

Nevada Task Force on Alzheimer's Disease 2021 State Plan – DRAFT Recommendations (consolidated) November 2020

Recommendation #1: Statewide Information and Referral System

(Revised and Approved, 5/14)

Sustain a statewide information and referral system for people living with Alzheimer's disease and other forms of dementia, their caregivers, and their families to enable them to connect with local case managers and support services. It is the expectation that the approaches, content, and messaging within these resources help promote well-being and preserve dignity. Supportive services would include no wrong door partners, including but not limited to: Nevada 2-1-1, Nevada Aging and Disability Resource Center (ADRC), also known as Nevada Care Connection (NCC), Family Resource Centers (FRC), and other related informational systems (e.g. websites, helplines, and other technologies)

Indicators

Monitor collaborations between resource centers, including but not limited to: Nevada Care Connection; Northern California and Northern Nevada Chapter of the Alzheimer's Association; Southern Nevada Region, Desert Southwest Chapter of the Alzheimer's Association; University of Nevada, Reno Nevada Caregiver Support Center, to help facilitate access and streamline processes into services and supports for people living with dementia and their care partners. The Aging and Disability Services Division (ADSD) will monitor the number of contacts made by outreach programs and the number of inquiries regarding information or services relating to Alzheimer's disease and other forms of dementia, received by Nevada Care Connection Resource Centers. In addition, ADSD and partners will monitor and report the number of "hits" on information websites, including nevadacareconnection.org, alz.org, nevadacaregiver.unr.edu. Efforts and collaborations will be reported by partners to the Task Force at least once

per biennium.

Potential Funding

Older Americans Act funds. Grants, donations, and/or gifts.

Recommendation #2: Telehealth

(Edited and approved, 9/10)

Support expanded access to telehealth services throughout the state to enhance early detection and diagnosis of care recipients with dementia. Support the utilization of telehealth to promote caregiver well-being and access to care, especially in rural Nevada. Utilize the statewide information and referral system (Rec #1) to include telehealth providers for persons with ADRD and connect to the network of providers convened by the Nevada CAN Telehealth Action Team.

Indicators

Monitor Telehealth projects across the state to determine if they are: 1) available and accessible; 2) being utilized effectively and efficiently; and 3) providing information/access to follow-up resources. Review evaluation of programs to ensure better quality of life for patients living with dementia and their caregivers.

Potential Funding

ADSSP | State of Nevada: ADSD through the Older Americans Act | Federal Government: HRSA GWEP programs (in progress at UNR & UNLV), ¹HHS (Office of Science and Technology, Assistant Secretary HHS Lance Robertson). Grants, donations, and/or gifts.

¹ Emerging Technologies to Help Aging Americans Maintain Their Independence, Office of Science and Technology Policy, Assistant Secretary of HHS Lance Robertson, tasked with expanding rural broadband to ensure older Americans in all parts of the country could benefit from being digitally connected.

Recommendation #3: Cultural Competence

(Revised and Approved, 7/9)

To help ensure successful processes and outcomes, advocates would benefit from engaging in non-stigmatizing sensitivity training, as well as proactive

efforts to gain input from affected communities. Specific activities might include, without limitation:

- 1) Promoting Implicit Bias testing. Encourage personnel involved in public-facing engagements with the Alzheimer's community to take Implicit Bias assessments.
- 2) Promoting listening sessions. Before developing campaigns, entities conducting outreach should engage Alzheimer's community members to gauge impressions on aging services and healthcare experienced by its culturally diverse and marginalized members.
- 3) Promoting development and use of culturally-competent Toolkits as a resource to support entities providing awareness and outreach campaigns for the Alzheimer's community.

These activities align with the understanding that person-centered care involves non-stigmatizing, customized outreach approaches to address a multicultural population (i.e. reflecting differences in ability, generation, ethnicity/race and sexual orientation/gender identity). Adopting this approach has been shown to increase a person's receptiveness to outreach efforts, improve the quality of their care and minimize their experienced health disparities.

Indicators

- Monitor number of created, adopted and disseminated culturally sensitive Toolkits.
- Monitor number of service providers that report having participated in cultural sensitivity training

Potential Funding

National Resource Center on LGBT Aging; US DHHS Office of Minority Health US; and Nevada DHHS – Aging and Disability Services Division Collaboration with different cultural and ethnic focused organizations Philanthropic sector; grants, donations and/or gifts

Recommendation #4: Affordability (Retired to Appendix 3/12)

Recommendation #5: Outreach to Physicians

(Edited and approved 9/10)

Continue to support collaborations between medical professionals and medical associations to adopt and promote use of best-practice

diagnostic guidelines for Alzheimer's disease and other forms of dementia, increase access to quality care, and to encourage participation in available clinical trials. Support a meaningful and effective communication continuum between these professionals and community-based service organizations, including referrals to community-based resources.

Specifically, support statewide partnerships and collaborations to increase access to early diagnosis of Alzheimer's and other dementias, and to expand dementia care education across primary care practices and health systems in Nevada. These initiatives will include, but are not limited to, the Geriatric Workforce Enhancement Programs (GWEPs) through the UNR and UNLV schools of medicine, the Sanford Center for Aging, Project ECHO Nevada, the Cleveland Clinic Lou Ruvo Center for Brain Health, the UNR Dementia Engagement, Education and Research (DEER) Program's Dementia Friendly Nevada initiative, as well as the partnership between the Alzheimer's Association and the Nevada Division of Public and Behavioral Health.

Indicators

Data gathered through the CDC Behavioral Risk Factor Surveillance System survey modules on subjective cognitive decline and caregiver burden should be consistently gathered analyzed and reported each year in Nevada. Alzheimer's Association physician referral data reports, and other data on early detection/diagnosis, as available.

Potential Funding

Federal/state, foundation grants. Private gifts.

Recommendation #6: State Match Program for APRNs

(Retained and Approved, 3/12)

Support the establishment of a state match program between the State's Department of Health and Human Services, collaborating with the State Board of Nursing, and federal partners. This match program is intended to address the state's health provider shortage

in rural and frontier communities. Match money, which could be offered as loans or scholarships, would be made available to APRNs, who commit to the specified loan or scholarship terms and required service provisions as they relate to providing health care services to underserved rural and frontier areas in Nevada.

Indicators

Primary Care Workforce Development Office (DHHS), working with the State Board of Nursing, would monitor the number of APRNs serving under-served rural and frontier areas in Nevada.

Potential Funding

Health Resources and Administration Grants. Other appropriations. Grants, donations, and/or gifts.

Recommendation #7: Care Pathways (Retired to Appendix as Care Pathways **OR** Revised to include focus on Research Consortium – see suggestion below?)

Support the Cleveland Clinic Lou Ruvo Center for Brain Health in its establishment of a Nevada Consortium to promote current and future research in Nevada. Expand the ADRC website to specifically include information on Alzheimer's research that contains information about current research and a registry that allows individuals to register to participate in clinical research.

Justification: *Index for future implementation.* Cleveland Clinic's status as an Alzheimer's Disease Research Center (if granted a P20 grant) can change the scope of the recommendation as well as engagement capabilities. We will find out May 2020 whether we are awarded this grant.

Suggested Revisions: Please provide the text for your suggestions on how to revise the recommendation (and be sure to include each of the following required elements):

Recommendation: To be determined.

1. Model this recommendation on the *Arizona Alzheimer's Consortium* (AAC) the nation's leading model of statewide collaboration in Alzheimer's disease research. Established in 1998, the Consortium

capitalizes on its participating institutions' complementary strengths in brain imaging computer science, genomics, the basic and cognitive neurosciences and clinical and neuropathology research to promote the scientific understanding and early detection of Alzheimer's disease and find effective disease-stopping and prevention therapies. It also seeks to educate Arizona residents about Alzheimer's disease, research progress in the state and the resources needed to help patients, families and professionals manage the disease. The Consortium is determined to find effective treatments to halt the progression and prevent the onset of Alzheimer's disease in the next 12 years. Members include ASU, Banner Alzheimer's Institute, Banner Sun Health, Barrow Neurological Institute, Dignity Health, Mayo, tgen, UofA. Website: <http://azalz.org/>

2. Remove the Nevada Research Consortium site from ADRC website to an independent website to promote its own identity and authority.

Recommendation #8: Long-term Care

(Retained and Approved, 5/14)

Continue to review current funding and funding streams to support the development of quality long-term care options for people living with Alzheimer's disease and other forms of dementia in Nevada. Provide funding or incentives to encourage long-term care providers to increase capacity for placement of individuals with Alzheimer's disease and other forms of dementia. Also emphasize person-centered planning that helps promote well-being and preserves dignity, as well as helping residents, their families, and caregivers, feel and experience respect, dignity, support, value, and inclusion in everyday community life.

Indicators

Monitor the number of long-term care options for persons with Alzheimer's disease and other forms of dementia across the state, as well as success of long-term care dementia training programs such as the Nevada Department of Veterans Services *Bravo Zulu* program, and others as appropriate.

Potential Funding

Medicaid expansion through Home- and Community-Based Services Waiver. Expansion through the DHHS Behavioral Rate for skilled nursing facilities. Increased supplemental SSI rate. Tax incentives. Grants, donations, and/or gifts.

Recommendation #9: Caregiver Support

(Edited and Approved 9/10)

Provide caregivers with information about and access to evidence-based/informed education, support services, and resources to: 1) promote knowledge and understanding of Alzheimer's disease and other forms for dementia to best support people living with dementia, 2) provide and expand respite services for family and informal caregivers of persons with dementia, and 3) enhance caregiver well-being. These services include, but are not limited to, family care consultations, solution-focused caregiver support groups, educational programs and services, respite programming, and evidence-based programs as included in the Nevada Dementia Supports Toolbox. Support efforts to promote and fund comprehensive caregiver education and services that are provided by many organizations, including, but not limited to: AARP, Alzheimer's Association, Catholic Charities, the Cleveland Clinic Lou Ruvo Center for Brain Health, UNR DEER Program, Nevada Department of Veterans Services, Nevada Senior Services, UNR Nevada Caregiver Support Center and UNR Sanford Center for Aging.

- Broaden the eligibility requirements for programs and grant funding so that more families may benefit from them regardless of financial status or age.
- Support the Nevada Dementia Friendly initiative and the work of the state's Dementia Friendly Community Action Groups throughout Nevada.
- Improve access to support services and programs by sustaining a statewide information and referral system (recommendation #1) for families, caregivers, and individuals with Alzheimer's disease and other forms of dementia.

Indicators

Aging and Disability Services Division (ADSD) and Division of Public and Behavioral Health (DPBH) will track and compile data collected from their respective funded programs. ADSD will annually monitor program availability, waitlists, number of consumers/clients served, and hours of caregiver support services provided through ADSD- funded programs. Key partners and other dementia-related organizations that are working in alignment to support these efforts will also be asked to report on service delivery and outcomes from caregiver support programs.

Potential Funding

Fund for a Healthy Nevada. Retired and Senior Volunteer Group (RSVP). Older Americans Act Funding. The Alzheimer's Association. Grants, donations, and/or gifts. Explore additional funding opportunities to support caregiver programs once existing funds expire.

Recommendation #10: Dementia Training

(Retained and Approved, 5/14)

TFAD encourages the State of Nevada to identify, adopt, and/or develop, a consistent, high quality, comprehensive dementia training program that aligns with NRS 449.094 requirements and current national practice recommendations. This program must be made available to all nursing homes through leveraging key partners to encourage and implement the program, including program delivery and evaluation.

Indicators

A high-quality, comprehensive dementia training program is identified or developed and made available to all nursing homes statewide. The identified or developed program is encouraged by key partners. The program is adopted and implemented by an increasing number of nursing homes over a three-year period.

Potential Funding

State appropriation and/or state grants for the proposed dementia training initiative. Grants, donations, and/or gifts.

Recommendation #11: Volunteers

(Edited and Approved 9/10)

Encourage collaboration between various organizations including non-profits, service organizations, health care institutions, and universities, which have existing programs, education, and practices that address Alzheimer's disease

and other forms of dementia to recruit and train volunteers in delivering support programs and services. This commitment to education and outreach needs to include rich and abundant train-the-trainer models that then permit and encourage volunteers to share knowledge, information, tools and resources in communities while finding, recruiting, and training local residents to continue to learn more about Alzheimer's disease and other forms of dementia. Increased outreach and personal connections among volunteers and community members will help de-stigmatize and reduce fear and misunderstanding associated with dementia through open-conversations and reliable information.

In supporting age- and dementia-friendly communities, volunteers will learn how to promote each person's well-being, as well as preserve their personal dignity and respect in everyday community life. It is essential to discount the myth that volunteers lack the knowledge and capabilities to fulfill this critical role.

Indicators

Monitor and correspond with non-profits, service organizations, healthcare institutions, and universities that recruit volunteers to learn the number of volunteers recruited, the types of training they offer and how many volunteers they train, as well as to track key services being provided. Determine which additional trainings and services might be needed to expand volunteer education and opportunities.

Potential Funding

Grants, donations, and/or gifts

Recommendation #12: Guardianship

(Retained and Approved, 5/14)

Awareness of Alzheimer's disease and other forms of dementia is crucial to effective representation of legal services clients. Their need to be protected from exploitation includes, but is not limited to, such areas as: estate planning, guardianship, and decision-making. Students entering law-related professions, including, but not limited to, attorneys, paralegals, and related careers should be offered, through their course of study, opportunities to learn, discuss, and consider the specifics of Alzheimer's disease and other forms of dementia. This

includes, but is not limited to, professional responsibility for effective representation of clients with capacity issues and estate planning for clients, who are at risk of exploitation, undue influence, or capacity concerns.

After completion of course study, licensed professionals are urged to pursue continuing legal education (CLE) in the area of Alzheimer's disease and other forms of dementia. The State Bar of Nevada (the licensing entity for Nevada attorneys), the Board of Continuing Legal Education, as well as trade associations, such as the Washoe County Bar and Clark County Bar Associations, are encouraged to promote awareness and education related to Alzheimer's disease and other forms of dementia. These CLE programs would provide legal professionals with ongoing education about recent developments, research, and treatments about Alzheimer's disease and other forms of dementia, including, but not limited to, application to issues of independence, decision making, and advanced care planning. Further, TFAD supports the offering of CLE credits for dementia-related, medically-based courses for legal professionals that could satisfy ethics credits for these licensed professionals.

Indicators

Increased number of quality educational opportunities, both pre- and post- professional education or training, which are offered in schools of post-secondary education and increased number of students who complete this coursework. Syllabus or other information related to topics covered at UNLV's William S. Boyd School of Law related to encouraged topics of concern. Continuing Legal Education offerings in the topic area, as well as statistics of professionals, who have taken such training to complete requirements or to advance ongoing education. Determine number of courses offered to interested stakeholders by qualified members of the legal community.

Potential Funding

State appropriations to higher education. Funding from providers and/or state agencies. Grants, donations, and/or gifts.

Recommendation #13: Hospital Transitional Care Practices (Edited and Approved 9/10)

Ensure high quality hospital-to-community (i.e., home and long-term care) care transitions programs are available to persons living with dementia and their caregivers, with key elements including: care/discharge planning, care management, information on community resources, wrap-around services and period follow-up check-ins and assessments. One such program specific to Alzheimer's and dementia currently available in Southern Nevada is Nevada Senior Services' *Hospital-to-Home program*. Another relevant resource is the Community Paramedics program (active in Humboldt County). To explore new innovations, as well as expand and support existing efforts, the Nevada Department of Health and Human Services (DHHS) should investigate federal funding opportunities through the Centers for Medicare and Medicaid Services and the CMS Innovation Center, as well as others. Opportunities to support more widespread use of a care transitions programs should be explored by seeking and establishing key partnerships and identifying available resources.

Indicators

- Monitor the number of care transitions programs available across Nevada's counties, including those connected to rural hospitals, such as the Community Paramedics program.
- Monitor the ongoing process and impact data of the *Hospital-to-Home* program, with updates from Nevada Senior Services.

Potential Funding

Collaboration within DHHS, including between ADSD, Department of Health Care Financing and Policy (DHCFP), DPBH, and other appropriate State agencies. Federal innovations and funding opportunities. Grants, donations, and/or gifts.

Recommendation #14: Veterans and Families (Edited and Approved 9/10)

Support the continuation and creation of initiatives to offer culturally-appropriate services to older veterans. In particular, TFAD encourages programs relating to veterans living with dementia and their families,

including the ongoing implementation of the *Bravo Zulu: Achieving Excellence in Relationship-Centered Dementia Care* program for professional and family caregivers. Further, promote the continued viability and quality of care being offered by Nevada's two veterans' homes, both in Northern Nevada and Southern Nevada.

Indicators

Monitor the implementation of veteran-focused dementia programs, *Bravo Zulu* and the services being offered by Nevada's Veterans' Homes. Ensure the Nevada Legislative Subcommittee for Veterans received updates as appropriate.

Potential Funding

Nevada Department of Veteran Services. Federal sources. Grants, donations, and/or gifts.

Recommendation #15: Driving and Dementia

(Edited and approved 9/10).

Support the standardization of the system of driver evaluation. Improve the infrastructure, services, and support for persons with dementia whose driving ability may be compromised. This includes developing and implementing: 1) a uniform set of evidence-based screening tools for healthcare providers, first responders, and caregivers and 2) a standardized evidence-based evaluation tool for use by the Department of Motor Vehicles (DMV), and 3) dissemination of information regarding driving and safety for persons with dementia as well as development and delivery of relevant training to help support healthcare and DMV professionals.

Information disseminated should convey how to address the multi-faceted needs and concerns of persons with dementia and those who care for them. Specific information should include signs that an individual's driving ability might be compromised and how to access relevant resources to address this concern. Such information should be available on websites, as well as be distributed in printed materials to health care and social service providers, first responders, families, caregivers, and the general public. Engage healthcare providers and

first responders to evaluate the utility of the recommended screening tools.

Promote age- and dementia-friendly communities, which provide alternative transportation resources, through volunteerism and public-private partnerships, to maximize an individual's independence and assure public safety.

Indicators

Communicate and coordinate with the DMV to ensure their awareness of needs and resources. Monitor input from health care providers and first responders about the utility of recommended screening tools.

DMV will monitor the number of accidents and fatalities and collect data on: the age of drivers; the number of referrals by health care providers, first responders, and caregivers to the DMV; and the number of evaluations conducted by the DMV following referral. DHHS will facilitate the distribution of informational materials related to driving and dementia and how the distribution of information can be expanded and/or improved. DHHS will monitor the number and usage of alternative transportation resources and provide this data to TFAD.

Federal funding. DMV. Nevada Department of Transportation (NDOT). Regional Transportation Commission (RTC). ADSD grants. Grants, donations, and/or gifts.

Recommendation #16: Community Awareness

Edited and Approved 9/10

Promote Dementia Friendly community awareness programs which are designed to increase knowledge, understanding and access to dementia-related information and supportive resources. Awareness programs serve to reduce stigma around a diagnosis of dementia, engage care partners and offer support to individuals living with dementia over the course of their illness. These programs should also provide information to enable those affected by dementia to become partners in the search for effective therapies through participation in research, evidence-based interventions, and clinical trials.

Dementia Friendly community awareness programs may include but are not limited to:

- a) Initiatives to promote brain health for all individuals and reduce risks associated with modifiable lifestyle factors
- b) Overview of dementia including types, early symptoms, diagnosis, treatment and course of illness
- c) Community resources, educational programs and social services including evidence- based programs to support for individuals living with dementia and care partners
- d) Highlight opportunities for individuals living with dementia to advocate for their well- being and participate in meaningful engagement in community life
- e) Educational resources to increase awareness about research opportunities and benefits of clinical trials with special consideration for those in underserved, minority communities

The target audience for community awareness programs includes individuals living with dementia, family care partners, professional care partners, businesses, faith-based communities, first responders, government agencies, social service organizations, community groups and interested individuals. Programs promoting community awareness are offered statewide by various organizations and groups including Dementia Friendly Nevada Community Action Groups, Alzheimer's Association, Cleveland Clinic Lou Ruvo Center for Brain Health and UNR's Dementia Engagement, Education and Research (DEER) Program. Various outreach strategies can be used to promote these programs such as broadcast/print interviews, articles in newspapers/magazines/websites and postings on social media sites. The Dementia Friendly Nevada website promotes community awareness programs scheduled in various communities statewide and offered online.

Indicators

Monitor the number and types of dementia-related community awareness presentations including those listed on the Dementia Friendly Nevada website and offered through Dementia Friendly Community Action Groups, Sanford Center, DEER Program, Dementia Friends, Community Awareness Training, Alzheimer's Association and Cleveland Clinic Lou Ruvo Center for Brain Health.

Potential Funding

Federal/state grants. Foundation grants. Private gifts.

Recommendation #17: Organizational Outreach

(Edited and Approved 9/10)

Encourage the business, government, social service and non-profit sectors to:

- Incorporate dementia-related information/resources into existing employee assistance programs to offer specialized assistance to individuals living with dementia and care partners
- Offer dementia awareness programs to their employees such as *Dementia Friends* and *Dementia Friendly Community Awareness Training (CAT)*
- Promote education regarding brain health initiatives
- Develop partnerships with statewide Dementia Friendly Community Action Groups

Indicators

Monitor dementia friendly activities and collaborations with businesses, government agencies social service organizations and not-for-profit entities

Potential Funding

Employers and employer organizations. Grants, donations and/or gifts.