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AGING AND DISABILITY SERVICES DIVISION

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SEMI-ANNUAL PERFORMANCE REPORT COVER SHEET

1. Grant #:	Award Number: 90AE0333/01
2. Project Title:	ADSSP Evidence Based Grant: NevadaCare ADSSP 2009 Nevada Evidence-Base Application
3. Grantee Name & Address:	State Of Nevada - Aging and Disability Services Division 3416 Goni Road Carson City, Nevada 89706
4. Telephone #:	702-486-3367
5. Project Period:	09/30/2009 – 09/29/2012
6. Reporting Period:	Semi Annual- Due April 30th, 2011
7. Final Reporting Period:	Ending September 29th, 2012
8. Project Investigator Telephone #:	Shirley Alloway, Resources Development Specialist 702-486-0852
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10. Date of Report:	April 30, 2011
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Introduction:

Nevada was awarded the ADSSP Evidence-based grant called NevadaCare, funded through a cooperative agreement from the Administration on Aging, in September 2009. The purpose of this project is to translate an evidence-based caregiver intervention research program known as *Coping with Caregiving* (CWC) into a series of community-based caregiver psycho-educational group workshops and individual interventions known as CarePRO (Care Partners Reaching Out). The project is a collaboration between: the State of Nevada, Aging and Disability Services Division (ADSD); Cleveland Clinic Lou Ruvo Center for Brain Health; Arizona State University (ASU); Alzheimer's Association Northern CA / Northern NV Chapter (AA-NoNV); and the Alzheimer's Association Desert Southwest Chapter (AA-DSW).

During the first year of this project, NevadaCare partners established the required infrastructure and setup needed to implement the CarePRO demonstration. Partners received training on their specific roles and how they fit into the larger role of the NevadaCare project. Required Institutional Board (IRB) approvals were obtained from the Cleveland Clinic and Arizona State University. The NevadaCare project will continue to work with the required IRBs throughout the course of this project.

This Semi-Annual report covers activities for the first six (6) months of the second year of this project. During this reporting period (September 30, 2010 – March 31, 2011), partners began delivering the intervention with the first wave of participants beginning in October 2010. It is anticipated that 28 series or “waves” will be developed to meet the Nevada goal of serving 224 caregivers.

Activities and Accomplishments

- 1. What did you accomplish during this reporting period and how did these accomplishments help you reach your stated project goal(s) and objective(s)? Please note any significant project partners and their role in project activities.**

During this reporting period, the NevadaCare Project focused on recruiting, call screening and offering the CarePRO intervention. Careful attention was paid to program fidelity with any changes approved through the IRB's.

In October, 2010, AoA scheduled a site visit with Nevada ADSD and program partners to discuss activities from the 2009 ADSSP-EB grant and from the 2008 ADSSP-Innovation grant. AoA guests had the opportunity to visit each of the program partners' sites in Southern Nevada: Cleveland Clinic Lou Ruvo Center for Brain Health, Alzheimer's Association Desert Southwest; and the Aging and Disability Services Division Office.

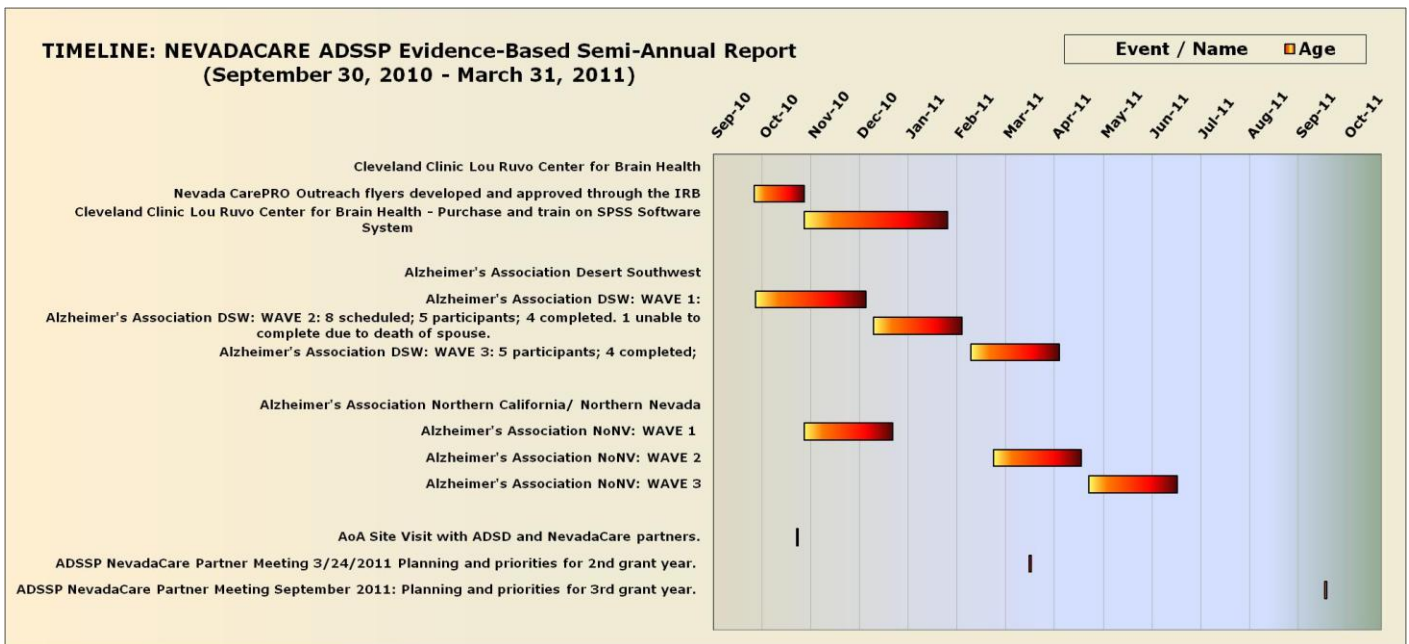
Arizona State University staff was able to provide call screenings for Nevada during the recovery of the Cleveland Clinic Research Assistant, as detailed in the ADSSP Semi-Annual report due October 30, 2010. The Cleveland Clinic Research Assistant is now providing all call screenings for Nevada. ASU created data entry shells for Cleveland Clinic and provided initial training in SPSS data entry for Cleveland Clinic staff.

All program partners are providing outreach and recruitment into the program. Both Chapters of the Alzheimer’s Association in Nevada provide the CarePRO group workshops, individual interventions, and Family Care Consultation to eligible caregivers. In addition, the Chapters also utilize a “promotora” model to assist in education and outreach in rural and multi-cultural communities.

The first waves were scheduled in October in Southern Nevada and November in Northern Nevada with ASU (Dr. Coon) leading initial workshop waves and Chapter staff observing as well as conducting the intervention coach calls. This model is delineated in the project’s treatment fidelity plan. Subsequent waves were offered by AA-DSW and AA-Northern Nevada with ASU (Dr. Coon) providing biweekly supervision to Chapter staff in the initial waves. Chapter staff received bi-weekly supervision from ASU (Dr. Coon) when they conducted the next waves on their own. ASU (Dr. Coon) then began to provide monthly supervision and ad hoc consultation/supervision to fully trained interventionists.

On January 26, 2011, outreach was conducted in Pahrump and an overview of the Promotora program was presented to attendees with at least one individual demonstrating an interest in the program. In February, educational outreach was conducted to the senior community in Mesquite with two individuals expressing interest in becoming Promotoras in their communities. The next step is to provide training to these individuals, which incorporates an overview of the disease as well as available community resources for caregivers and their loved ones.

The timeline below identifies accomplishments during this reporting period.



Below are some examples of how the program benefits specific participants.

- *Example* - A participant was able to effectively use the “Ideal Communication” skill learned in the workshop. The participant’s mother was hospitalized and it was felt the discharge plan was not in her best interest. She received feedback and guidance during a coach call and followed up with hospital staff regarding her mother’s needs. The participant was able to communicate her concerns effectively and in an “assertive” manner. She requested a hospice consult and the hospital social worker was able to link the participant’s mother to these much needed services.
- *Example* – A participant was able to decrease and manage her loved one’s identified behavior (wandering) by utilizing Trigger-Behavior-Response (TBR). The TBR Behavior Log was used to identify a trigger to wandering. The participant discovered that her loved one wandered when she ran out of staple goods (e.g. yogurt). The participant successfully decreased and managed wandering by anticipating needs and ensuring staple goods are well stocked. The participant also implemented daily walks to keep her loved one active during the day. Wandering has decreased and the new strategy continues to be successful.
- *Example* – A participant in Wave #2 experienced the passing of her husband soon after the second workshop. The participant was receiving services through the Alzheimer’s Association and found hope in knowing help was just a phone call away. She was able to access the Chapter’s FCC staff long after her family who stayed in town a few days, then departed back to their homes in California and New York City. Care consultation was provided and referrals made to appropriate grief support groups in the community.
- *Example* – A participant in Wave #3 was assisted by the FCC in procuring adaptive equipment to assist with her loved one, to make meal time less frustrating for the person with dementia. The participant followed up with the resources and recommendations provided by the FCC.

To date, Nevada has provided the intervention to 36 individuals: 16 in Southern Nevada and 20 in Northern Nevada. The majority of participants are female, with 32 females participating in the program and 4 male participants.

The below table details key accomplishments achieved during this reporting period and how they help to reach the stated goals of the project.

Date	Action	How they Help to Reach Stated Goals.
9/30/2010	CarePRO Flyers developed and distributed	<p>Finalized development of CarePRO Outreach flyers developed for Southern Nevada, Northern Nevada, and statewide distribution. Flyers provide advertising and inform agencies about how to refer potential clients into the program.</p> <p>A total of 200 CarePRO flyers were distributed to attendees at a health fair targeting members of the Latino community. Information on CarePRO was disseminated at two senior community centers where a total of 58 individuals were in attendance for education sessions.</p> <p>(See Outreach Attached Flyers)</p>

October 2010	First Wave – Southern Nevada	The first wave began in Southern Nevada and was completed in November 2010.
11/2010	Cleveland Clinic – Purchased data collection software (IBM SPSS Statistics)	SPSS Software facilitates data collection and accompanies data collection methods already established by Arizona State University. Currently, Nevada SPSS needs a module to be completely functional.
December 2010	Second Wave – Southern Nevada	The second wave was completed, with sessions held 12/15/10, 12/29/10, 1/12/11, 1/26/11, and 2/9/11. AA-DSW staff facilitated the wave and conducted coach calls. Eight participants were originally scheduled but only five actually began, with two requesting to participate in a future wave. Of the five who began the wave, one was unable to complete the series due to the sudden and unexpected death of her spouse. This participant was referred to a Family Care Consultant for follow-up and was provided with information on additional grief support services in the community.
2/17/2011	Cleveland Clinic presented information on NevadaCare to ADSD Staff	Cleveland Clinic presented information on CarePRO to ADSD social workers and explained how to recruit into the program. ADSD staff are continuously informed of the ADSSP grant and the benefits but were unable to recruit into the program until the infrastructure was developed and finalized. Cleveland Clinic staff provided information to ADSD staff during a monthly staff meeting, and answered questions about programs offered and how they can benefit social worker clients caring for someone with dementia or Alzheimer’s disease.
3/24/2011	ADSSP Partner Meeting	Program partners met in Las Vegas to discuss best practices, ensure the success of the intervention, brainstorm resolutions for common challenges and barriers, and identify strategic planning and priorities for second grant year. Topics included: <ul style="list-style-type: none"> • Status Reports from Partners • Overall Program Progress • Common Challenges and Barriers <ul style="list-style-type: none"> ○ Recruiting ○ Follow up ○ Budget ○ Planning • Year Two Priorities <ul style="list-style-type: none"> ○ Cross Border Collaborations ○ Expanding Recruitment- Broadening Recruiting Scope ○ Increasing Program Numbers • Publication and Marketing Materials • Strategic Planning • Reporting (See attached Minutes)

2. What, if any, challenges did you face during this reporting period and what actions did you take to address these challenges? Please note in your response changes, if any, to your project goal(s), objective(s), or activities that were made as a result of challenges faced.

Continuing challenges associated with this project are recruitment, planning and coordination of staff time. The Cleveland Clinic Lou Ruvo Center for Brain Health and both Nevada chapters of the Alzheimer’s Association are identified on outreach flyers for program contact. Currently, most recruited individuals come through the Alzheimer’s Association care consultations. The ultimate goal is to recruit throughout the community which provides a wide base for testing the CarePRO intervention.

Information about NevadaCare was provided to the Nevada Aging and Disability Resource Centers and to Nevada 2-1-1 to help with recruitment.

Continuing Challenges:

- **Recruitment-** Despite significant outreach, Nevada continues to have challenges associated with recruitment into the program. Currently, recruitment is mostly completed through the Alzheimer's Associations, however, efforts are underway to significantly expand recruitment throughout the community. One potential recruitment area is through various Adult Day Care facilities.

In an effort to expand recruitment, outreach was conducted throughout rural areas in Nevada. Specifically, information on CarePRO was provided to groups in Pahrump and Mesquite during this quarter. Some individuals recruited this quarter were unable to begin a wave at this time due to conflicts in their personal schedules. Others expressed an interest but did not respond to follow-up calls made by staff.

A total of 200 CarePRO flyers were distributed to attendees at a health fair targeting members of the Latino community. Information on CarePRO was disseminated at two senior community centers where a total of 58 individuals were in attendance for education sessions. Unfortunately, very little response was generated from this activity this quarter.

Moving forward, Nevada plans on reaching out to other organizations to partner with and host CarePRO sessions in their community facilities. Nevada is also working on outreach to rural communities to obtain more positive outcomes. In addition, a plan is underway to combine Arizona and Nevada participants in a CarePRO session on the border of the two states.

- **Referrals** – All program partners are referring into the program. The required set up for recruitment and referrals was accomplished based on the fidelity model.
- **Staffing/ Scheduling-** Identifying and scheduling discussions and meetings based on staff availability. The AA-DSW staff team experienced a leadership transition, as Luis Carrillo, Southern NV Regional Director resigned effective 3/18/11. Recruitment is underway to refill this important position as quickly as possible. During the interim, the Chapter's Executive Director, Deborah Schaus, is directly supervising the Las Vegas staff team and program operations.
- **IRB Setup and Approval** - This psychosocial project requires specific IRB setup at both the Cleveland Clinic and Arizona State University for approval. Changes necessary for the CarePRO demonstration can require several weeks for approval due to IRB scheduled review times and inherent procedures associated with approval from both IRBs. However, ASU and Cleveland Clinic continue to

communicate regularly and work closely to facilitate IRB updates. As required, all project staff have received CITI training (several hours of certified human subjects training) prior to working on the project.

- **Retention Concerns** – Ensuring individuals attending each session complete the CarePRO demonstration. To accomplish this, incentives were devised based on the experience obtained from the Arizona intervention to encourage completion for all sessions. Nevada has a high retention and follow-up rate of individuals attending the intervention. To date, only one person has dropped out, and that was due to the death of the spouse.
- **Projected Goals** – Nevada continually monitors outcomes to ensure target numbers are met.

3. How have the activities conducted during this project period helped you to achieve the measurable outcomes identified in your project proposal? Please note in your response, information on evaluation outcome measures and systems development measures, as approved in your grant application and developed in conjunction with AoA and AoA-provided technical assistance.

All activities continue to help Nevada reach its defined goals. Outreach information is essential to inform the community about specific programs that provide the desired benefits. The promotora outreach model will help convince potential individuals of this benefit.

Activities for this reporting period focused on delivery of the intervention which includes, outreach, recruitment, retention, follow-up, and other coordination necessary to ensure the functioning of each wave.

4. What was produced during the reporting period and how have these products been disseminated? Products may include articles, issue briefs, fact sheets, newsletters, survey instruments, sponsored conferences and workshops, websites, audiovisuals, and other informational resources.

Products during this reporting period include: the intervention manual; the outreach flyer; ADSD newsletter articles; workshops; Semi-Annual Report; and demographic data.

The newsletter is distributed to all ADSD grantees, approximately 200, in both Northern and Southern Nevada. The Nevada ADSD webpage is being redesigned to include specific projects and detail current performance and activities related to these projects.

Appendix

1. CarePRO Flyers Samples (General, Northern Nevada, Southern Nevada)

CarePRO: Care Partners Reaching Out



Developing the Skills Needed to Care for Someone with Dementia or Memory Loss

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- ◆ Are you a family caregiver residing in Nevada that helps care for someone with dementia or memory loss?
- ◆ Do you provide an average of 4 hours of care or supervision per day for that individual?
- ◆ Do you find caring for your loved one increasingly demanding of your time and energy?

**If so, CarePRO may be able to help you.
Through our free workshops, you will learn:**

- About dementia and its impact
- How to manage your frustration, irritation, and stress
- How to communicate with your loved one
- How to take better care of your own health

**For more information, please call:
CarePRO Program to assist family caregivers**

Alzheimer's Association 1-800-272-3900

- Northern Nevada Office 775-786-8061
- Southern Nevada Office 702-248-2770

**Cleveland Clinic Lou Ruvo Center for Brain Health
702-483-6023 or 888-810-5687
Please see reverse for details**

Updated 10/19/10

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