Center for Rural Health



North Dakota's State Plan for Alzheimer's Disease and Dementia

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Center for Rural Health

- Established in 1980, at The University of North Dakota (UND) School of Medicine and Health Sciences in Grand Forks, ND
- One of the country's most experienced state rural health offices
- UND Center of Excellence in Research, Scholarship, and Creative Activity
- Home to seven national programs
- Recipient of the UND Award for Departmental Excellence in Research

Focus or

- Educating and Informing
- Policy
- Research and Evaluation
- Working with Communities
- American Indians
- Health Workforce
- Hospitals and Facilities

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Objectives

- 1. Identify the processes involved in developing North Dakota's State Plan for Alzheimer's Disease and Dementia.
- 2. Describe the impact of Alzheimer's Disease in North Dakota.
- 3. Describe the five actionable goals for addressing Alzheimer's in North Dakota.

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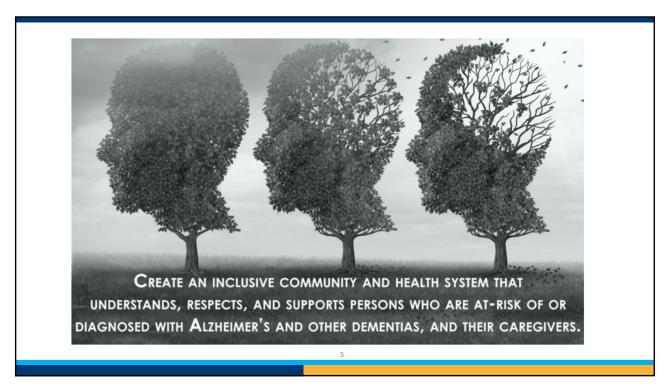
Project Overview

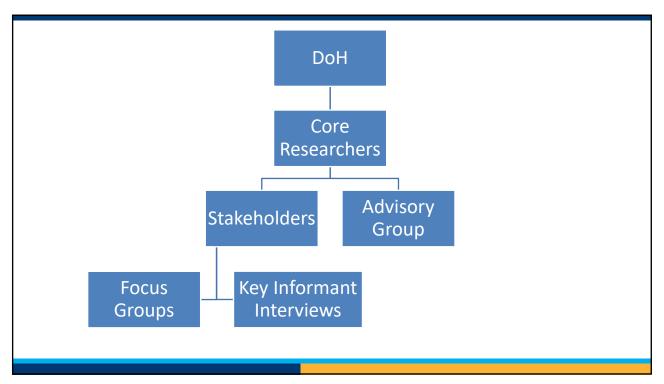
PURPOSE: Complete a state plan for Alzheimer's, funded by the North Dakota Department of Health, Division of Health Promotion.

State Alzheimer's Disease Plans establish accountability and when successfully implemented result in a timely and effective response to Alzheimer's disease.

Since 2007, 49 states, the District of Columbia, and Puerto Rico have published State Alzheimer's Disease Plans.

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North Dakota Alzheimer's Data

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Identified Themes of Need in North Dakota

Three Themes of Need in North Dakota

Early Detection and Diagnosis

There is a need to create a strong system of early detection and diagnosis through public education campaigns (early warning signs), and training of providers in all health care settings.

Education and Awareness

There is a need to provide education and awareness campaigns that target the public, persons at-risk of Alzheimer's and other related dementias, providers, and caregivers.

Supports for Caregivers

Caregivers need comprehensive supports throughout the life course of the disease. The state must identify or develop comprehensive community programs that are well advertised, affordable, and offer psycho-social supports for caregivers. Supports exist but can be difficult to navigate, unaffordable, or unavailable.

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State Plan Recommendations

Identified Five Actionable Goals

- 1. Comprehensive continuum of care
- 2. Support for research
- 3. Community and caregiver education
- 4. Workforce education and development
- 5. Identify and address diversity in research, supports, and care access

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1. Comprehensive Continuum of Care

Person centered care

Comprehensive continuum of clinical services that support aging in community through all stages of the disease

Ensure access to these services that are local and accessible (culturally, transportation, etc.)

Need for community supports and programming that supporting aging in community

2. Support for Research

Translation from research to practice

Funding research/data sharing/data management plan/public data so we can see the impact in North Dakota

Funding research around collecting and reporting data that are within the Healthy People 2030 Objectives

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3. Community and Caregiver Education

We need ONE comprehensive list in the state of what is available for caregivers and one list of what is available for the person with Alz. and related dementias

State needs to create/support a one-point of entry web portal for information on what it is, where to get services, how to have hard conversations, finances, etc. [Identify, recognize, and utilize community assets to work with caregivers and persons with alz/dementia]

4. Workforce Education and Development

Educating on diagnosis and referral and disease management Pressure on existing provider groups to integrate and start conversations specific to alz. And dementia (NDMA, NDLTCA, NDRHA, ND SORH, NDPHA, etc.)

 Sub: focus on professionals NOT in medical who need to know how to work with persons who have Alz/Dementia (law enforcement, ems, fire fighters, sales, services)

Residential care facilities – training on how to be the first to recognize signs/symptoms AND how to provide care for persons throughout the progression of the disease

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5. Identify and Address Diversity in Research, Supports, and Care Access

Need to integrate perspectives from diverse cultures whose voices are not included in common conversations around alz. and dementia

- LGBTQ
- Migrants
- Refuge community
- Tribal populations on and off of the reservation

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