

National Trends and Drivers in Dementia Care

Lori Stevic-Rust, PhD ABPP
Board Certified Clinical Health Psychologist
Artower Advisory Services, LLC



Forces Driving Dementia Care

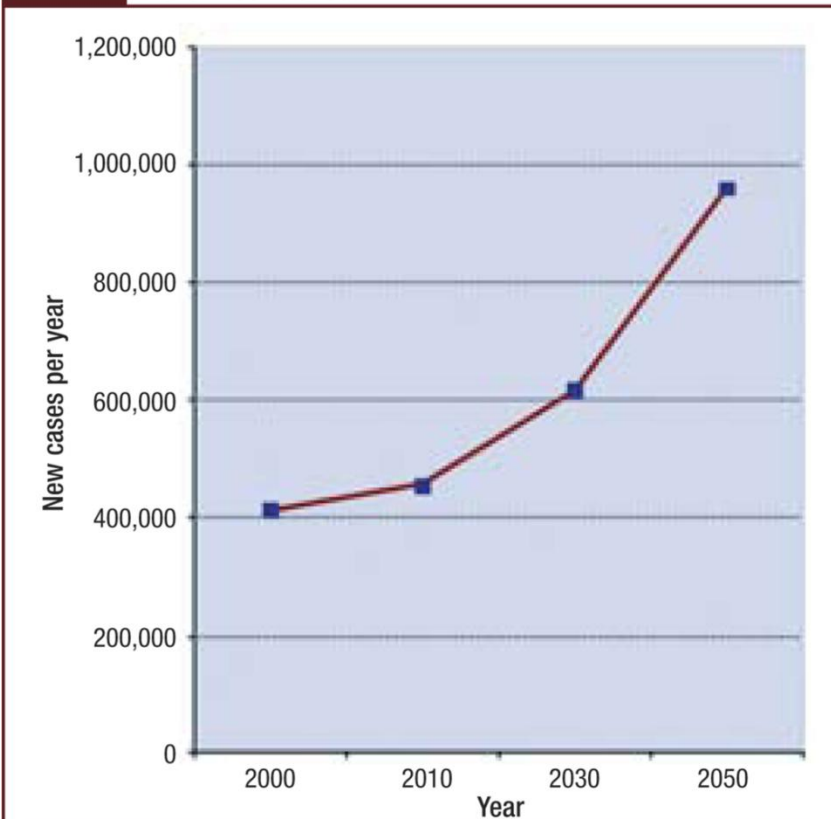
- Prevalence Rates
- Baby Boomers as Patients & Caregivers:
New expectations
- Healthcare Reform

Prevalence Rates

- 35.6 million people worldwide have Alzheimer's disease (AD) and other dementias
- 5.4 million Americans with AD
- Estimates of diagnosed dementia are over 70 percent for residents in long term care facilities and 50 to 60 percent in assisted living facilities

Projected Annual Incidence of Alzheimer's Disease in the US

Figure 1 Projected Annual Incidence of Alzheimer's Disease in the United States



Source: Alzheimer's Association. Alzheimer's disease facts and figures. 2008.
www.alz.org/national/documents/report_alzfactsfigures2008.pdf.

Baby Boomer: Patient and Caregiver

- **Educated Family/Caregivers**
- Caregivers no longer satisfied with facilities/providers that offer safety and physical care
- Facilities/providers are selected based on quality dementia care
- A huge market shift to holistic care

Healthcare Reform

- **Outcome Focus**
- Reduced nursing home placement, emergency department and hospital utilization
- Staff training in dementia care requirements
- Increase need for residential and day care programs to support home care model

Successful Organizations

Dementia Committed Leadership

- Owners and operators who are trained in dementia care and reflect a commitment to the care--- drive successful organizations
- Policy and standards are reflective of dementia care models
- A culture of dementia care that is reflected in the mission, training and operating procedures for the facility

Successful Organizations

Invest in Staff Training

- Move beyond state standards for dementia care and provide ongoing internal training
- Satisfaction scores are driven by family confidence with staff skills in caring for those with dementia
- Staff that are well trained to interface with partners (hospitals, post-acute care, hospice, etc. most successful)

Successful Organizations

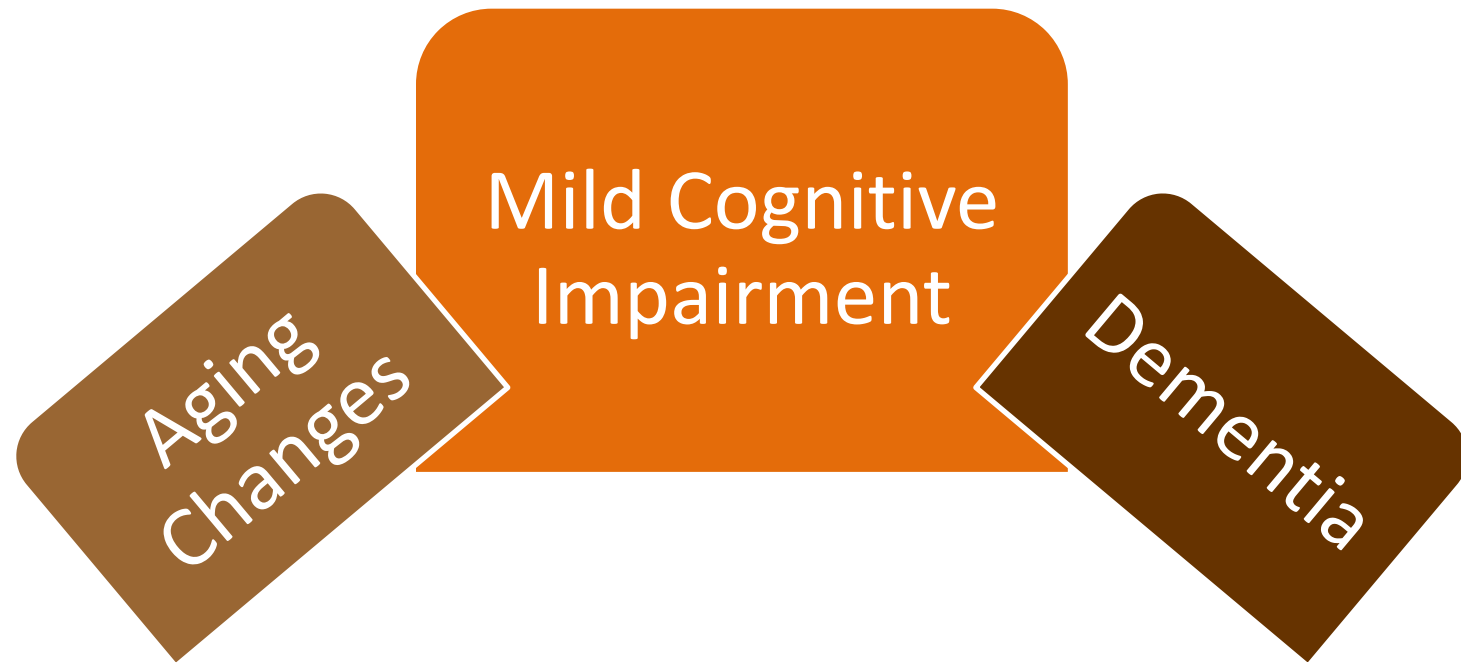
Embrace Emerging Care Models

- Person centered care has become standard --- ***how it is operationally translated*** is the innovative piece
- Evidence based care coupled with specialty trained staff drive the market
- Comprehensive and fully articulated continuum of care model

Emerging Care Models

- Clinical Trend: Emphasis on Early Diagnosis
- Disease to Deficits and Strengths: **Holistic Dementia Care[©]**
- Integration of disease process, ongoing assessment, environment, caregiver and team partners

Clinical Trend



Clinical Trend

- Recognition that dementia is underdiagnosed and undertreated
- “A Don’t Ask and Don’t Tell” policy is out of date
- First step in care is accurate/early diagnosis recognition of mild cognitive Impairment as a stand alone condition or a precursor

Importance of Early Diagnosis

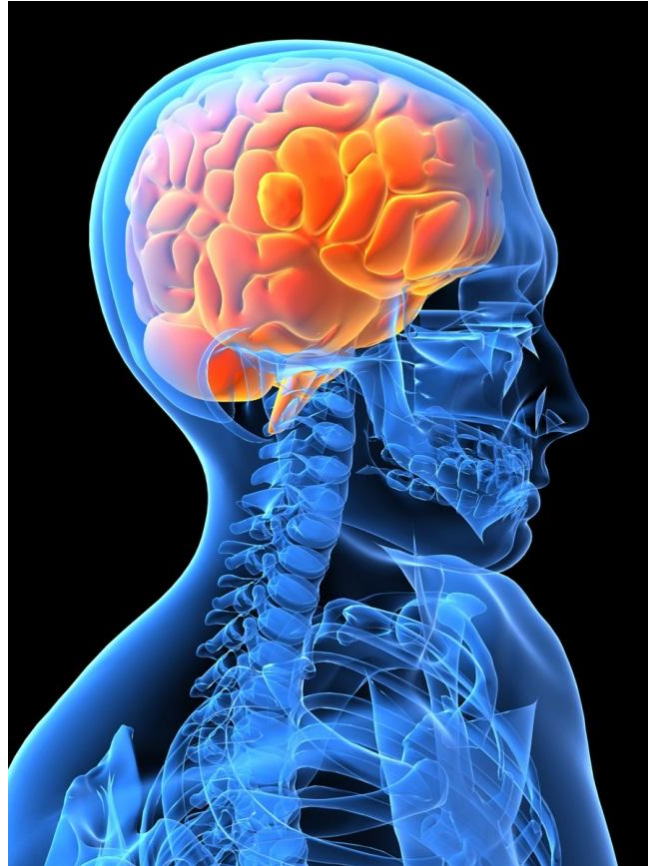
- Better medical care
- Reduce risk for exploitation and safety concerns
- Enrollment in clinical trials
- Patient able to participate in decision making
- Reduce pace of decline with appropriate treatment protocols

Holistic Dementia Care[©]

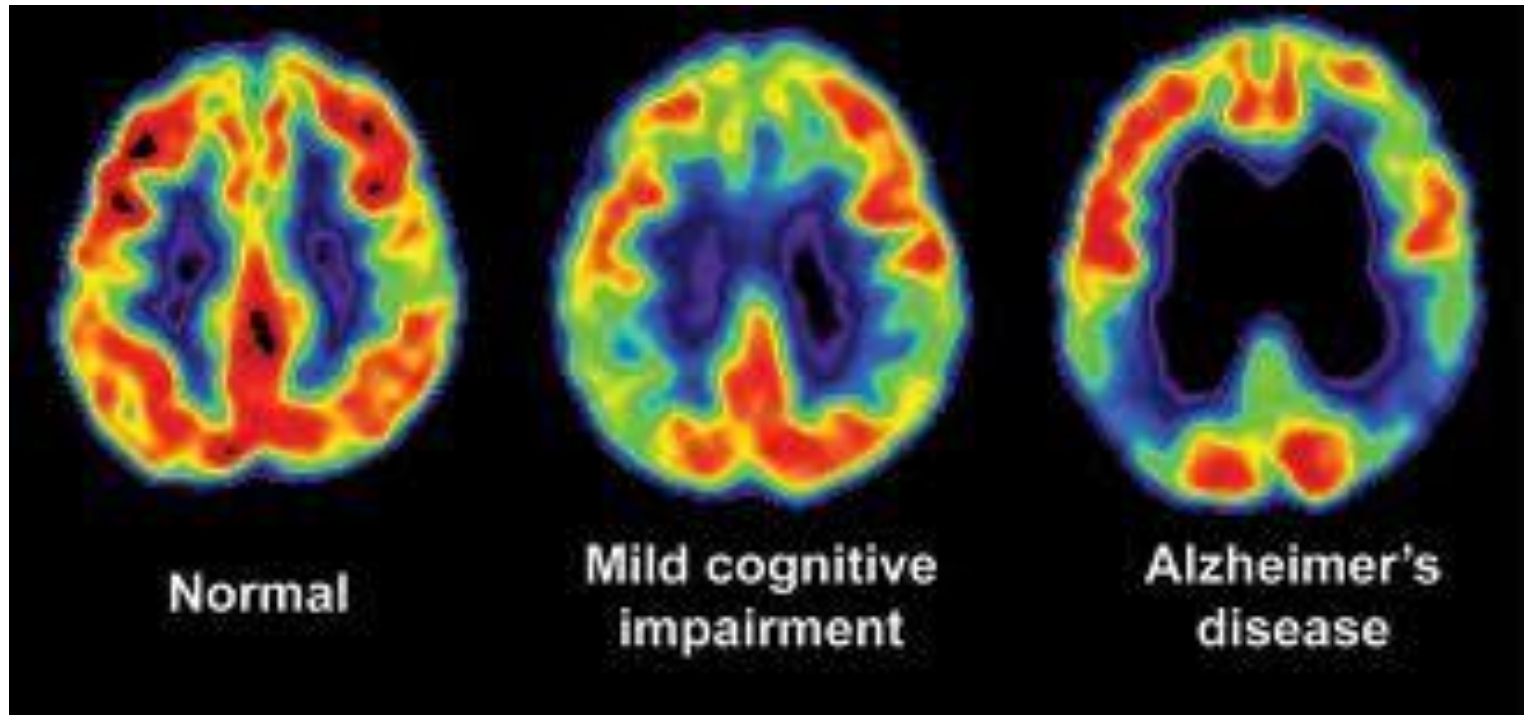


Holistic Dementia Care[©]

Disease to Deficits/Strengths



Disease Specific



Alzheimer's Disease Spreading



Integrated Assessment

- Provide comprehensive standardized assessment from pre-admission through end of life care
- Assessments are operationally translated into functional goals in the care plans and fully addressed with families
- Multidisciplinary team members execute the plan

Therapeutic Environments

- Rooms designed with purpose
- Attention not only to aesthetics (needs of caregivers)
- Attention to brain impairment (functionally through the eyes of resident)
- Open design to maximize supervision and stimulation

Staff Training and Coaching

Poorly Trained Caregivers

- Tend to increase agitated behavior
- Poor disease understanding
- Ineffective communication skills
- Blame individual for behavior---not volitional
- Responsibility is on caregiver to develop strategies to communicate when communication skills are lost

Combined Management Strategies

- Anticipate the antecedents to behavior
- Manage caregiver response
- Use medications in a circumscribed and time limited fashion
- Match care plan to disease model

Pharmacological Strategies

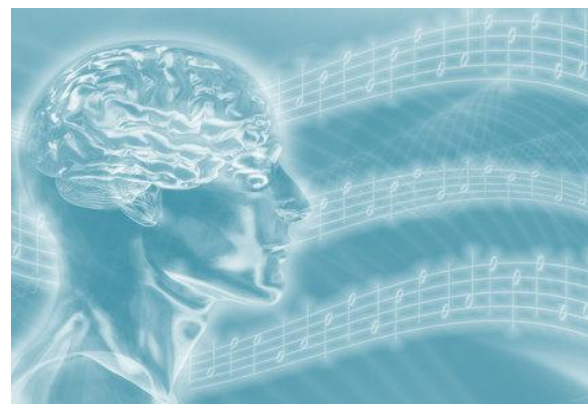
- Donepezil (Aricept) and Memantine combined therapy produce real benefits in slowing clinical decline
- Monotherapy superior to placebo and stopping medications harmful
- Memantine use resulted in less behavioral worsening
 - Howard et al N England J Med 2012, 366: 893-90

Pharmacological Strategies

- Antipsychotic controversy
- Avoid benzodiazepines
- All medications should be time limited and adjusted to the disease course
- Use of antidepressants

Behavioral Strategies

- Sequencing skills are often lost---need reminder and structure with activities
- Use of non-verbal cues
- Evidence based music therapy
- Simplify environment
- Touch, eye contact, tone
- Actively manage pain, dehydration, fear and boredom



Partnerships

- Partner with family
- Mutual education:
- Family caregiver about needs and past interests
- Professional to educate family on disease and long term care planning
- Partner with other healthcare agencies to establish continuum of care

Contact Information

Web site: www.arttoweradvisory.com

Policy blog: www.policypub.com

Dr. Lori ~ drlori@arttoweradvisory.com

Scot Park ~ spark@arttoweradvisory.com