

Nevada Task Force on Alzheimer's Disease

State Plan Recommendations Planning

Recommendation #: 7

TFAD Member Lead(s): Chuck Duarte

Current Recommendation as Stated: Caregiver Support

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 of dementia
- 2) Increase understanding of effective approaches to care and support;
- 3) Provide and expand respite services for family and informal caregivers of persons with dementia; and
- 4) 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, NDVS, Nevada Senior Services, UNR Nevada Caregiver Support Center and UNR Med 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 Dementia Friendly Nevada 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.

Determination: Do you propose that for the 2021 State Plan this recommendation be:

- 1) Retained as is
- 2) Retired to the Appendix (it has been accomplished or is no longer

- relevant)
3) Revised / Updated ✓

Justification: If you propose revising this recommendation, what is your rationale for your suggested changes:

According to the 2022 Alzheimer's Disease Facts and Figures report, Nevada has more than 48,000 unpaid caregivers providing 79,000,000 hours of unpaid care annually with an estimated value of almost \$1.35 billion. Nevada has the tenth highest unpaid caregiver hours per caregiver (almost 32 hours per week per caregiver).

In addition, that same report indicates that the caregivers themselves suffer from their own health conditions. More than 80% of Nevada caregivers report at least one chronic medical condition, and more than 18% suffer from depression.

With the anticipated growth of ADRD in Nevada, the burden of unpaid caregiving will only increase. To keep up, the 2022 Alzheimer's Disease Facts and Figures report indicates that Nevada needs to increase the number of caregivers for those living with ADRD by 42% by 2028, from 15,580 home health aids and caregivers to more than 22,000.

Keeping up with this growing demand means we must not only increase the numbers of paid and unpaid caregivers, but must also support those who are already providing care to individuals living with ADRD through respite and training programs.

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:**

Revise the recommendation adding information on caregiving in Nevada from the 2022 Alzheimer's Disease Facts and Figures report. Revise as follows:

An estimated 48,000 caregivers are providing 79 million hours of unpaid care to Nevadans living with dementia. 80.2% of those caregivers have chronic health conditions and 18.3% have depression.

Caregiver support interventions can help improve the health and well-being of dementia caregivers by relieving the negative aspects of caregiving. In

addition, effective support for caregivers can also delay nursing home admission of the person with dementia by providing caregivers with skills and resources (emotional, social, psychological and/or technological) to continue helping their relatives or friends at home. (Source: Alzheimer's Association Facts and Figures 2022)

To further this recommendation, the TFAD supports providing caregivers information about and access to evidence-based and evidence-informed education, support services, and resources to:

- 1) Promote knowledge and understanding of Alzheimer's disease and other forms of dementia;*
- 2) Increase understanding of effective approaches to care partnering approaches to support people living with dementia;*
- 3) Provide and expand respite services for family and informal care partners of people living with dementia; and*
- 4) Emphasize the importance of maintaining care partners' health and well-being.*

The support services include, but are not limited to, family care consultations, care partner support groups, educational programs, including those focused on the proactive promotion of family care partner health, and respite care.

The TFAD shall also support efforts to promote and fund comprehensive care partner education and services that are provided by many organizations across the state.

The TFAD seeks to improve access to support services and programs for family care partners and people living with dementia including, but not limited to, the following:

- Broadening the eligibility requirements for programs and grant funding so that more families may benefit from them regardless of financial status or age.*
- Supporting the work of organizations across the state that are focused on improving the lives of those living with dementia, their care partners and families.*
- Sustaining a statewide information and referral system (See Recommendation #1) for families, caregivers, and individuals with Alzheimer's disease and other forms of dementia.*

The TFAD, ADSD and the Division of Health Care Financing and Policy (DHCFP, or Nevada Medicaid) shall explore effective Home and Community-Based programs operating in other states. The goal will be to revise existing programs to better identify and deliver individualized training to family

caregivers that may be offered through a home visit, secure electronic communication, web-based training or other ways that are flexible, accessible and meaningful for the caregiver.¹ In addition, ADSD shall conduct an awareness campaign around eligibility of current respite care programs.

- **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. Current indicators should be retained.

The DHHS Office of Analytics shall report at least biannually data from the Nevada BRFSS Caregiver Support survey module. In addition, the Office shall conduct a longitudinal review of past BRFSS caregiver surveys to better track progress of this recommendation. In addition, data from this survey shall be routinely included in the Nevada Elders Count report.

- **Potential Funding:**

Fund for a Healthy Nevada, state general funds, grants, donations, and/or gifts. Explore additional funding opportunities to support caregiver programs once existing funds expire.

¹ Neva Kaye, Salom Teshale, Medicaid Supports for Family Caregivers, October 2020, National Academy for State Health Policy.