

Recommendation #13: Driving and Dementia

Improve Nevada's infrastructure, services and support for ensuring the safety of people whose driving ability may be compromised by cognitive impairment, and those around them. Develop and implement:

- 1) A public information campaign about cognitive impairment and driving safety, leveraging public service announcements, websites, printed materials, etc., with content including:
 - a) Signs of compromised driving ability and potentially increased driving risk.
 - b) Options for addressing and/or reporting unsafe driving; and
 - c) Options for formal evaluation of driving safety.
- 2) A training program for healthcare providers through continuing education (CE) courses, licensing authority mailings, licensing requirements, kiosks/displays at meetings, etc., with content regarding:
 - a) Nevada statutes and regulations about provider responsibilities when cognitive impairment may compromise driving safety.
 - b) Mechanisms **with medical personnel and driving regulators** for reporting drivers who may be unsafe because of cognitive impairment.
 - c) Signs of compromised driving ability and potentially increased driving risk.
 - d) Options for formal evaluation of driving safety **such as courses offered through AARP and other stakeholders.**
 - e) Options for rehabilitation to safe driving **such as those offered through AARP or driver's education courses for adults.**

3) A process to create a standardized evidence-based driving safety evaluation tool for use by entities interested in driver safety and/or cognitive impairment, such as ADSD, geriatrics clinicians, Department of Transportation (DOT), Alzheimer's Association.

Has anything been done to create such documents or checklist evaluation tools??

4) Provide support for individuals and families when driving must be restricted because of cognitive impairment by:

a) **Promoting the development of safe, economical alternative means of transportation, including improved public transportation and partnerships with relevant private industries; and**

?? What is happening in metro areas to help with transportation issues, especially training drivers on the knowledge needed to transport seniors and others with cognitive impairment??

Elko City and County have a good service; Senior Centers in rural areas offer some transportation opportunities; RSVP offers some transportation; public transit, even taxis or Uber are minimal.

b) Assisting families with negotiating, explaining, and reinforcing driving restrictions.

This is a little troublesome as overall families know of the dangers and needed restrictions; however, they must live with the angry loved one who is discouraged from driving.

As mentioned at the July 9th meeting, families count on the DMV to refuse licensing; the DMV relies on families and physicians – Catch 22.

Perhaps a better physician referral system could be created.

Does the Alzheimer's Association have a cognitive checklist for driving that family members could use?

Indicators:

- 1) Program utilization **which programs??**
- 2) Participation (e.g., meeting attendance, website hits, CE credits granted) **is this checked? If so, results?**
- 3) Trips/riders served by alternative means of transportation **I can check with Elko service and RSVP and Senior Centers.**
- 4) Use of assessment services **which ones?**
- 5) Number of drivers served by support services **AARP might have a count on this**
- 6) Other assessments (polls, quizzes, focus groups, etc.) of Nevada healthcare providers and residents
- 7) Awareness of guidelines regarding cognitively compromised drivers **what does this entail? What does it mean?**
- 8) Knowledge of mechanisms for informing DMV about compromised drivers **Physicians and health care providers?**
- 9) Perceived ease of finding information about cognitive impairment and driving in Nevada ?
- 10) Nevada Department of Transportation, Highway Patrol, and DMV data **concerning impaired drivers and traffic violations and/or accidents**
- 11) Total motor vehicle accidents and fatalities in Nevada involving individuals reported by healthcare providers as having dementia
- 12) Referrals from providers and residents for cognitively compromised driving
- 13) Licenses restricted or revoked because of cognition-related safety concerns **DMV data?**
- 14) Older driver crashes and fatalities **could be combined in #11. Does the older versus dementia data matter?**
- 15) Dated deliverables for creation of driving safety evaluation tool ?? **Who designs and who is responsible for delivery?**

Potential Funding:

- Grants, gifts and donations
- Specific sources may include:
 - o US Department of Transportation
 - o US Department of Health and Human Services

 - o US Department of Veterans Affairs
 - o National Institutes of Health
 - o Nevada Department of Motor Vehicles

 - o Nevada Department of Transportation

- o Regional Transportation Commission
- o Aging and Disability Services Division
- o Car insurance companies
- o Self-driving car manufacturers
- o Ride sharing services
- o Transportation services (taxis, limos)
- o Support and interest groups (e.g., AARP, Alzheimer's Association)

There is a great deal of confusion in this current document, and it does not provide details as to what should be done to remedy MCI driving and driving with dementia. In some ways it contradicts allowing an individual to make decisions about personal welfare while also exacerbating the fear of impaired driving.

We ran into confusion with this several years ago since taking away the keys reduces independence and a sense of self-importance.