Day Centers
11	Cass	Barbara	Government		CT DPH
12	Christie	Angela	Health Care	Director of Operations & Residential Healthcare	Hartford Healthcare, Center for Aging
13	Chebet	Elizabeth	Community Agency	Adult Program Coordinator/Public Relations	Southington Public Library
14	Coll	Patrick	Health Care	MD	UConn Center on Aging
15	Conklin*	Elizabeth	Government	Health Program Supervisor	PI/PD, CT DPH, Chronic Diseases
16	Coppola	Stormy	Health Care	Recreation Rehab Therapist	Veterans Affairs Specialized Dementia Unit Nursing Home
17	Cote	Claire	Government	Senior Center Coordinator and Municipal Liaison	CT Department of Aging and Disability Services
18	Cournoyer	Brian	Community Agency	Director of Government Relations	Connecticut Hospital Association
19	Creel-Gross	Nancy	Volunteer	Board Member	Laz. Assoc, Livewell, Family member
20	de Havenon	Adam	Academia	Associate Professor	Yale School of Medicine
21	DeFrancesco	Erica	Community Agency	Director of Community Education	LiveWell Dementia Specialists
22	DeRocco	Carolyn	Community Agency	Education and Training	Alzheimer's Association CT Chapter
23	Dicks	Robert	Health Care	MD	Hartford Healthcare Integrated Care Partners
24	Diniz	Breno	Health Care	MD	UConn Center on Aging
25	Dunkan	Barbara	Person with ADRD		Volunteer
26	Emanuel	Lorena	Government	Social Worker	CT DSS
27	Empey	Jennifer	Health Care	GUIDE Program Manager	Stand By Me/CT Hospice
28	Evans	Rhonda	Community Agency	Interim Executive Director	Connecticut Association for Community Action
29	Fedus	Donna B.	Community Agency	Gerontologist & Founder	Gerontologist & Founder Borrow My Glasses, LLC
30	Gerundo-Murkette	Margaret	Government	Social Services Program Administration Manager	Dept of Aging and Disability Services
31	Gil	Heidi	Community Agency	Chief Strategy Officer	LiveWell Dementia Specialists
32	Gray	Christina	Community Agency	Community Partnerships Manager	CT Age Well Collaborative

33	Greer	Leslie	Government		Office of Health Strategy
34	Hanbridge	Ginny	Community Agency	Executive Director	Alzheimer's Association CT Chapter
35	Harrity	Mary-Kay	Community Agency	Board Member	Alzheimer's Association CT Chapter
36	Hayes	Pamela D.	Community Agency	Executive Director	Connecticut Police Chiefs Association
37	Hedge	Edmund	Community Agency	Community Outreach Liaison	Connecticut Police Chiefs Association
38	Hunter	David	Health Care	President & CEO	Mary Wade Home
39	Jeffery	Sean	Health Care	Director of Pharmacy	Hartford Healthcare Integrated Care Partners
40	Johnson	Roger	Person with ADRD		Volunteer
41	Juttu	Mahitha	Community Agency	Intern	Alzheimer's Association
42	Kaufman	Linda	Person with ADRD	National Movement Manager	Early-Stage Advisory Group (Laz. Association)
43	Keefe	Kate	Community Agency	Therapy Practice Lead	LiveWell Dementia Specialists
44	Kovel	Christy	Community Agency	Director of Public Policy	Alzheimer's Association CT Chapter
45	Leonard	Nancy	Health Care	Director of Social Work and Private Division Director	Masters in Homecare
46	Lithwick	Lynn	Health Care	Speech Language Pathologist	Bristol Health Inpatient Outpatient Home Care
47	Luce	Katie	Community Agency		LiveWell Dementia Specialists
48	Maghaydah	Yazeed	Health Care	MD	UConn Center on Aging, James E. C. Walker M.D. Memory Assessment Program
49	Marottoli	Richard	Academia	Medical Director	Yale School of Medicine, Department Internal Medicine, Section of Geriatrics
50	Martinson	Wendy	Health Care	Ambulatory Quality Manager	UConn health-population health
51	McCord-Smith	Bridget	Health Care	Co-Owner	A Touch of Love Home Care, LLC
52	McIntyre	Maureen	Community Agency	Chief Executive Director	Connecticut Association of Area Agencies on Aging
53	Mirizzi*	Amy	Government	Chronic Disease Director	CT DPH, Chronic Diseases
54	Molony	Sheila	Academia	Professor of Nursing	Quinnipiac University
55	Monin, PhD	Joan K.	Academia	Associate Professor	Yale School of Public Health
56	Morelli	Mag	Community Agency	President	LeadingAge Connecticut
57	Moses	Ellen Sue	Person with ADRD		Volunteer
58	Nelson	Laura	Health Care	Administrator	Veterans Affairs Sgt. John Levitow skilled nursing home
59	Norwood	Alyssa	Community Agency	Lead Consultant / Director	CT Age Well Collaborative
60	O'Brian	Patty	Health Care	CDP, Dementia Specialist	Hartford Healthcare Center for Healthy Aging
61	Ogazi	Chioma	Government	Supervising Nurse Consultant, Comprehensive Cancer Program Director	CT DPH, Chronic Diseases - Cancer
62	Oleynick	Mark	Health Care	GUIDE Program Manager	Stand By Me/CT Hospice
63	Painter	Mairead	Government	Ombudsman	Connecticut State Long Term Care Ombudsman Program
64	Pappa	Kelly	Health Care	President & CEO	Doncaster
65	Peng	Justin	Government	Supervising Epidemiologist	CT DPH, Chronic Diseases
66	Polun	Deb	Community Agency	Chief Strategy Officer	Community Health Center Association of Connecticut (CHC/ACT)
67	Porter	Amy	Government	Commissioner	Connecticut Department of Aging and Disability Services
68	Poulin	Stephanie	Government	Epidemiologist 3	CT DPH, Chronic Diseases
69	Repinecz	Nadine	Government	Health Program Associate	CT DPH, Chronic Diseases

70	Roscillo	Robin	Volunteer	Volunteer - Community Educator - Advocate - Walk Team Captain	Alzheimer's Association Volunteer
71	Sabatini	Lisa	Health Care	Residential & Clinical Services	CCARC, Inc.
72	Sadak	Tatiana	Academia	Exec Deputy Dean, Professor, Director of Dementia Palliative Educa Network	Yale School of Nursing
73	Schettini	Chrissie	Health Care	Senior VP	Complete Care / Palace Adult Day Health Center
74	Schultz	Melinda	Community Agency	Program Manager	Dementia and Palliative Education Network (DPEN)
75	Seguinot	Milagrosa (Millie)	Community Agency	CCHW, President	Community Health Workers Association of Connecticut
76	Sekorski	Gary	Community Agency	Co-founder & COO	For All Ages
77	Sheth	Kevin	Health Care	Director	Yale Center for Brain & Mind Health
78	Shurtleff	Natalie	Community Agency	Associate State Director of Advocacy & Outreach	AARP Connecticut
79	Sklar	Ashley	Community Agency	Adult Services & Community Engagement Consultant	Middletown Library Service Center
80	Smith	Michael	Community Agency		LiveWell Dementia Specialists
81	Smith	Sean	Health Care	CEO Founder	A Touch of Love Home Care, LLC
82	Switalski	Jennifer	Government		CT Department of Aging and Disability Services
83	Toubman	Sheldon	Community Agency	Litigation Attorney	Disability Rights Connecticut
84	Tousey-Ayers	Robin	Government	Health Program Associate	CT DPH, Injury Prevention - Falls
85	Vinci	Jennifer	Government	Health Program Supervisor	CT DPH, Nutrition, Physical Activity, and Obesity Program
86	Viruet	Iris	Government	DPH Comprehensive Cancer Program Secretary 2	CT DPH
87	Weiss	Gigi	Health Care	MSPT, CDP, CADDCT, Director of Rehabilitation services	RVNA Health
88	Werner	Michael	Government	Legislative Policy Analyst	Commission on Women, Children, Seniors Equity and Opportunity
89	Wyman	Michelle	Health Care		UCONN Health CMS Guide Program
90	Zdanys	Kristina	Health Care	MD	UConn Center on Aging, James E. C. Walker M.D. Memory Assessment Program
91	Zheng	Xi	Government	Epidemiologist	CT DPH, BRFSS

* Denotes Chair

Summary of sector breakdown:

Health Care = 28
Community Agency = 31
Government = 21
Volunteer = 2
Persons with ADRD = 4
Academia = 5

CT ADRD Coalition Meeting Presentations since September 2023:

Coalition meeting date	Feature speaker and affiliation/expertise	Presentation topic
09/21/2023	Kristen Cusato, Alzheimer's Association	Alzheimer's International Conference
11/30/2023	Deputy Chief William Palmieri, Southington Police Department	Dementia Friendly Southington
01/18/2024	Alyssa Norwood, JD, MPH, Director, Connecticut Age Well Collaborative	Leaders Fellowship program
03/21/2024	Kate Keefe, OTD, OTR/L Therapy Practice Lead, LiveWell	The Healthy Lifestyles Program
05/16/2024	Adam de Haven on, MD, Associate Professor, Yale School of Medicine	Vascular Contributions to Cognitive Impairment and Dementia
07/18/2024	Melinda Schultz, University of Washington and at Yale School of Nursing	Dementia and Palliative Education Network
09/19/2024	Erica DeFrancesco, Director of Community Education, LiveWell Christy Kovel, Director of Public Policy, Alzheimer's Association, CT Chapter	LiveWell Empowerment Board Presentation Alzheimer's Association Statewide Updates