What is the North Dakota Dementia Care Services (DCS) project?

- The North Dakota DCS project has a goal of informing people with dementia (PWD’s) and their caregivers about dementia care issues which, in turn, may lead to increased family support, decreased depression, delays in nursing home placement, and reductions in unnecessary health service use.

- The project provides care consultations to persons with dementia and their caregivers; these consultations consist of assessing needs, identifying issues and concerns and resources, developing care plans, and referrals, providing education, and follow-up assistance.

- Created by the Dementia Care Services legislation (North Dakota House Bill 1043), the project is being conducted by the Alzheimer’s Association of Minnesota/North Dakota and externally evaluated by the Center for Rural Health at The University of North Dakota School of Medicine and Health Sciences.

Who among veterans has benefited from the project services?

- Project contacts were made with caregivers of 54 veterans.

- Most veterans were male (87%) and aged 75 or older (76%).

- Three-quarters (76%) of these veterans had a diagnosis of dementia/Alzheimer’s disease; 7% had at least one additional health condition.

- Most (89%) lived in a city/town and one-half resided in a rural county.

- Over one-third of these veterans lived in Fargo or West Fargo near the VA (figure 1).

Figure 1. Regions in ND where 54 Veterans participating in the DCS program live.

Concerning living arrangement, almost three-quarters (72%) of veterans were in their home (30% lived alone, figure 2).

Figure 2. Living Arrangements for 54 Veterans participating in the DCS program.
What has been the project’s effect on caregiving for veterans in North Dakota?

- Veterans whose caregivers had multiple contacts with project staff and services showed increases in completing key dementia care-related action steps.

- Program participation coincided with a 65% increase in securing power of attorney and a 56% increase in establishing health care directives.

- Health care related cost analysis indicated that program participation coincided with the following estimated cost avoidance: hospital—$27,277; ambulance—$473; emergency room—$1,494; and long-term care—$621,712.

Conclusion

- Older military veterans have been found to be at particular risk for developing dementia (possibly through other present factors such as a history of posttraumatic stress disorder). As dementia/Alzheimer’s disease is becoming more common, it is important to provide meaningful support to persons with dementia (including veterans) and their caregivers through both the administration of proven, effective programs and the development of new and innovative approaches. Preliminary results indicate that by providing enhanced support for caregivers the Dementia Care Services project contributes to increases in completing important dementia care related action steps and avoiding health care related costs.

Sources