Rural Dementia Care
Brad Gibbons, MPA
Deputy Director
Center for Rural Health
UND School of Medicine

Gretchen Dobervich, BSW LSW
ND Field Director
Alzheimer’s Association
Minnesota-North Dakota Chapter

Today you will leave with:
- Identify one medical and one service need that is proportionally unique to rural dementia care
- Apply learning’s from evidence based rural dementia medical and service programs

Persons with Dementia: Demographics

<table>
<thead>
<tr>
<th>Disease Diagnosis</th>
<th>Stage of Disease</th>
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<tbody>
<tr>
<td>Alzheimer’s or dementia</td>
<td>Early</td>
</tr>
<tr>
<td>Suspected Alzheimer’s or dementia</td>
<td>Middle</td>
</tr>
<tr>
<td>Unknown</td>
<td>Late</td>
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<td>Unknown</td>
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Person with Dementia: Summary

- PWDs were commonly women (53%) in their 70s (78.4 was average age)
- 4% were under the age of 65%
- 1% of PWDs with an Alzheimer’s diagnosis, 9% of which had a co-morbidity
- Largest number of PWDs served were in middle stage
- 21% were military veterans
- 72% lived at home (1/4 alone and 2/3 with spouse)
- 11% of PWDs living alone live in the country

Caregivers: Demographics

Relationship to PWD

- Daughter: 75%
- Professional: 5%
- Wife: 16%
- Son: 8%
- Other: 10%
- Self: 5%

- 75% were female
- 49% were children of people with dementia
- 21% were spouses
- Average age of caregiver was 61.7 yrs
Caregivers: Geography**

- Location
  - Urban: 85%
  - Rural: 63%
  - Town: 25%
  - Country: 9%

- Distance from PWD
  - Same Town: 56%
  - 1 mi to 5 mi: 7%
  - 6 mi to 10 mi: 7%
  - 11 mi to 50 mi: 11%
  - 51 mi or more: 14%

Caregivers: Summary**

- 48% of caregivers live in rural areas
- Daughter and wives were the largest group of primary caregivers: 75%
- 40% were children of the PWDs
- 21% were spouses of PWDs
- 54% of caregivers lived in the same town as the PWD and 10% were 301-2,000 miles away

Leadership: North Dakota First In Nation

- 39,000 North Dakotans have Alzheimer's disease, almost everyone is affected by Alzheimer's disease
- A private public partnership
- Demonstrated stress and cost reduction
- Several States looking to replicate the project
Figure 2. Estimated cost savings for urban and rural persons with dementia

- Rural (n=600)
- Urban (n=206)

Figure 3. Estimated health care cost savings for DCSP participants

Total Estimated Savings: $357,164
- Emergency Rooms: $14,012
- Hospital: $258,344
- Ambulance: $91,787
- 911 Calls: $1,461
(N=412)

ND Dementia Care Services
Project Outcomes

- Provide information and education to caregivers and professional healthcare providers to improve quality of life and reduce caregiver burden
- Increase awareness of the disease in the public
- Provide care consultation to caregivers and professional healthcare providers to improve quality of life and reduce caregiver burden
- Reduce stress and costs associated with care, while improving quality of life
Service: Delivery Model

**Intervention**
- Listening & Support
- Health Care
- Immediate Plan of Care

**Education**
- Information
- Classes
- Share & Support

**Tools**
- NDFS/SP
- Community
- Health Care

Service: Primary Concerns

- 32% Caregiver Resource Information
- 22% Check In/Support
- 15% Alzheimer’s Association Services Information
- 12% Caregiver Stress
- 10% Dementia Information
- 9% Locating Care Services

Service: Geography and Portals

- Caregivers are contacted through case consultation (148), and Information Helpline (506)
- Contacts are in person (775) or over the telephone (712)
- 48% of rural contacts are in person
- NDD/SP is available to professional caregivers
- All services are available in all 53 counties in ND

Referral Sources used by PWEs and Caregivers:
- Alzheimer’s Association
- Family and Friends
- ND/SP
- Other
Direct Connect Process

- AD recommends non-drug treatment as part of care plan
- Patient signs records release waiver
- Waiver forwarded to Alzheimer's Association
- Care Consultant follows up with patient within 2 weeks of diagnosis
- Plan developed, patient introduced to services

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Direct Connect Goals

- Strengthen physician relationships
- Encourage earlier diagnosis of ADRD
- Increase physician referrals to the Alzheimer's Association
- Reduce the time between diagnosis and intervention from 2 years to 2 weeks
- Support families through education, planning, counseling, and connection to programs and services that improve quality of life

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What's Out There

73 Assisted Living Facilities
- 24 with designated Memory Care
  - It's estimated 50% of assisted living residents have a form of dementia

67 Basic Care Facilities
80 Skilled Nursing Homes
- 33 with designated Memory Care
  - It's estimated 75% of skilled nursing home residents have a form of dementia

Home Health Care Agencies
Home and Community Based Non-Medical Care
Adult Day Programs
Challenges in Rural Dementia Care

- Awareness of what dementia is, what can be done and who to contact
- Limited care and service options, both in general availability and related to reimbursement

Opportunities in Rural Dementia Care

- Support community dementia education
- Providers utilize current, evidence based dementia education for dementia competent staff
- Utilize technology advancements
- Community support and engagement in recreating or sustaining senior centers, home delivered meals, respite services, etc.
- CREATIVITY

Alzheimer’s Association Resources

- 24/7 Information Helpline: 1-800-272-3900
- Website: www.alz.org/mnnd
- Care Consultation
- Support Groups/ Telephone Discussion
- MedicAlert® + Safe Return®
- Family and Professional Education
- Advocacy
- Research: TrialMatch®
Contact Information

Northwest ND
Kristen Frenning
Williston 701.857.0006

North Central ND
Kristen Frenning
Minot 701.857.0005
Ashley Magner
Dawes Lake 701.775.8544

Northeast ND
Ashley Magner
Grand Forks 701.775.8544

Southwest ND
Kelly Malitz
Dickinson 701.225.7988

South Central ND
Nina Frentz
Bismarck 701.258.4933

Southeast ND
Kendra Ringer
Fargo 701.327.9767

Contact Information

Gretchen Dobervich, BSW LSW
North Dakota Field Director
Alzheimer's Association Minnesota-North Dakota
701.227.9767
gdobervich@alz.org

Center for Rural Health

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