

# Implementing a Nurse Practitioner Led Dementia Care Management Program in Health System Focused on Older Adults in the Community \*Draft\*

**Authors:** Anne H Carr GNP Hebrew SeniorLife; Leslie C Evertson GNP UCLA; Joy Grover, Hebrew SeniorLife; Nathaly Lopera, Hebrew SeniorLife; Gary Epstein-Lubow MD, Brown University

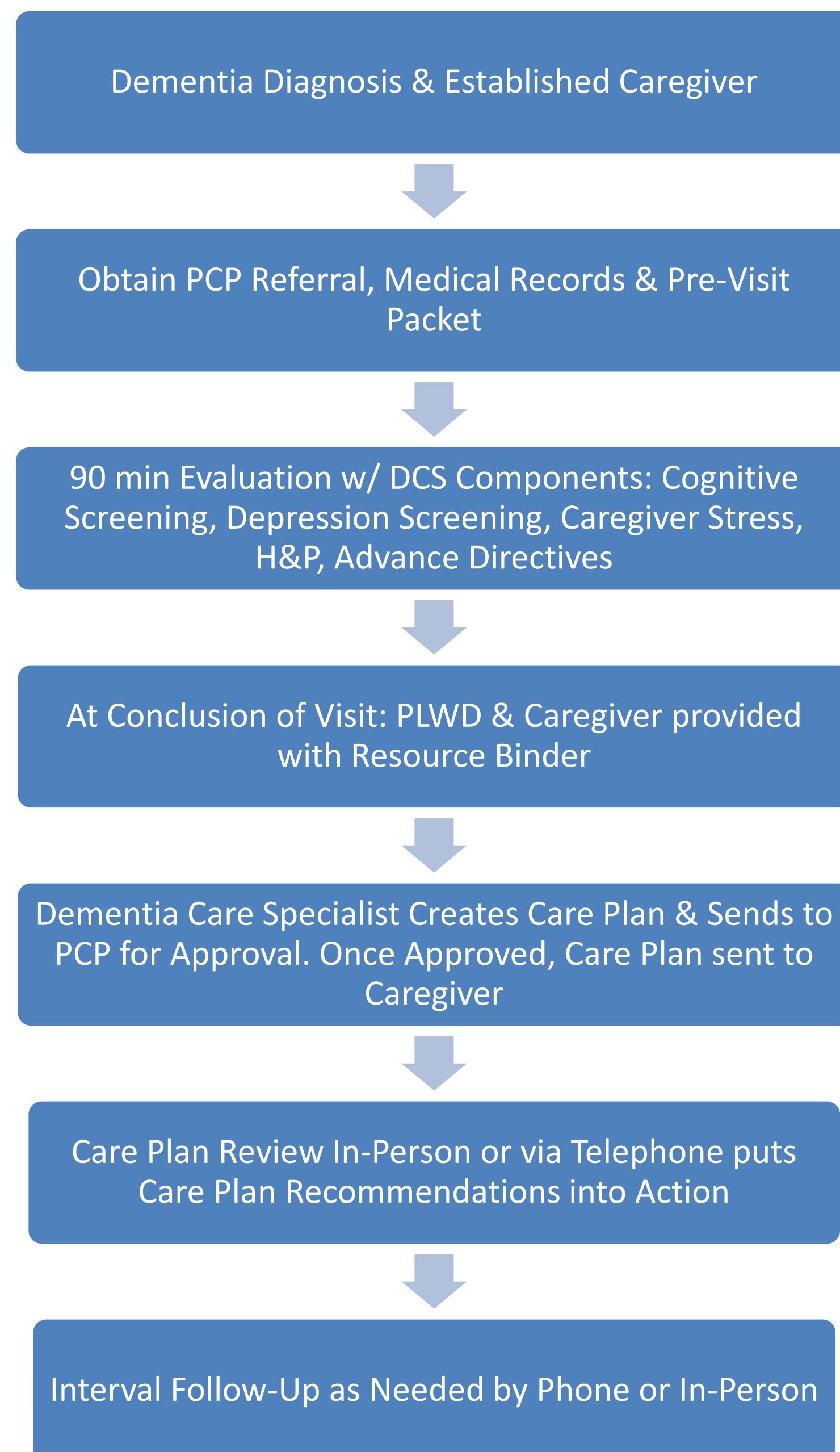
## Background

The Center for Memory Health (CMH) at Hebrew SeniorLife (HSL) implemented the UCLA Alzheimer's and Dementia Care (ADC) Program, a Nurse Practitioner-led co-management model that provides comprehensive care for persons living with dementia (PLWD) and their families.

HSL, a nonprofit organization offering healthcare and housing for older adults, selected the UCLA ADC program as a core clinical offering among other CMH services. In the first 10 months, the CMH enrolled a total of 109 participants.

Staffing for the ADC consists of a Nurse Practitioner in the Dementia Care Specialist role and a Dementia Care Specialist Assistant who has a bachelor's degree in Health Care Administration.

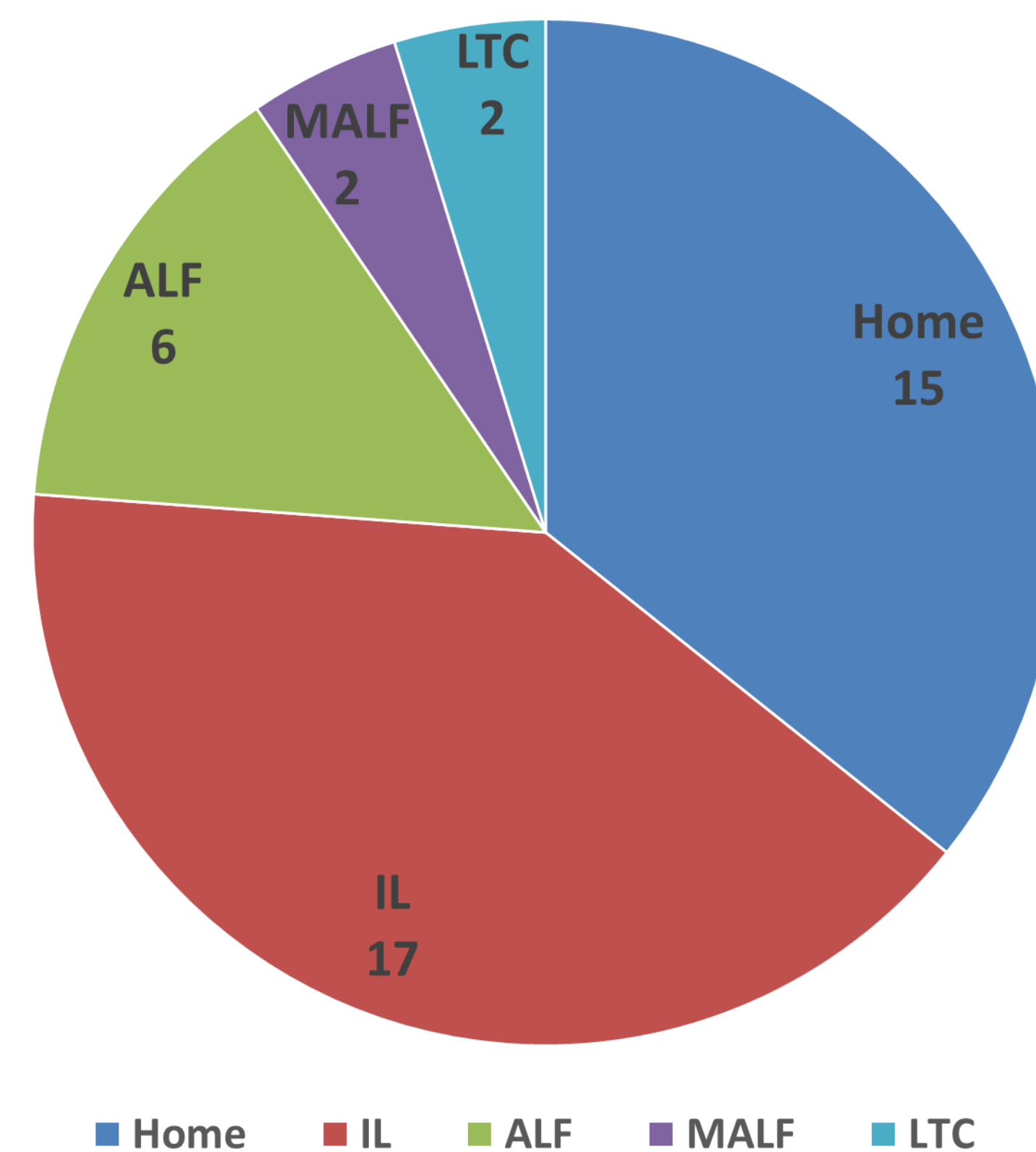
## ADC Program Flow



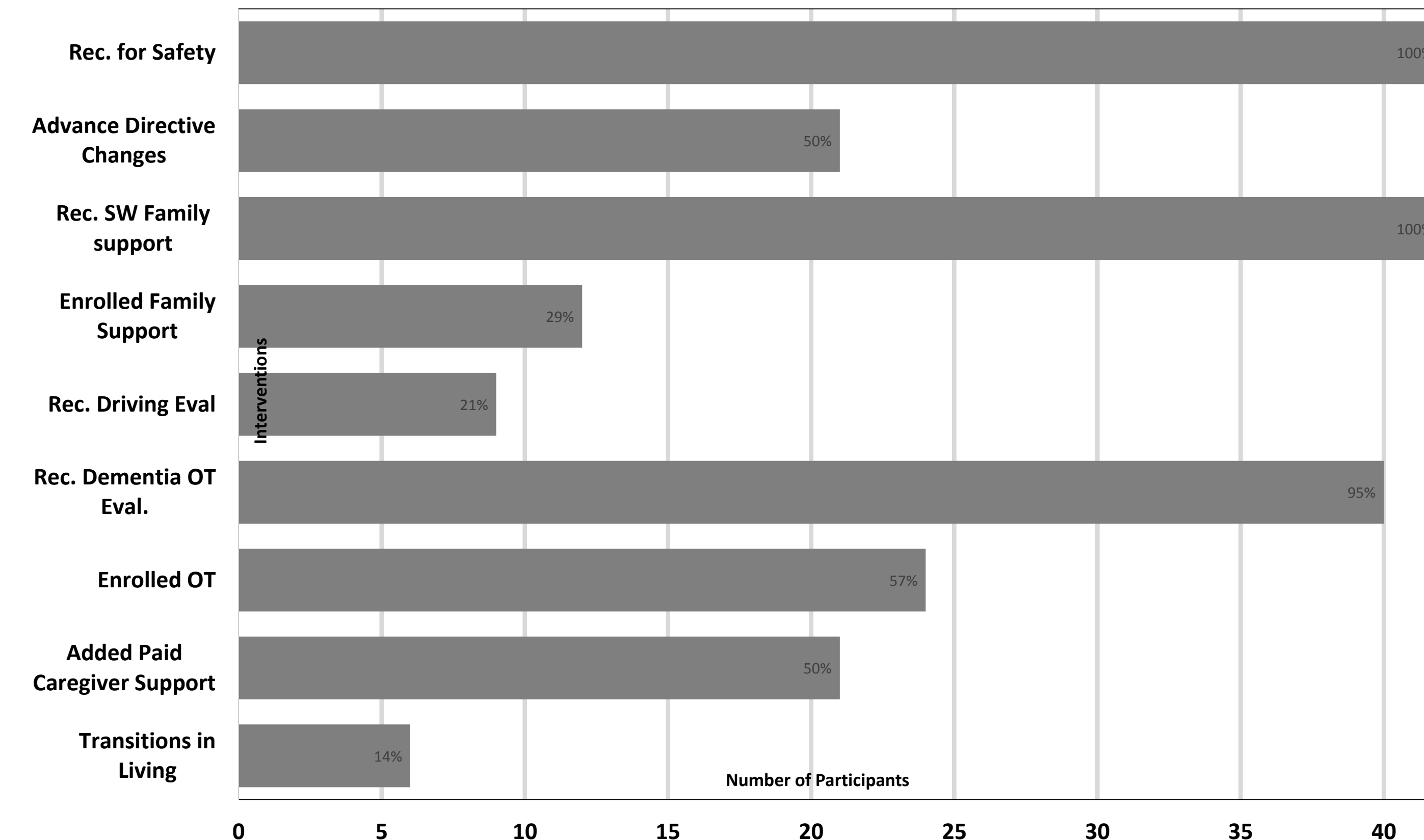
## ADC Demographics

- **Total Number of Participants:** 42
- **Total Female:** 26
- **Total Male:** 16
- **Average Female Age:** 85
- **Average Male Age:** 83
- **Ethnicity:**
  - **Caucasian:** 41
  - **Hispanic:** 1
- **Total Number Hospitalized:** 3

## Living Environment



## ADC Results



## Conclusions

Implementation of the UCLA ADC is feasible in a health care entity such as HSL which provides housing and healthcare for older adults.

### Opportunities:

- Adapting the ADC model from an enclosed healthcare system to an open one
- Adapting ADC for continuing care communities
- Dementia education and outreach to diverse populations
- Overall value added to support PLWD and their families

### Barriers:

- Triage: many inquiries for service require diagnostic assessment therefore we needed to create a triage system to guide patients and family members to services
- Development of clinical infrastructure: time and support needed from IT, billing and personnel knowledgeable in clinic start-up
- Marketing: time needed for building referral relationships across communities
- Creating protected blocks of non-clinical time for the APRN to complete training