

Governor's Commission on Alzheimer's Disease and Related Disorders 2022 Annual Report ~ January 15, 2023

Recommendations for Legislative Action in 2023

For 2023, the Governor's Commission on Alzheimer's Disease and Related Dementias (ADRD) is recommending a focus on:

- Building and strengthening the workforce, including direct-care workers
- Streamlining statewide coordination of ADRD programs and supports
- Supporting Home and Community Based Services and advocating for protections so Vermonters who choose to can safely age in place.

We support the following action areas to achieve these goals:

Support funding-rate study recommendation increases for long-term care providers in a reasonable (3-5 years) amount of time and include built-in annual increases and periodic rate schedule reviews.

Support Adult Day recommended one-time funding adjustment and rate increases to build their capacity to pre-pandemic levels.

Advocate for the creation of a permanent Statewide Dementia Coordinator position to:

- Oversee, guide and monitor implementation of the new Alzheimer's and Healthy Aging Action Plan
- Be a point person for all departments, organizations and communities supporting Vermonters with ADRD and their caregivers.

Support solutions to the looming crisis to Home Health agency budgets from coming 2023 federal Medicare cuts.

Ensure that updates to the Adult Protective Services statute recognize the unique needs of Vermonters with ADRD and include necessary training and protections for this constituency.



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Background

The number of Vermonters 65 and older with Alzheimer's disease is estimated to increase more than 30% by 2025 — from 13,000-plus Vermonters today to 17,000 in just four years. Vermont is one of the top five oldest states (by median age), with one in three Vermonters expected to be 60 or older by 2030, and the number of those over 80 expected to double in that time. Vermonters are living longer but experiencing more chronic and complex health conditions, Alzheimer's and dementia being foremost among them. (See Page 5 for statistical graphics.)

The Commission's long-term goal is to enable and support a high-quality, sustainable and robust coordinated system of services and supports to meet the needs of Vermonters living with Alzheimer's and their families. Extensive groundwork for achieving this goal has been underway for two years in broad constituencies (including primary care providers), through the CDC BOLD (Building Our Largest Dementia) grant. Objectives of the BOLD grant are to change systems to increase rates of early detection, reduce risk of developing dementia, provide enhanced caregiver support, and reduce avoidable hospitalizations related to co-morbidities.

Action Plan on Alzheimer's and Healthy Aging and BOLD

The ADRD Commission has contributed to the updated Vermont Department of Health's Action Plan on Alzheimer's and Healthy Aging. The BOLD infrastructure objectives and strategies are consistent with our collective work on Alzheimer's and healthy aging. This project aligns with VDH's work under the BOLD grant. The four pillars of the three-year grant are to: 1. Increase early detection; 2. Promote risk reduction; 3. Support caregivers; and 4. Reduce avoidable hospitalizations.

The Vermont Department of Health's Alzheimer's Disease and Health Aging Program will reapply for the next round of CDC funding from the BOLD Initiative in 2023, which will launch later that fall. The ADRD commission will continue to support these efforts as stakeholders and potential partners through the process until the new state Action Plan on Alzheimer's Disease and Healthy Aging is expected to be released in 2025.

Goals for the VT Action Plan on Alzheimer's and Healthy Aging are to:

- 1. Improve healthcare quality to achieve greater health equity for Vermonters with dementia and their families.**
- 2. Support Vermonters with dementia and their families.**
- 3. Enhance public awareness and engagement.**
- 4. Improve data to track progress.**
- 5. Accelerate action to promote healthy aging and reduce risk factors for dementia.**

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Addressed workforce shortages in care settings

Solid progress was made on the Commission's 2022 recommendations for legislative action to find short- and long-term solutions to workforce shortages in all care settings for people with dementia — from homes to skilled nursing facilities.

Several Commission members joined a new Long Term Care Crisis Coalition, comprising representatives of 200-plus providers of assisted living, adult day care services, home health and hospice, residential care, nursing home care, and other related organizations including Area Agencies on Aging. This group focused solely on the workforce shortage and advocated for a significant increase to Medicaid reimbursement rates for Choices for Care home- and community-based services and assistive community care (ACCS) providers. The Coalition created educational materials on the importance of the aging-services workforce, published an Op Ed, and regularly testified to legislative committees about challenges faced by the sector to adequately serve and care for older Vermonters and their families. The Legislature responded, including an 8% Medicaid reimbursement increase as well as an increase in the Adult Day services rate. Progress is still needed on finalizing a rate review, funding the findings of the review and creating a payment schedule with built-in annual increases.

Strengthened ADRD Commission and aligned cross agency work

In 2022, Commission members successfully introduced and advocated for S.206/Act 113, relating to planning and support for individuals and families impacted by Alzheimer's disease and related disorders. It unanimously passed both chambers and was signed by the governor on May 11, 2022. Highlights include:

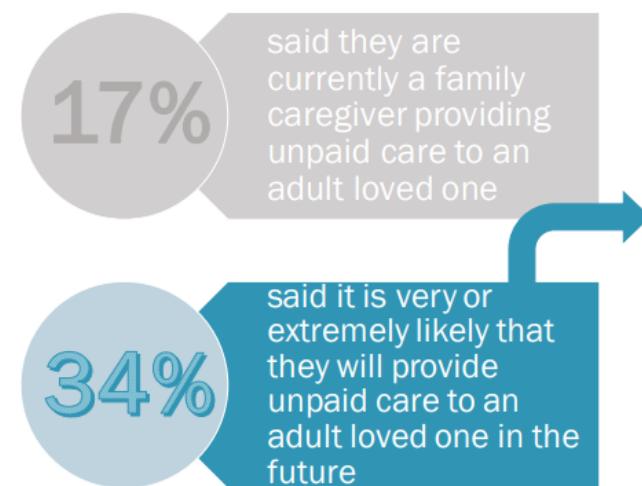
- Increasing Commission membership to include the executive director of the Blueprint for Health. Dr. John Saroyan joined the Commission in July 2022.
- Requiring the Commission to provide written feedback for state and other plans relevant to ADRD.
- Integrating the Alzheimer's Action Plan into the State Plan on Aging to ensure coordinated systems of services, supports and systems. The two plans were released together on Oct. 1, 2022.
- Requiring DAIL to develop and maintain easily accessible print and on-line public education resources. We will continue to explore how to support this work.
- Requiring the Agency of Human Services to submit a report by Dec. 15, 2022 on paying for a permanent Dementia Services Coordinator.
- Requiring the Commission to appoint three members to lead the development of a Professional Education Opportunities Report, due December 2023. Three members were appointed to lead this work in September 2022.
- Requiring the Department of Public Safety to submit a report on written communications and response for Vermonters with ADRD. This report was submitted in November 2022.



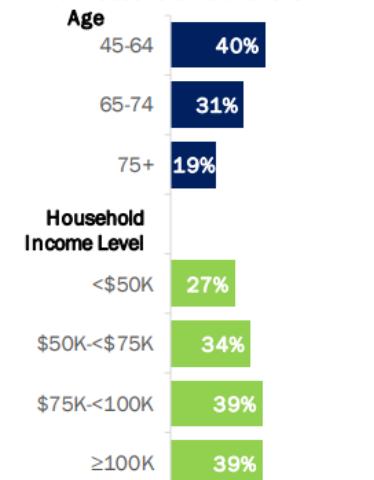
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CAREGIVING IN VERMONT

In 2022, the Envision Vermont AARP Age Friendly Community Survey was administered statewide. Many Vermonters who are not currently providing care for a family member expect to do so in the next few years.



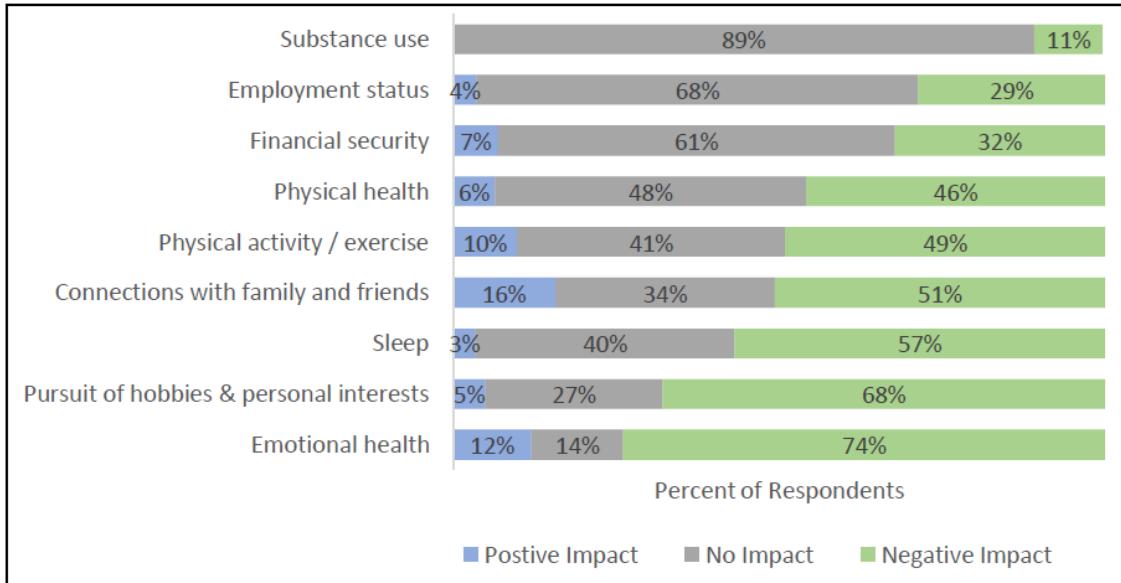
Is this percent different by age group or household income level?



Data Source: 2022 Vermont AARP Age Friendly Community Survey
Vermont Department of Health

In 2020 the VT State Unit on Aging (SUA) surveyed older Vermonters (60+) and unpaid family caregivers for individuals 60+.

- 41% of caregivers responding to the survey care for a family member with Alzheimer's or other form of dementia.
- Adult children, as compared to spouses, give care to older adults. Other relatives most often care for oldest persons receiving care.
- The majority of caregivers have been providing care to a family member for more than a year.
- Over half of the family caregivers report providing care for more than 20 hours a week. 28%, more than one-quarter, provide care seven days a week, 24 hours a day.
- Survey respondents were asked to consider a list of possible impacts,(see Figure 42 and Table 55A), and for each rate whether caregiving has a positive, negative, or no impact.
- Caregiving has the greatest negative impact on emotional health, and the opportunity to pursue individual interests.



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Addressing diversity, equity and inclusion (DEI) in professional caregiving settings

In 2021, a Commission subcommittee was created to address press reports of BIPOC professional caregivers subjected to racism via verbal and physical abuse by care recipients experiencing cognitive decline. In 2022, the discussion continued, and the caregiver focus expanded to include all members of the workforce who identify with a historically marginalized community— including but is not limited to LGBTQ +, disability and immigrant communities. The Commission has worked within the aging services network to build a capable and dedicated stakeholder group that will help develop and review statewide guidance and recommendations. The Commission aims to:

- Support the caregivers essential to the trained workforce Vermont desperately needs.
- Ensure that individuals experiencing cognitive decline (and hostile behaviors that sometimes emerge as a result) have access to the care they need in a no/low-conflict environment.

The subcommittee's 2022-23 DEI work focuses on:

1. Training: How Vermont will ensure that direct care staff (including temporary/traveling staff) are trained in dementia basics, communication with someone experiencing cognitive decline, and de-escalation.
2. Policy/procedure development and implementation at executive/management level: What can realistically be put in place to protect staff from abuse, and ensuring that staff are told how to report and other procedures to expect when an incident occurs. The Commission is committed to developing guidance that will ensure that all caregivers work in a safe, supportive, inclusive and DEI-informed workplace.

Creating a Dementia Friendly Vermont

The Commission's focus is on building public awareness and supporting the use of Dementia Friendly toolkits within Home and Community Based Services (HCBS). Commission representatives from the UVM Center on Aging and VT Department of Health are creating a Dementia Friendly VT webpage within the Department's Health Promotion and Disease Prevention site. Success of Dementia Friendly Vermont also requires establishing statewide Dementia Friendly practices to support individuals living with ADRD and their caregivers. One of the first products of this work will be the Dementia Friends program, sponsored by the UVM Center on Aging. In 2023, the Commission will continue to promote this program, build partnerships statewide to train facilitators, and offer Dementia Friends in communities across the state. The Commission expects to be recognized as a Dementia Friendly state by Dementia Friendly America (DFA) in 2023.



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Overview: The State of Alzheimer's and Dementia in Vermont



Prevalence

NUMBER OF PEOPLE AGED 65 AND OLDER WITH ALZHEIMER'S

Year	TOTAL
2020	13,000
2025	17,000

ESTIMATED % CHANGE

30.8%



Workforce

9

of geriatricians

255.6%

% increase needed to meet the demand in 2050

8,000

of home health and personal care aides

31.3%

% increase needed to meet demand in 2028



Caregiving (2021)

26,000

Number of Caregivers

37,000,000

Total Hours of Unpaid Care

\$758,000,000

Total Value of Unpaid Care



Hospice (2017)

543

of people in hospice with a primary diagnosis of dementia

17%

% in hospice with a primary diagnosis of dementia

Hospitals (2018)

1,528

of emergency department visits per 1,000 people with dementia

19.6%

dementia patient hospital readmission rate

Medicaid

\$116M

Medicaid costs of caring for people with Alzheimer's (2020)

26.4%

projected change in costs from 2020 to 2025

Medicare

\$24,091

per capita Medicare spending on people with dementia (in 2021 dollars)



Mortality

OF DEATHS FROM ALZHEIMER'S DISEASE (2019)

315

5th highest death rate in America



VERMONT

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Commission Membership 2022

NAME (alphabetical by last name)	REPRESENTATION
Mohamed Basha, CEO TLC Homecare	Registered Nurses
Mark Boutwell, Executive Director Senior Solutions	Area Agencies on Aging
Senator Randy Brock	State Senate
Alecia Demario, Executive Director Birchwood Terrace	Nursing Home Administrators
Molly Dugan, Director of Policy and Strategic Initiatives	SASH Support Services at Home
Glenn Jarrett, Attorney Jarrett & Luitjens Elder Law	Legal Profession
Representative Dan Noyes	State Legislature
Janet Nunziata, Director	UVM Center on Aging
Mary Beth Pinard, Executive Director Vermont Catholic Charities	Residential Care
Meg Polyte, Policy Director	Alzheimer's Association
Sarah Poole, Dept of Veterans Affairs	Mental Health Provider
Simone Rueschemeyer, Vermont Care Partners	Family Caregivers
Dr John Saroyan, Executive Director Blueprint for Health	Blueprint for Health
Josh Smith, Executive Director Green Mountain Support Services	Social Workers
Pamela Smith, West Danville United Methodist Church	Clergy
Angela Smith-Dieng, Adult Services Director	DAIL
Andrea Stauffenecker, Director, Riverside Life Enrichment Center	Adult Day Providers
Deborah Wesley, VP of Addison County Home Health & Hospice	Home Health Providers
Rhonda Williams, Chronic Disease Prevention Chief	Vermont Department of Health
Seeking Applications	Physicians



Governor's Commission on Alzheimer's Disease and Related Disorders 2022 Annual Report ~ January 15, 2023

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