

The Alzheimer's and Dementia Care Program

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- I have no conflicts of interest to disclose.

What we will cover

- Comprehensive Care for Dementia
- The ADC Program
- Outcomes to Date
 - Quality of Care
 - Person living with dementia and care partner outcomes
 - Utilization and Cost
- Program Dissemination

Elements of All Comprehensive Dementia Care Programs

- Continuous monitoring and assessment
- Ongoing care plans
- Psychosocial interventions
 - Aimed at person living with dementia
 - Aimed at caregivers
- Self-management
- Medication management (health-system models, some community models)
- Treatment of related conditions
- Coordination of care

Models of Comprehensive Care for Dementia

- Focus on person living with dementia and caregiver, longitudinal
- Community-based—implemented at CBOs by SWs, RNs, MFTs
 - BRI Care Consultation
 - MIND at Home (Hopkins)
 - The Care Ecosystem (UCSF)
- Health System-based—implemented in health systems by NP or MD-led staff
 - Indiana University Healthy Aging Brain Center (HABC)
 - **The UCLA Alzheimer's and Dementia Care Program (UCLA ADC)**
 - Integrated Memory Care Clinic (Emory)

The UCLA Alzheimer's and Dementia Care (ADC) Program

Mission: To partner with families, physicians, and community organizations to maximize the individual with dementia's function, independence, and dignity, while minimizing caregiver strain and burnout.



The UCLA Alzheimer's and Dementia Care Program

- Health-system based model
- Began in 2011 with philanthropic funds
 - Planned 250 patients
- Round 1 Center for Medicare and Medicaid Innovation (CMMI) Award July 2012—Dec 2015
 - To expand the program to 1,000 patients
- As of August 25, 2022, over 3500 patients enrolled; 760 active; 338 on wait list

The ADC Program

Approaches the patient and caregiver as a dyad; both need support.



Provides comprehensive care based in the health system that reaches into the community.

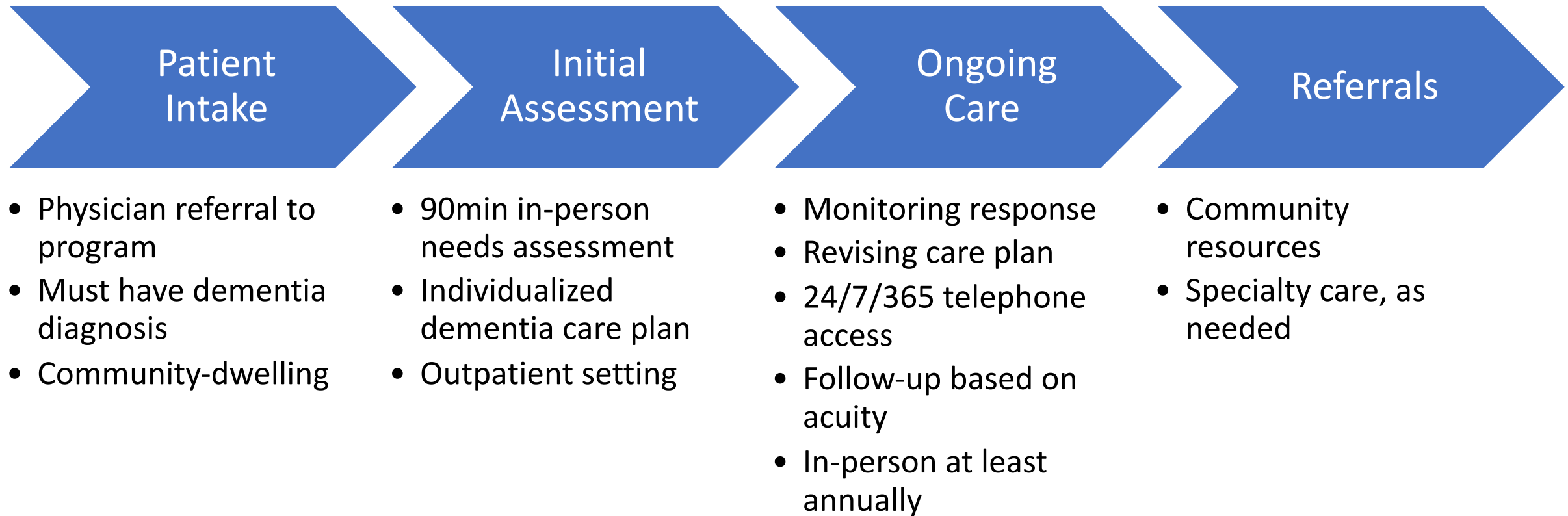


Recognizes that this care is a long journey.



Uses a co-management model with Advance Practice Provider Dementia Care Specialist (DCS) who does not assume primary care of patient.

The Process



Services Provided by Partner Community-Based Organizations

- Services for patients:
 - Adult day care services
 - Programs for brain health (for early stage memory loss)
- Services for families/caregivers:
 - Education (workshops, classes, informational sessions, handouts)
 - Counseling and peer-to-peer support
 - Case management
 - Legal and financial counseling
 - Support groups
- Voucher system funded by philanthropy
 - Selected, short-term services, authorized by Dementia Care Specialist (i.e., counseling, case management, respite care)

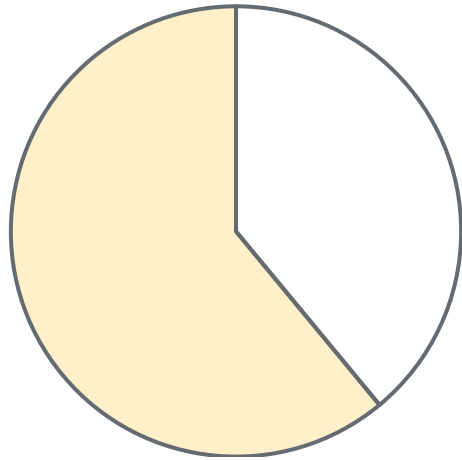


Dementia Care Specialist and Training

- Advanced Practice Provider
 - Nurse Practitioner, Clinical Nurse Specialist (with prescribing), Physician Assistant
- Each DCS follows about 250 patients; co-management model
- On-line curriculum available through Gerontological Advanced Practice Nurses Association (GAPNA)
 - 22 on-line modules + 4 asynchronous videos
- 1:1 weekly trainings with DCS expert on Zoom; weekly office hours
- DSC skills training alone is not sufficient for implementation of the ADC Program; additional training about the model of care is necessary
- Dementia Care Assistants: RN, SW, or non-licensed, trained staff; outreach to lower acuity dyads; identify those in crisis; allows DCS to work at top of license

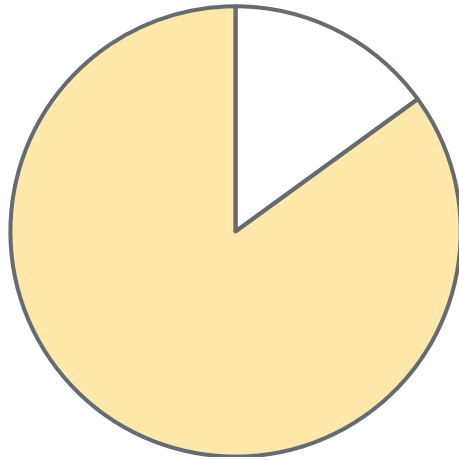
Success at UCLA

Physician Satisfaction with the Program



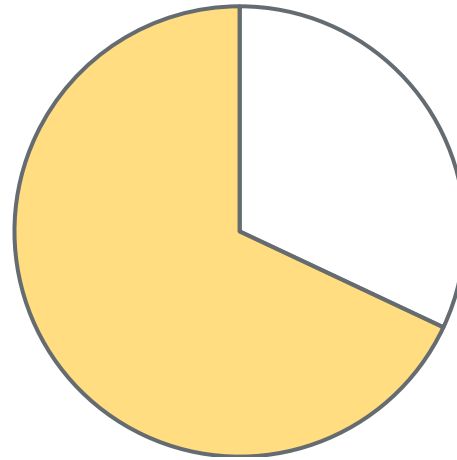
61%

Valuable medical
recommendations



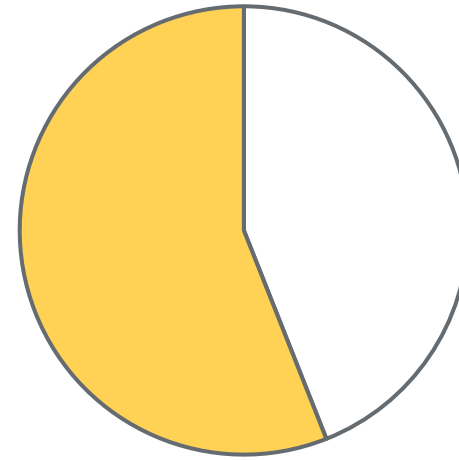
85%

Valuable behavioral
recommendations



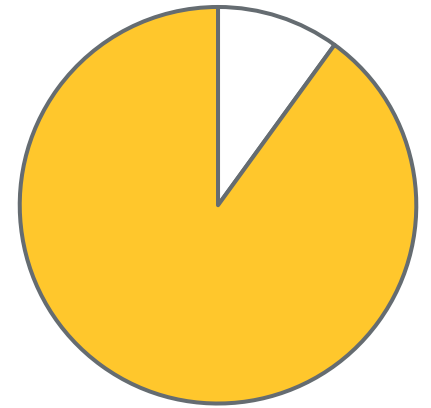
68%

Enhanced MD
relationship with
patient



56%

Saved MD time



90%

Would recommend
for other patients

Improved Quality of Care (ACOVE-3 and PCPI Quality Indicators for Dementia)

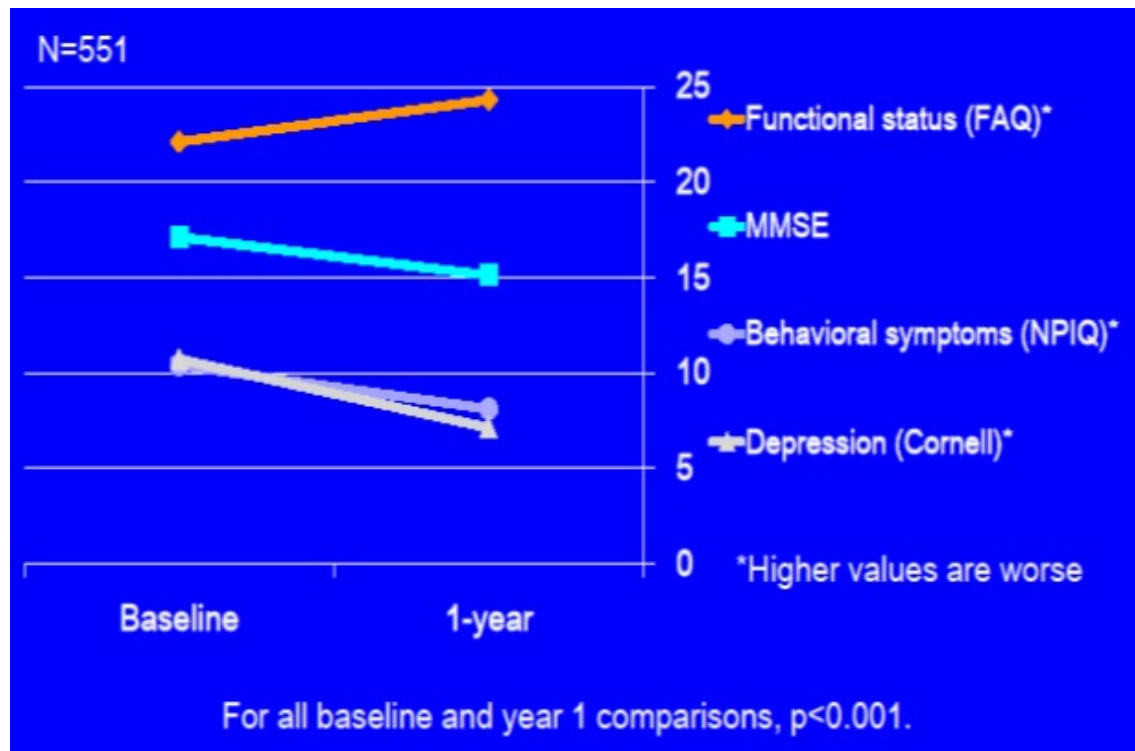
- | | |
|--------------------------------------|----------------|
| • Community-based physicians alone | 38% of QIs met |
| • Community-based physicians & NP | 60% of QIs met |
| • UCLA Alzheimer's and Dementia Care | 92% of QIs met |

Based on medical record abstraction of first 797 patients

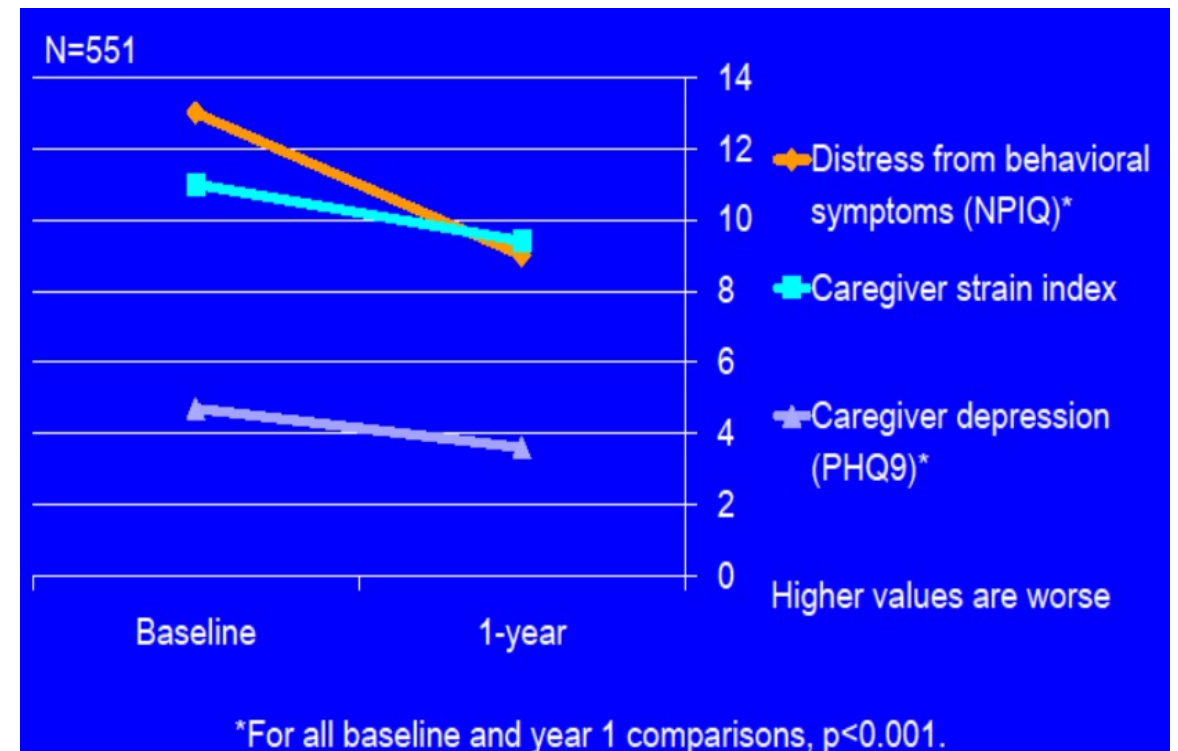
Jennings LA, et al. J Am Geriatr Soc, Jun 2016. PMID: 27355394

1-year ADC Program Outcomes

Patients



Caregivers



Evertson LC, et al. Caregiver outcomes of a dementia care program. *Geriatr Nurs*. 2021 Mar-Apr;42(2):447-459. PMID: 33714024.

Reuben DB, et al. 1-Year Results From the UCLA Alzheimer's and Dementia Care Program. *J Am Geriatr Soc*. 2019 Nov;67(11):2267-2273. PMID: 31355423

Utilization and Costs

Type of Care	Impact
ED visits	▼ 20%*
Hospital days	▼ 26%*
Nursing home placement	▼ 40%*
Hospice in last 6 months	▲ 60%*

Total Medicare costs of care:

▼ \$2,404/year *

* p<.05

Based on external evaluation of CMMI Award using Medicare FFS claims data and UCLA ACO data Sep 2015- Sep 2017

Going National

D-CARE Study (PCORI and NIA)

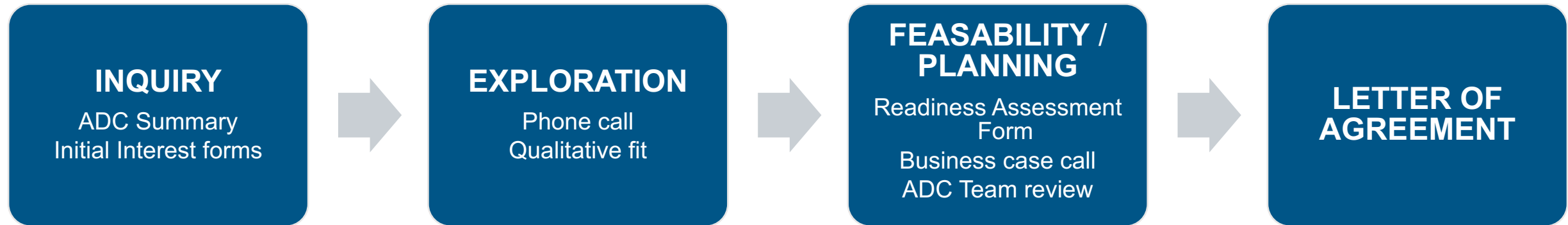


The John A. Hartford Foundation –
supported dissemination



The
John A. Hartford
Foundation

ADC Program Dissemination Process



January 2019 to December 2021:



80 Sites expressed interest



58 Initial phone calls

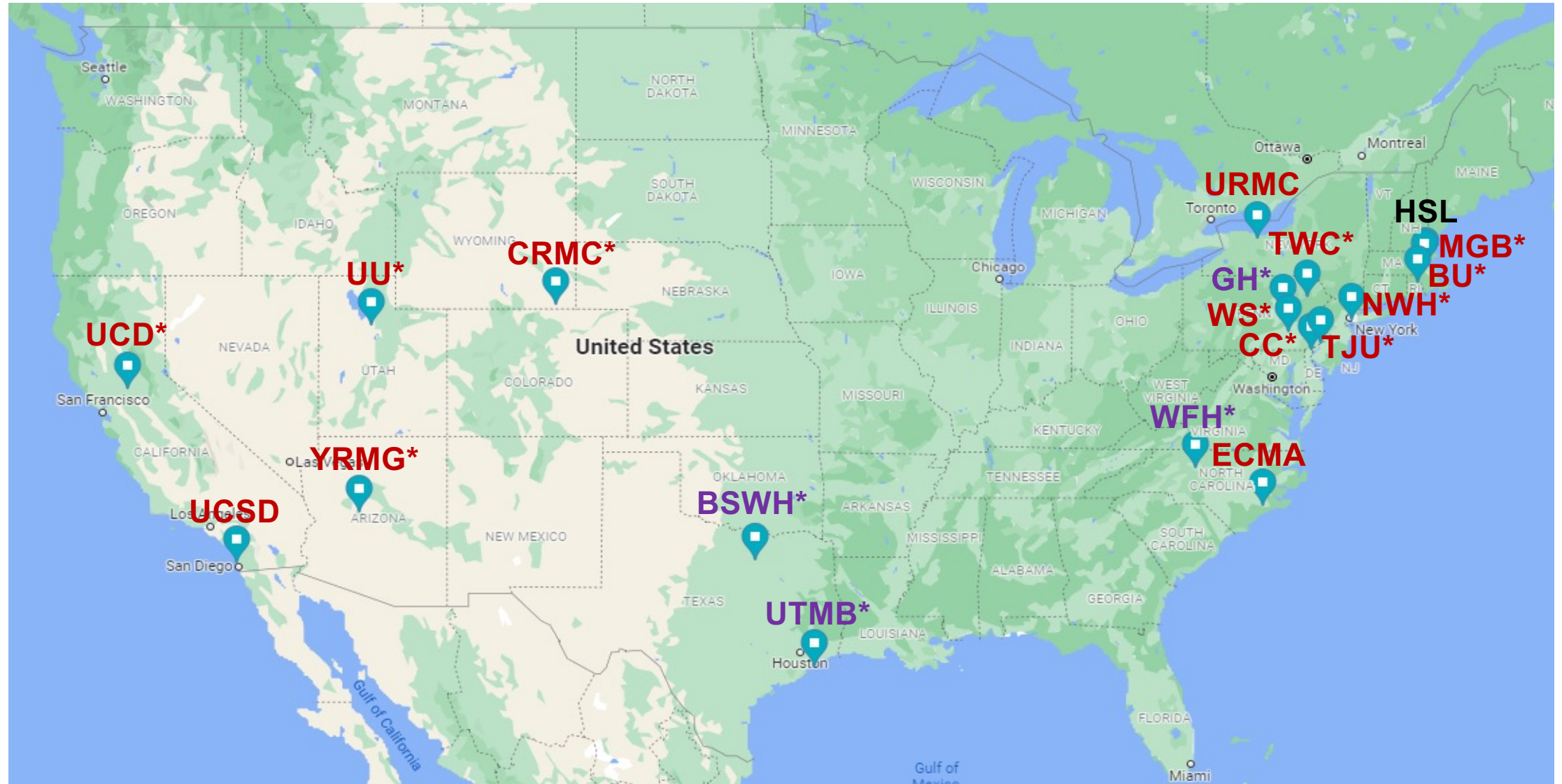


23 Readiness assessment forms completed



14 Letters of Agreement signed

Dissemination Sites



Lessons Learned in Early ADC Dissemination Efforts

- Identify and nurture a product champion
- The business case is critical
- Training is essential
- Local factors are important
- Be patient
- Don't underestimate the time needed for program implementation

Reuben DB, et al. Dissemination of a successful dementia care program: Lessons to facilitate spread of innovations. J Am Geriatr Soc. 2022 Jun 9. PMID: 35678747.
Lees Haggerty K, et al. Dissemination of a successful dementia care program: Lessons from early adopters. J Am Geriatr Soc. 2022 May 12. PMID: 35553424.

New in 2022

- ADC Dissemination Center <https://www.adcprogram.org/>
 - Menu of options for interested sites
- National Dementia Care Learning Collaborative
 - Ongoing community of practice including sites implementing ADC and sites considering adoption
 - Email us at ADCProgramNLC@edc.org
- Partnership with Institute for Healthcare Improvement's Age Friendly Health Systems
- ADC ECHO®
 - Email rbgoldberger@alz.org
- Training and technical assistance cost share

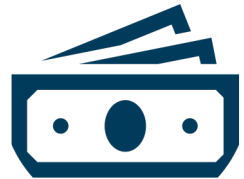
Goals for the Future



Dissemination of ADC to 50 additional sites

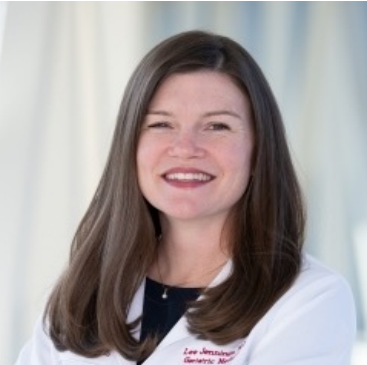


Tens of thousands of persons with dementia receive ADC care



Medicare provides payment for ADC & other comprehensive dementia care models

ADC Alzheimer's and Dementia Care PROGRAM



Health



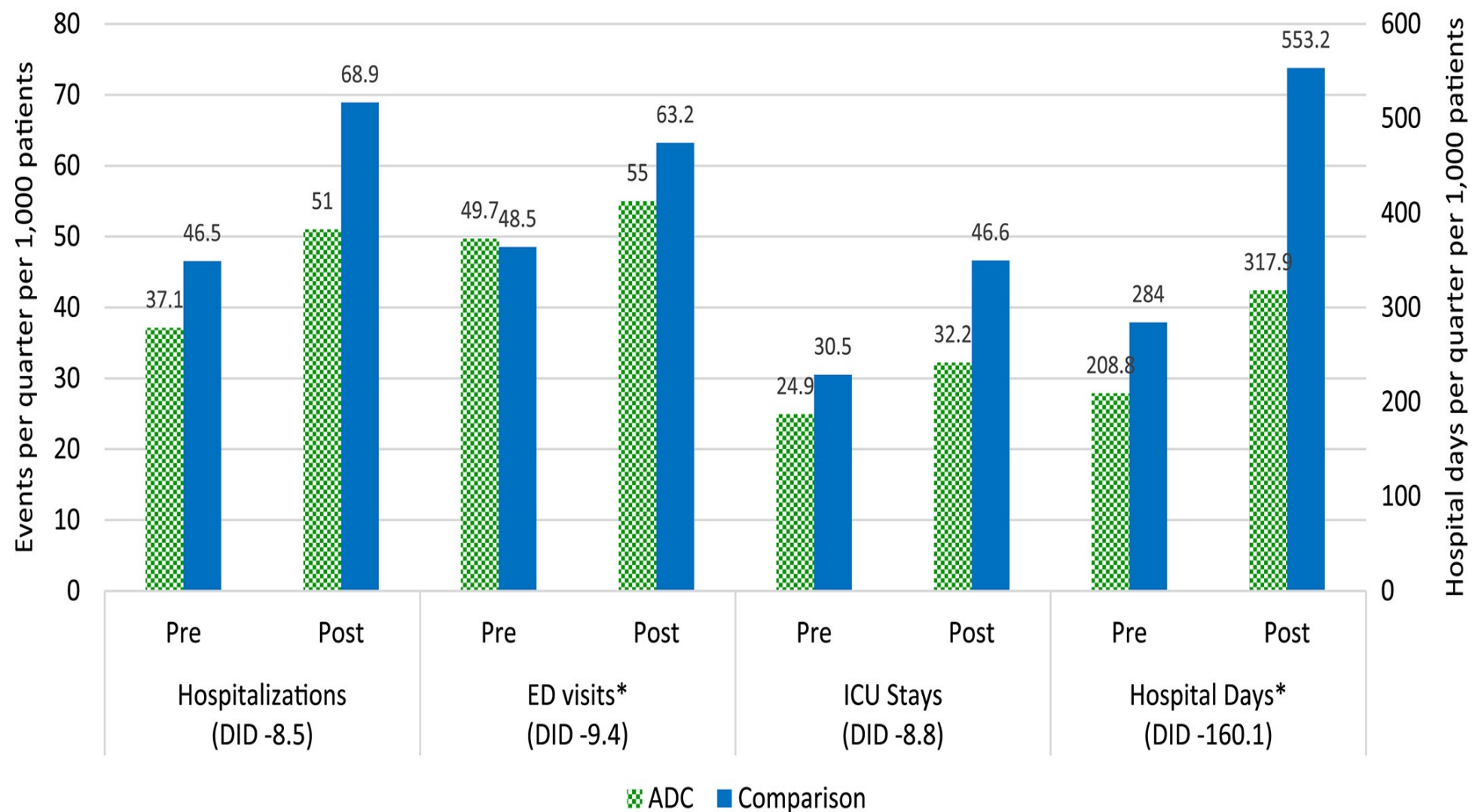
Education
Development
Center



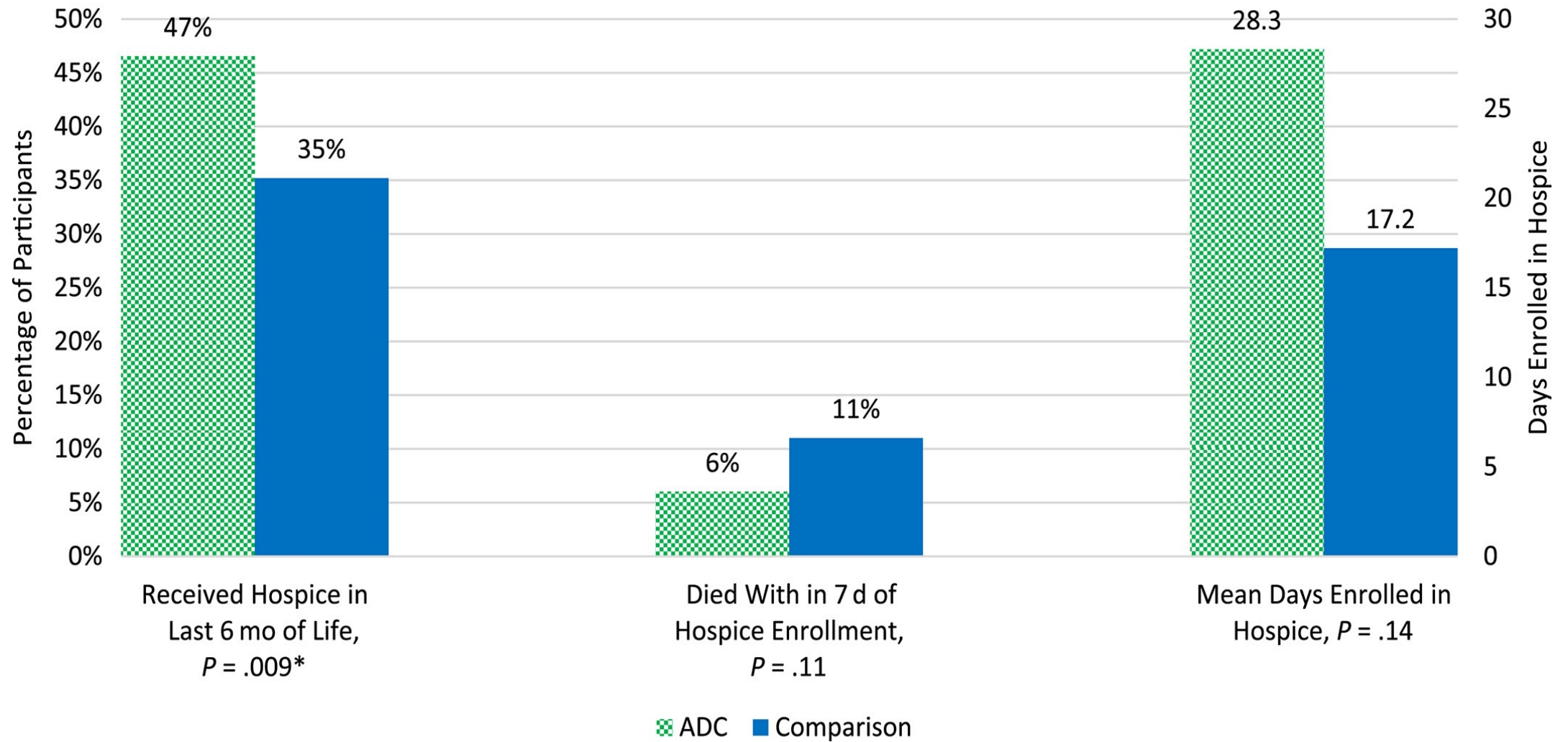
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ADC and Comparison Group Acute Care Utilization



ADC and Comparison Group Hospice Outcomes



Cumulative Incidence of Long-term Care Nursing Home Admission

