## Dementia Capable North Carolina

A Strategic Plan Addressing Alzheimer's Disease and related dementias





Nothing Compares —

# State Plan on Alzheimer's and Related Dementias

- A strategic state plan for Alzheimer's disease as required by GS 143B-181.1 of the NC Division of Aging and Adult Services (SB 744).
- State plan has been partnership of NCIOM and DAAS with The Duke Endowment, Winston Salem Foundation, AARP NC, LeadingAge NC, Alzheimer's NC, and the NC Alzheimer's Association.





## Task Force on Alzheimer's Disease and Related Dementia

- Co-Chairs:
  - ➢Goldie Byrd, NC A&T University;
  - Lisa Gwyther, Duke Family Support Program; and
  - Doug Dickerson, AARP NC
- 47 Task Force and Steering Committee Members
- Physicians, researchers, gerontologists, service providers, caregivers, staff of executive agencies, and legislators.
- Presentations from content experts, caregivers, and persons with dementia





### The Stigma and the Reality









## The New Face of Alzheimer's

people than ever are devastating disease

Innovators The TIME 100 Of the Future

F NEW SCIENCE O

**New Series** 

# The Face of Alzheimer's Disease & related Dementias today

• Sixth-leading cause of death



- **5.2 million** Americans have Alzheimer's disease
- Currently, NC has over **160,000** older adults with Alzheimer's disease or other types of dementia.
- In the US every 67 seconds someone develops Alzheimer's
- By 2030, the total number is projected to rise to over 300,000
- The only top 10 cause of death that cannot be cured, prevented, or slowed





## North Carolina is Aging

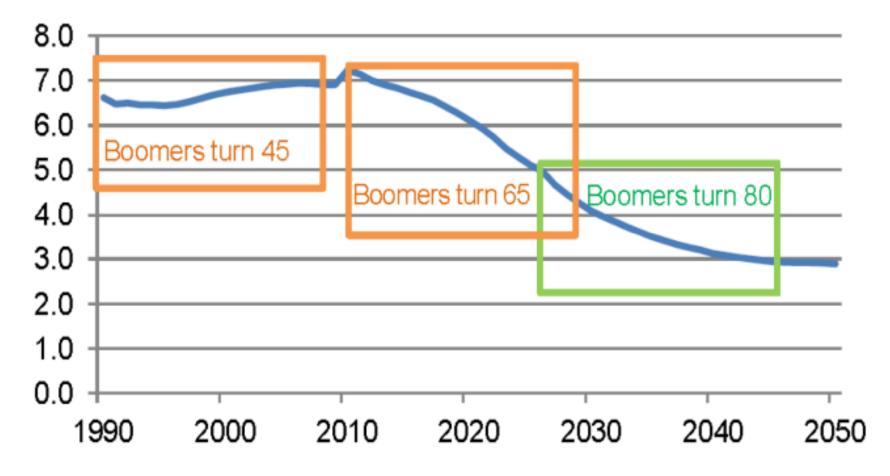


- The number of adults 65 and older will increase dramatically over the next 15 years.
- North Carolina ranks 9th nationally, both in total population and in the number of people 65 and older.
- In 2025, one in five North Carolinians will be 65 and older.
- Our 65 and older population will almost double in the next 20 years from 1.5 to 2.5 million.





### **Caregiver Support Ratio**



AARP Public Policy Institute

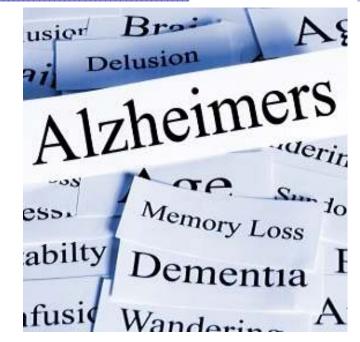




#### 16 Focus areas required by Senate Bill 744

- Awareness and Education
- Early Detection and Diagnosis
- Care Coordination
- Quality of Care
- Health Care System Capacity
- Training for Health Care Professionals
- Access to Treatment
- Home and Community Based Services
- Long-Term Care, Caregiver Assistance
- Research, Brain Health and Data Collection
- Public safety and safety-related needs of those w/ ADRD
- Legal protections for those with ADRD & Caregivers
- State policies to assist those with ADRD & Families







## **Dementia Friendly America**

#### Framing the Plan

- Raising awareness about dementia and transforming attitudes
  - Education, Awareness, Early Detection and Diagnosis
- Having supportive options that foster quality of life
  - Quality of Care, Care Coordination, Health Care System Capacity
- Supporting caregivers and families touched by the disease
  - Access to Treatment, HCBS, Long-Term Care, Caregiver Assistance
- Promoting meaningful participation in community life
  - Public Safety and Safety-Related, Legal Protections
- Reaching those who are underserved
  - Rural Communities, IDD population, African-American elders, Data





## Raising awareness about dementia and transforming attitudes

Reducing stigma

Increasing family education

Promoting brain health initiatives

Early screening diagnosis

Promote family planning & preparation
Community engagement with

grassroots organizations





## Raising awareness about dementia and transforming attitudes

 3.1 Increase awareness and promote education about available resources through incorporating Alzheimer's disease and related dementia-specific information in current health promotion and education programs.







#### Raising awareness about dementia and transforming attitudes

- 3.2 Enhance training for health care providers on the benefits and best practices for detection, diagnosis, and the services referrals of Alzheimer's disease and related dementias.
- 3.3 Create a collective impact partnership to develop and establish dementia-capable pilot communities.





# Raising awareness about dementia and transforming attitudes

 3.4 Establish a statewide coordinated leadership to oversee the state plan on Alzheimer's disease and related dementias.







- 75% of people with Alzheimer's are admitted to a nursing home by age 80.
- Medicaid costs are 19 times higher for older adults with dementia.
- Long-term care is provided in the home, in the community and in long-term care facilities.
- The median annual cost for nursing home care was in NC \$77,471 in 2013.
- Access to care is often difficult to navigate.





- 4.1 Promote appropriate care settings for people with Alzheimer's disease and related dementia, including home and community-based settings, institutional settings, and hospice and palliative care.
- 4.2 Examine methods of reimbursement and incentives for Alzheimer's disease and related dementia care through new models of care, including care management services, and palliative care.



- 4.3 Assess health system capacity for people with Alzheimer's disease and related dementias.
- 4.4 Improve telehealth services for people with Alzheimer's disease and related dementias.
- 4.5 Increase access to medical and community services for people with Alzheimer's disease and related dementia by improving transportation services through an inter-departmental working group.





- 4.6 Apply principles of person-centered care to the care processes and protocols at health care providers and facilities for people with Alzheimer's disease and related dementia.
- 4.7 Improve quality of care and care coordination for people with dementia through improved ratings systems and dementia-specific indicators.







- 4.8 Improve care coordination for people with Alzheimer's disease and related dementia through new models of care.
- 4.9 Expand the Dementia Friendly Hospital initiative.
- 4.10 Promote Alzheimer's disease and related dementia-specific training for health professionals and community workforce.





- 4.11 Incentivize entry into geriatric and gerontology specialization and additional training in dementia care.
- 4.12 Increase compensation based on Alzheimer's disease and related dementia-specific training and certification.





## Supporting Caregivers and Families

- Caregiver ratios will change from 8/1 in 2010 to 3.9/1 in 2030.
- Community-based supports, including respite, delay institutionalization.
- Extensive waiting lists for HCBS limit caregiver options for care.
- Employed caregivers face logistical and financial difficulties when providing care.
- Caregivers are at risk for stress, depression and declining personal health.





## **Supporting Caregivers and Families**

 5.1 Promote integration and accessibility of dementia-specific resources through a comprehensive caregiver toolkit and a virtual resource center.



- 5.2 Ensure adequate funding for family caregiver support services including dementia-specific respite through NC Project C.A.R.E.
- 5.3 Continue No Wrong Door Initiative through a collaboration with NC 2-1-1.





## Supporting Caregivers and Families

- 5.4 Enhance employer policies to support family caregivers.
- 5.5 Examine outcomes and impact of home and community-based services programs. (CAP)
- 5.6 Expand the Medicaid Home and Community-Based Services Waiver Program.
- 5.7 Implement best practices for the integration and coordination of home and community-based services.





## Promoting Meaningful Participation in Community Life

- Individuals with dementia are at risk for fraud, abuse, financial exploitation, self neglect and the need for guardianship.
- Families need awareness of advanced directives, including Powers of Attorney, longterm care planning and financing.
- Wandering, falls and driving are safety risks for persons with Alzheimer's and related dementias.





## Promoting Meaningful Participation in Community Life

- 6.1 Increase awareness of legal protections and vulnerabilities of people with Alzheimer's disease and related dementia.
- 6.2 Incorporate legal protection issues specific to people with Alzheimer's and related dementias into health, legal, and financial professional training.







## Promoting Meaningful Participation in Community Life

- 6.3 Examine state statutes to determine adequate legal safeguards and protections for people with Alzheimer's disease and related dementias.
- 6.4 Integrate elder fraud and abuse data to improve services for people with Alzheimer's disease and related dementia.





## Promoting Meaningful Participation in Community Life

- 6.5 Improve home safety resources and workforce capacity.
- 6.6 Enhance public safety and law enforcement outreach around Alzheimer's disease and related dementia.





## Reaching Those Who Are Underserved



- The prevalence of dementia is significantly higher for persons with African Americans, Latinos, and those with Intellectual and Developmental Disabilities (IDD)
- Deaths related to dementia are highly underreported.
- Participation in clinical trials is key to successful research.

 Prevalence data is currently estimated NCIOM



### Reaching Those Who Are Underserved



- 7.1 Support Alzheimer's disease and related dementia research through the establishment of a statewide collaborative registry.
- 7.2 Continue periodic inclusion of cognitive impairment and caregiver modules of the Behavioral Risk Factor Surveillance System (BRFSS)





## Reaching Those Who Are Underserved



- 7.3 Improve prevalence data through accurate death certificate completion.
- 7.4 Improve data on Alzheimer's disease and related dementia prevalence through implementing a statewide data reporting system.





## Next Steps:

- A Living Document for the Division of Aging and Adult Services and NC DHHS.
- NC Alzheimer's Coalition
- Priority setting and new initiatives
- Dementia Friendly America Workshop on October 18 Wake Forest, NC





### For More Information

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