# Washington State

# Dementia Action Collaborative

# Communications Plan

**Background**

In 2014, legislation established an Alzheimer’s Disease Working Group (ADWG) to create a state plan to address Alzheimer’s disease. This plan, released in January 2016 identifies goals, strategies and recommendations as a starting point for action. See [State Plan](https://www.dshs.wa.gov/sites/default/files/SESA/legislative/documents/2016%20WA%20Alzheimer%27s%20State%20Plan%20-%20Full%20Report%20Final.pdf).

The ADWG developed the first Washington State Plan to Address Alzheimer’s Disease and Other Dementias as a public-private partnership. The Plan’s implementation – including action planning, next steps, and policy changes – depends upon the participation and contributions of a broad group of committed partners. This next generation workgroup is action oriented - a voluntary statewide collaboration committed to preparing our state for the future. This group is called the **Dementia Action Collaborative.**

It is the **mission** of the Dementia Action Collaborative to guide and support the implementation of the Washington State Plan to Address Alzheimer’s Disease and Other Dementias.

The Dementia Action Collaborative convened in April 2016. Shortly thereafter, three subcommittees each identified the short-term recommendations to initiate in 2016, based upon their feasibility of implementation within existing resources, and began work on them. A formal communications team was established in September 2016 to ensure consistent and quality messaging.

**Communication Purpose/Goals**

Our communications effort will support the overall goal of getting our internal and external partners informed of our activities; and, sharing our progress and products with interested stakeholders.

The primary goals are to ensure that internal and external stakeholders understand:

* The seven goals of the Washington State Plan to Address Alzheimer’s Disease and Other Dementias are intended to prepare Washington State for increases in the dementia population.
* That change takes time. The plan identifies short-term, mid-term and longer term recommendations, and allows for the fact that timelines may change as resources are available, or not, to support specific activities.
* That the DAC is a voluntary, statewide group of stakeholders, with appointments made by the Chair/currently the Assistant Secretary of Aging and Long-Term Support Administration.
* The DAC will build on activities of broader initiatives that are addressing improved health and quality of life such as Healthier Washington, Medicaid Transformation Waiver and the Bree Collaborative End of Life Care Recommendations.

**Guiding Communications Principles**

* DAC members are an essential audience. We must make sure that our members, subcommittee members, and staff have a clear understanding of the Plan, and how it is being implemented.
* Every effort will be made to ensure consistent messaging across partner agencies and members.
* Members and project leadership/staff will work together to ensure that messaging and materials meet the goals of accuracy and communicating in a way that audiences can easily understand.
* Coordination between the Chair of DAC, subcommittee Chairs, project teams and staff is critical. Chairs and staff will work to promote collaboration and consistency among and between teams/members as needed.
* All presentations, materials or other communications about the Plan or work of the DAC, for external audiences, are reviewed by project staff for messaging accuracy/consistency, and consideration by the Steering Team as needed.
* Whenever possible, partners will have access to the tools they need to tell the story.
* Communications are concise, relevant, timely, accurate and engaging. Bureaucratic jargon and acronyms are kept to a minimum.
* Our resources will always be limited - efforts must be targeted and strategic.

**Working with the DAC Communications Team**

* Any materials (hard copy or electronic) for public use created by DAC or any of its subcommittees must be reviewed and approved by the Communications Team prior to publishing or distribution.
* The Communications Team will work with you to help target your messaging, ensure that the look and feel of your message is consistent, and serve as a final editor.
* To allow ample time for Communications Team review, please send your draft materials to the Communications Team, via [Lynne Korte](mailto:KORTELM@dshs.wa.gov), at least two weeks prior to your desired publication/distribution date.
* The Communications Team can also provide feedback as you and your subcommittees work through drafts of your content as needed/desired.

**Target Audiences for Communications**

* **DAC members –** internal messaging to sustain awareness and understanding of work/progress, next steps
* **DAC member networks**
* **JLEC, legislature**
* **Stakeholders –** aging network, advocates, providers
* **DAC interested stakeholders**
* **General public**

**Proposed Communication Activities/Materials and Timeframes**

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| **Communication needs** | **Activity or Item** | **Audience(s)** | **Timeframe(s** | **Key Message** |
| **Info/background about the Plan** | **State Plan document (variable length versions)** | DAC members  Partners & Stakeholders  Public | Posted on webpage now. | Various versions available on the project webpage. |
| **Fact Sheet – Plan and DAC** | Partners & Stakeholders  Public | Get app’d and posted by Sept 30, 2016 | Brief info about the Plan and DAC |
| **Ongoing work and progress on recommendations** | **Project webpage** | DAC members  Partners & Stakeholders  Public | Ongoing | Meeting dates, materials an minutes; informational links and resources |
| **Progress report** | Partners & Stakeholders  Public  JLEC/Legislature | Annually, 12/31 | What’s been accomplished |
| **Products created for dissemination** | **Products, such as reports and/or materials derived from DAC work** | DAC members  DAC member networks  Partners & Stakeholders  Public | As available | Will vary by the product |