3/31/2016

Nevada ADSSP Baseline Evaluation Report FY15

Sanford Center for Aging

University of Nevada, Reno

Prepared by:

- Kirstin Kramer, Project Manger
- Zeb Gibb, Research Assistant
- Dr. Peter Reed, PI

Nevada ADSSP Baseline Evaluation Report FY15

Summary

As an evaluation contractor on the Nevada Aging and Disability Services Division Alzheimer's Disease Supportive Services Program grant, the Sanford Center for Aging, in collaboration with the initiative's strategic partners, assessed a range of Alzheimer's and Dementia Related Disease (ADRD) services provided in the state of Nevada to establish the baseline reach of services. Specifically, the purpose of this evaluation was to assess the overall state dementia capability in serving individuals with ADRD and their care partners (i.e. how many people are currently being served and by what types of programs). Overall, approximately 5,745 individuals, including both those living with Alzheimer's (3,985) and their care partners (1,760), received community-based care and support services (excluding residential care) between July 1, 2014 and June 30, 2015 (FY'15).

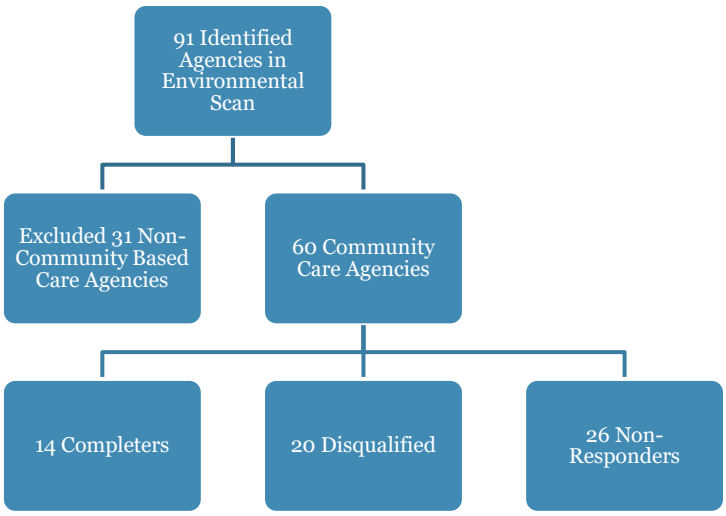
In order to benchmark the level of reach of service for people living with Alzheimer's in the state, we developed an estimate of the number of people that could potentially be in need (or known to be in need) of community-based services. Specifically, this means people who have been diagnosed with dementia and who are not living in residential care. In other words, they know they have dementia and could seek access to community-based care and support. Because Alzheimer's is not a 'reportable' condition, we do not have an exact count to use for this figure. However, national data show that about 1/3 of people living with Alzheimer's reside within some form of residential care (assisted living, memory care or skilled nursing), and that approximately 50% of people expected to have dementia have not been diagnosed. Removing undiagnosed individuals and individuals living in residential care from the Nevada prevalence estimate of 41,000 people results in 13,667 community-dwelling people living with dementia who could potentially benefit from care and support services. With 3,985 estimated to have received services in FY'15, this results in a ***reach/penetration rate of 29%****.*

Establishing Service Reach

Data for this report were gathered from three primary sources: 1) ADSD-funded programs reporting through SAMS (provided by ADSD to SCA); 2) The Alzheimer's Association; and 3) Additional service agencies identified in an environmental scan. Because of the different sources, there are some inconsistencies in data received, but all is helpful in creating this report.

Initial data provided by ADSD includes information reported by 21 different service organizations, with data from an additional 18 organizations pending receipt (overlap between the pending data and that captured by the environmental scan is unclear at this point). Data provided by the Alzheimer's Association included service numbers for all Association core services, but not demographic information on program participants. The SCA-conducted environmental scan of potential services in Nevada initially identified 91 agencies (unique from those included in the other two data sources). Of the 91 identified agencies, 31 were excluded due to providing non-community based care (e.g., residential care). Sixty organizations were identified to be of potential direct assistance to people living with dementia or their care partners. These organizations were contacted via electronic survey and telephone follow-up. The overall response rate for this survey was 56.6% with 14 services reporting some form of demographic and service-related information. Twenty services responded but were disqualified as they reported not serving individuals with ADRD or did not keep records regarding services provided to individuals with ADRD or their care partners. Thus, between all sources (ADSD, Alzheimer's Association, and the survey), data from **37 distinct** organizations is included in this report.

Figure 1. Survey Response Rate



Program Types and Tiers

For the purposes of analysis, SCA classified the various services into two tiers. **Tier 1** captures 6 services that directly impact individuals with ADRD or their care partners, including: 1) Information and Referral (I&R), 2) General ADRD education, 3) Support groups, 4) Respite (Adult Day, Volunteer, Respite and other Volunteer Support), 5) Diagnostics and 6) Case Management. **Tier 2** includes services that are used by people living with dementia, but whose primary function was not directed support for dementia. Tier 2 services include: 1) Nutrition and meal support, 2) Medication therapy management, 3) Transportation, 4) Homemakers, 5) Home modification (ex. carpentry services), and 6) Legal/ Guardian assistance.

Reach of the Alzheimer's Association

One of the most robust service provider for people living with dementia and their care partners is the Alzheimer's Association. Data was supplied from both the Northern and Southern chapters, however, this data did not include demographic information. Therefore, while we do include the numbers of people served by the Association in the overall count of reach/penetration, this data is excluded from the more detailed analysis of demographics of the population served.

The Northern chapter reported serving approximately 3,376 individuals. All of these individuals received services classified within the current report as Tier 1. Of specific interest, the Northern chapter indicated that approximately 31.6% (n = 1,067) of individuals received some form of information/referral service. An additional 42.2% (n = 1,425) received some form of general education or training regarding individuals who have been diagnosed with ADRD. The remaining 36.5% (n = 1,232) were engaged in supportive services such as support groups.

The Southern chapter reported serving 1,187 in FY 15. Similar to the Northern chapter, all services provided by the Southern chapter were classified in the current report as Tier 1. A higher proportion than in the north (88.2%; n = 1,047) received information and referral services. An additional 28.2% (n = 335) received general education / training regarding individuals who have been diagnosed with ADRD. The remaining 3.3% (n = 39) were engaged in supportive services such as support groups.

Overall, the Alzheimer's Association served 4,563 individuals in Nevada with Tier 1 services, including both people living with dementia and their care partners.

Population Served and Service Levels (non-Association program)

Of the 1,182 clients that utilized any of the services identified, which excludes those data provided by the Alzheimer's Association, 86.3% (n = 1,020) had been diagnosed with ADRD. The remaining 13.7% (n = 162) were identified as care partners of people living with dementia.

Figure 2. Percent Receiving Any Service by Status

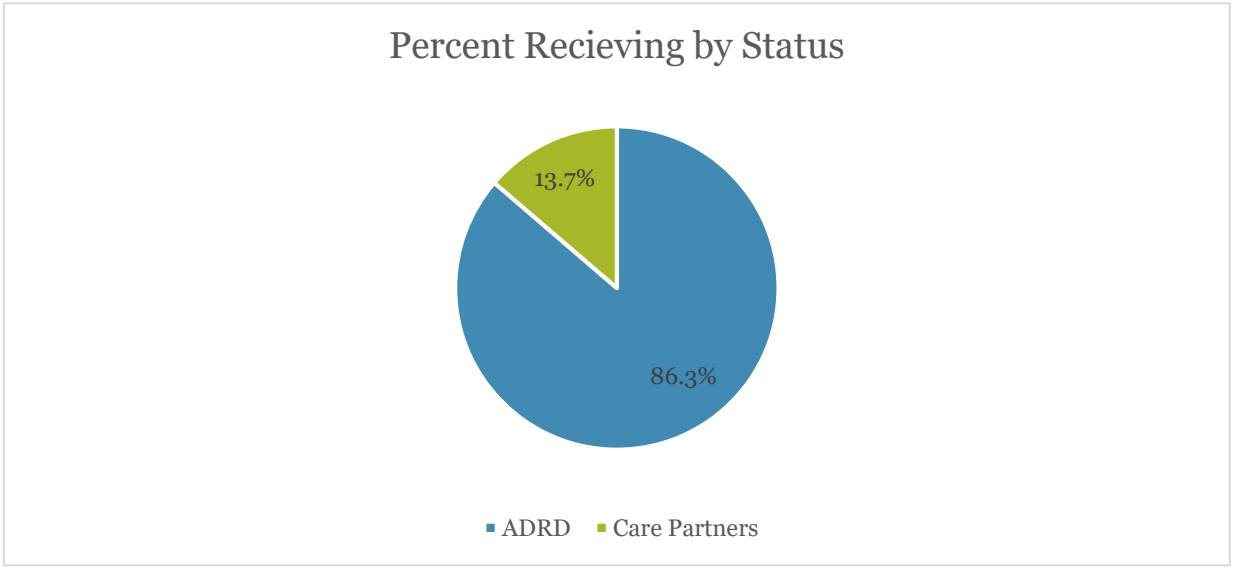


Table 1 provides count data for service levels and demographics. Because of inconsistencies in the data provided by the various organizations, it is not possible at this time to create demographic proportions. However, once we receive the final ADSD data, we expect to have sufficient consistent demographic data to create a more complete profile. Still, in general the demographics mirror those found in the state's overall aging population, with almost half identified clients being female (45.3%), a relative small number of minority clients (22.1%), and a relatively high level of poverty (31.3%). A higher proportion clients were also older (70 – 89; 28.1%). More refined and explicit data will be created once all final data are received from ADSD.

According to the data received from the state, approximately 72% (n = 166) of individuals receiving any service for ADRD (ranging from mild cognitive impairment to more advanced levels of impairment) receive only one service. Approximately 14% (n = 31) of individuals either received an additional one or two services, with the remaining 1% (n = 2) receiving 4 services. Further analysis indicated the largest overlap was within community services, as only 8 (12.5%) individuals received services from either the Cleveland Clinic or the Alzheimer's Association – Southern Chapter and other community resources. Counts for service provided displayed below are not exclusive.

Table 1: Service levels and demographics

	Number of Agencies Reporting	**Number of Clients Served**
Individuals with ADRD	24	1137
Care partners of Individuals with ADRD	5	166
Demographics		
Rural Clients	16	67
Urban Clients	9	162
Gender		
Male	23	471
Female	20	607
Minority Status	20	288
Poverty Status	23	387
Age		
Age < 60	11	161
60 – 69	19	169
70-79	23	247
80-89	21	286
90+	12	144
Tier 1	19	7113
Tier 2	8	936
Service Provided		
Tier 1		
Information and Referral	7	2488
General ADRD Education / Training	6	2267
Support Groups	4	1375
Respite / Volunteer Care	16	396
Case Management	3	91
Diagnostic Services	1	800
Tier 2		
Nutritional Assistance	5	179
Medication Therapy Management	2	428
Transportation Assistance	4	116
Legal Assistance	5	238
Homemaker Assistance	0	0
Home Modification	1	100

Conclusions

Given all available data, it is estimated that 3,985 individuals living with Alzheimer's or dementia received community-based (non-residential) care and support services in Nevada during FY'15. Given assumptions built on national data regarding diagnoses and residential care status, of the 41,000 people estimated to have Alzheimer's disease in Nevada, we estimate 13, 667 would be eligible to access community based services. Thus, during the period between July 1, 2014 and June 30, 2015, the state achieved a service reach of 29% of people living with dementia.

It should be noted that in this initial baseline report, there are several elements that have yet to be developed due to pending data. Once all data is received for this reporting period, the report will be revised to reflect this data. In addition, the next phase of this evaluation will begin assessing the *impact* of the various programs statewide.