Understanding HCBS Quality from the Perspective of People with Dementia

ASA OnAging

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NATIONAL CORE INDICATORS--AGING AND DISABILITIES®

Abstract

Nearly 6 million Americans have an Alzheimer's disease or other dementia (ADRD) diagnoses, with a higher prevalence among Black and Hispanic individuals. ADRD diagnoses are expected to more than double to 14 million by 2060. This has implications for Home and Community-Based Services (HCBS) as people with ADRD often require at least some support. Yet, we know little about peoples' experiences with the services they receive and what programs best support people's needs. We will present data from the National Core Indicators—Aging and Disabilities Adult Consumer Survey to explore demographic trends among those with ADRD and discuss the specific type of HCBS those with ADRD use and the self-reported quality of those services.





Welcome and Who's Here

Who's here:

• Person with Lived Experience, Advocates, Caregivers, State managers, AAAs, Providers, Researchers, Others?

What brought you here?

National Core Indicators: People Driven Data

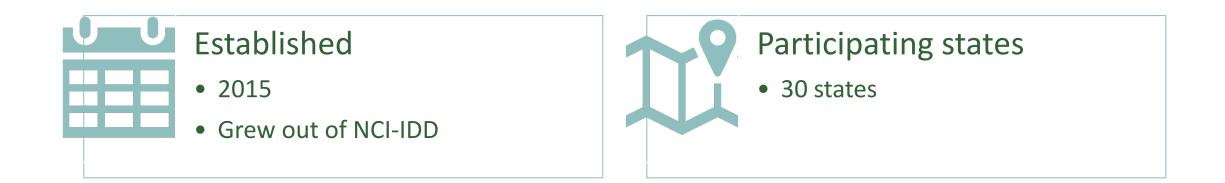
National Core Indicators is an initiative designed to **benchmark and track** performance that support **quality improvement efforts** in state systems supporting people with intellectual and developmental disabilities (NCI-IDD) and older adults and people with physical disabilities (NCI-AD).

Our goal is to **support states in their quality improvement** efforts using valid and reliable data collection efforts that hear directly from the people using and supporting systems.





NCI-AD: An Overview



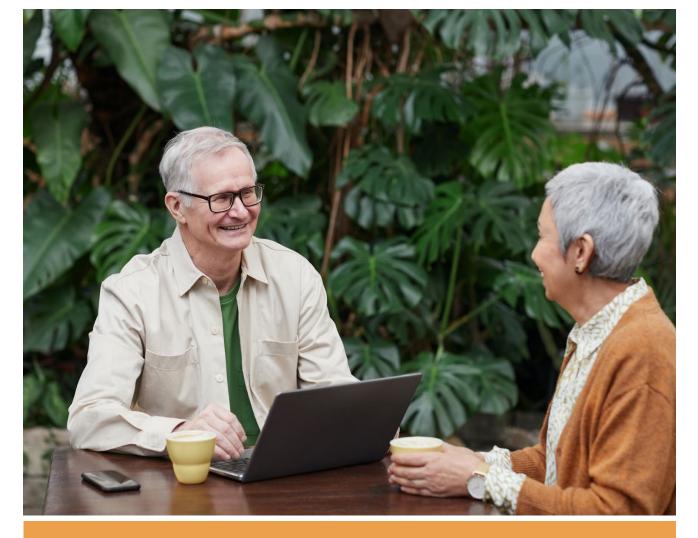
Population addressed

 Older adults and people with physical disabilities receiving LTSS services

Covers multiple domains

- AD domains and indicators
- New State of the Workforce Survey – Aging and Disabilities





Adult Consumer Survey (ACS) A Person-Centered Approach

• Standardized survey with a sample of individuals receiving services

• No pre-screening procedures

• Survey includes:

- Demographic and service-related characteristics typically from existing records
- Main survey section conducted with person receiving services
- Some questions may be answered by a proxy respondent
- Survey conducted in-person, via video conference, over the phone
- Standardized surveyor training
- Allows questions to be reworded or rephrased using familiar names and terms
- Survey portions take 50 minutes on average
- Minimum sample ~400

NCI-AD Domains

| Community participation | Choice and control |
|-------------------------|---|
| Relationships | Satisfaction |
| Service coordination | Care coordination |
| Access to community | Access to needed equipment/modifications |
| Safety | Health care |
| Wellness | Medications |
| Rights and respect | Self-direction |
| Work | Everyday living |
| Affordability | Person-centered planning module (optional) |
| Access to technology | Self-direction (optional) |

Data can help measure differential experience and access to services

| Individual characteristics of people receiving services | Where people live Gender |
|--|--|
| | Race/Ethnicity Disability |
| The nature of their experiences with services | Interaction with staff and case managers |
| | Self-direction |
| | Choice and Control |
| The context of their live | Involvement with family and friends |
| | Access to community involvement |
| | Safety |
| Health and well-being | Utilization of health services |
| | Ability to manage chronic conditions |
| | Mental healthcare |

ADRD Rates Across Years



Has Alzheimer's/Other Dementias Diagnosis



Among those 45-65:

47% report they forget things more often than 12 months ago (47% NCI-AD Average)

64% who forget things more often than 12 months ago have discussed this with a doctor or nurse (68% NCI-AD Average)

These outcomes, along with others like frequent falls, perceived support need may suggest early onset dementia or other conditions

Primary Caregiver Type For ADRD Respondents

64% Paid Non-Family

20% Paid Family or Friend

16% Unpaid Family or Friend

-49% receive additional support from unpaid family or friend

1% Other



NCI-AD State of the Workforce

AGENCY CHARACTERISTICS



68% Provide in-home supports



84%

Private for-profit businesses



32% Report a more than 10% increase in the number of members of the AD population enrolled in or approved for services



29% Report they turned away or stopped accepting referrals due to staffing issues.

TURNOVER AND TENURE



Average **turnover ratio** across states



Just over **1 out of every 3 DSWs** (**37%**) employed as of Dec 31, 2023 had been working at their provider agency for **2 or more years.**

In contrast, almost **1 out of every 2 DSWs** (47%) who *left* their employer in 2023 had been on staff for **less than 6 months**.



Addressing Unmet Needs of HCBS Consumers: Select Outcomes from 2016-2019



Data come from 2016-19 surveys

Analysis <u>excluded...</u>

 Cases with *missing* outcomes for services received and desired services

 Those who lived in nursing homes

• Those <65 years of age

ADRD n = 2,009

No ADRD n = 9,812



Demographics of People with ADRD

- ²/₃ of respondents identified as women
- 52% White; 19% Black; 26% Other
- 77% lived in Metropolitan areas
- 24% lived alone

Demographics of People without ADRD

- ²/₃ of respondents identified as women
- 61% White; 28% Black; 11% Other
- **72%** lived in Metropolitan areas
- **48%** lived alone



Demographics of People with ADRD

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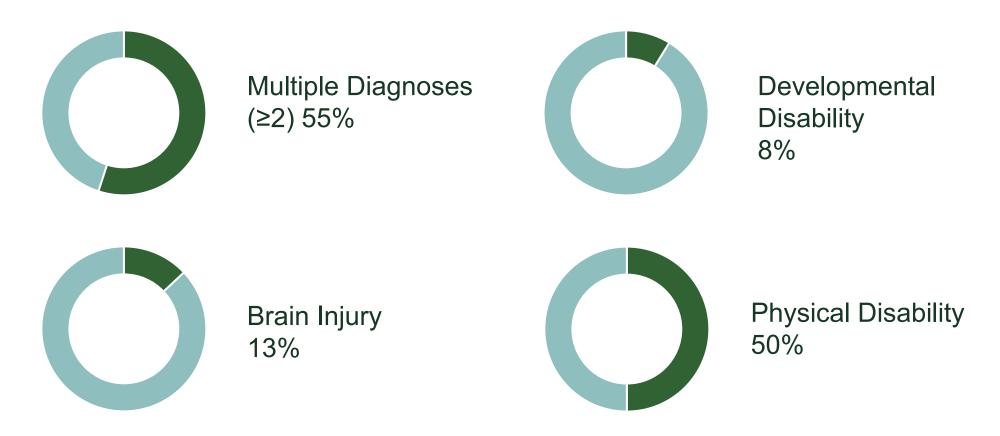
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Comorbidities of People with ADRD (n = 2,009)





Analysis uses outcomes from two questions...

1. What type of paid long-term care supports is the person receiving?

- Item is collected in the Background Information Section
- Must come from administrative records
- Referred to as "Services Received"



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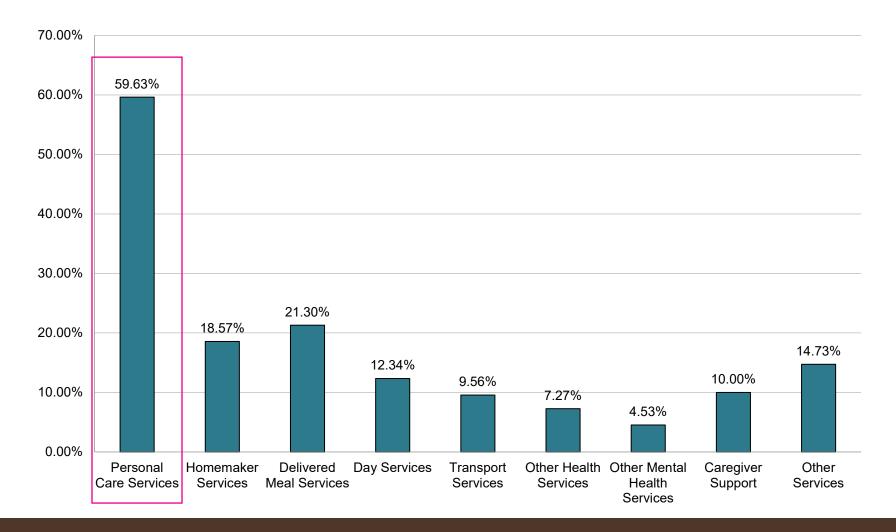
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- Must come from administrative records
- Referred to as "Services Received"

2. What additional long-term care services might help you meet your needs and goals?

- Item answered either by the person receiving services or a proxy respondent
- Only asked of those who reported that that current long-term services and support *did not* currently meet all need
- Referred to as "Desired Services"

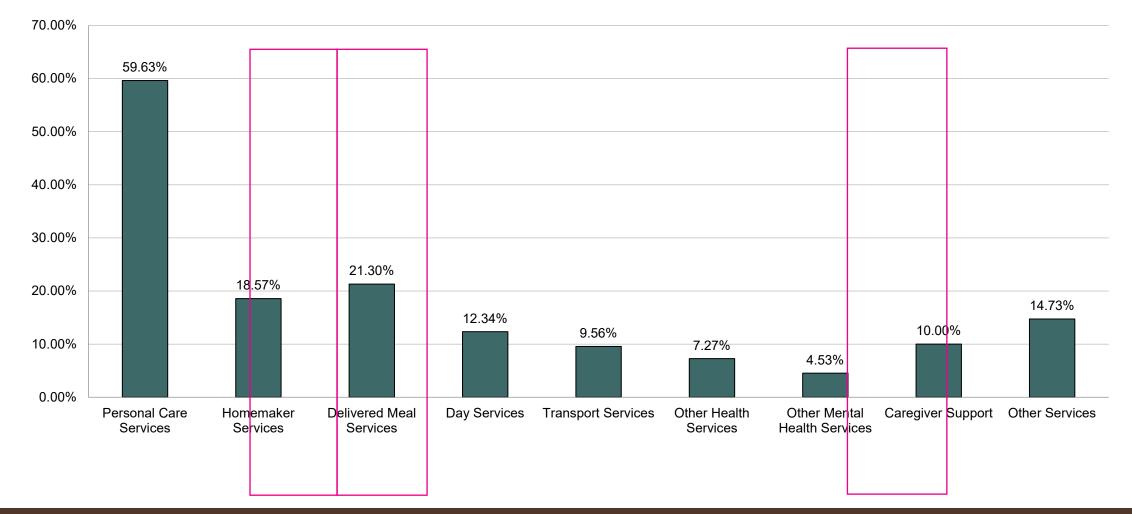


Personal Care Services More Most Used Service Type Among People with ADRD



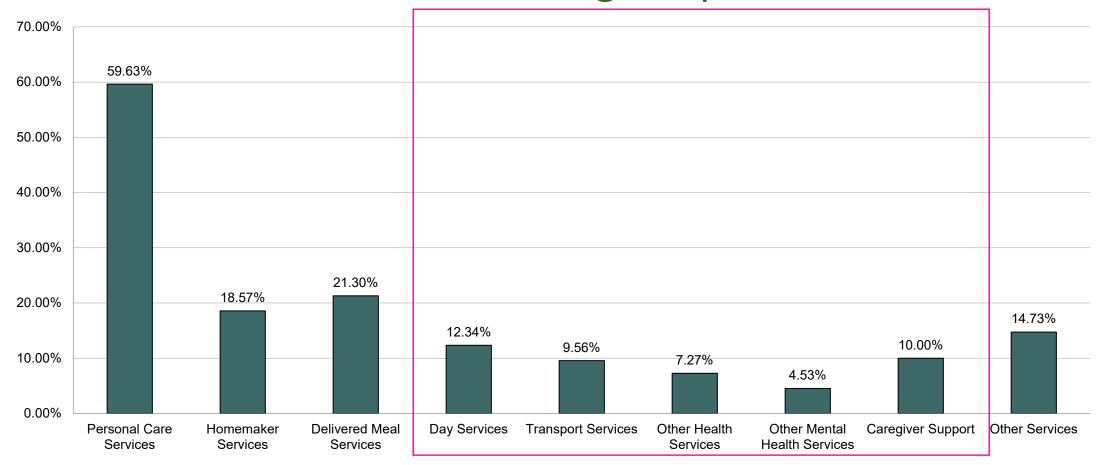


Types of Services Received by People with ADRD: Personal Care Services More Prevalent



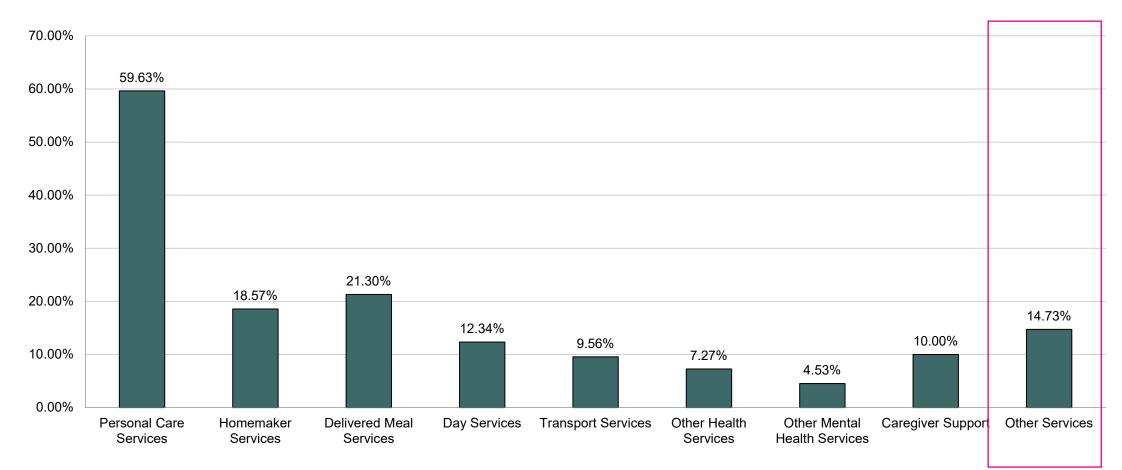


Day Services, Transportation, Other Heath Services, Other Mental Health Services, and Caregiver Support Were Received at Lower Rates Among People With ADRD



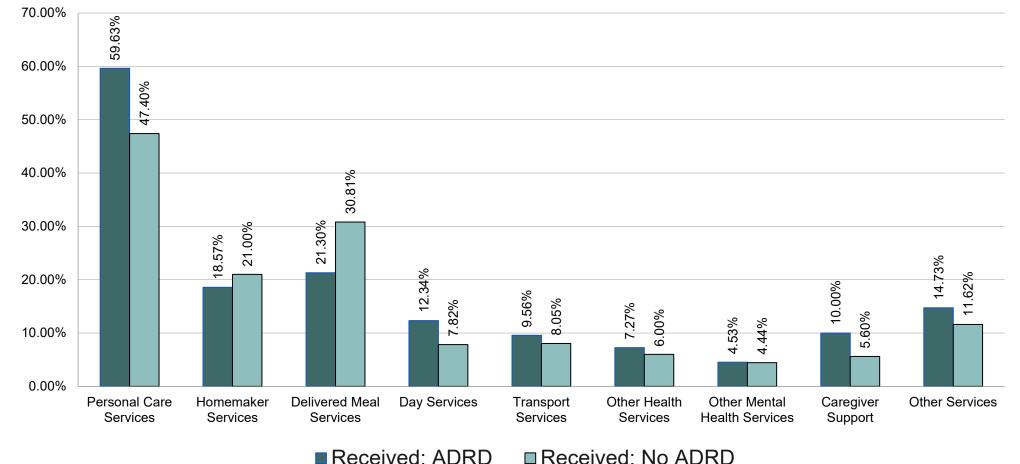


15% of People With ADRD Used Other Services (e.g., Home Modifications, Heating/Cooling Assistance, Pest Control)

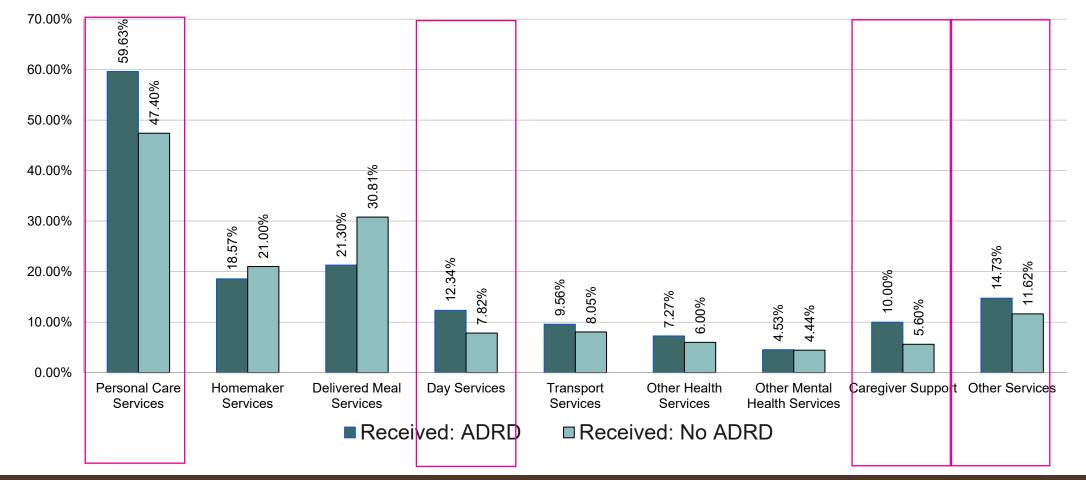




Types of Services Received by People with ADRD vs Without

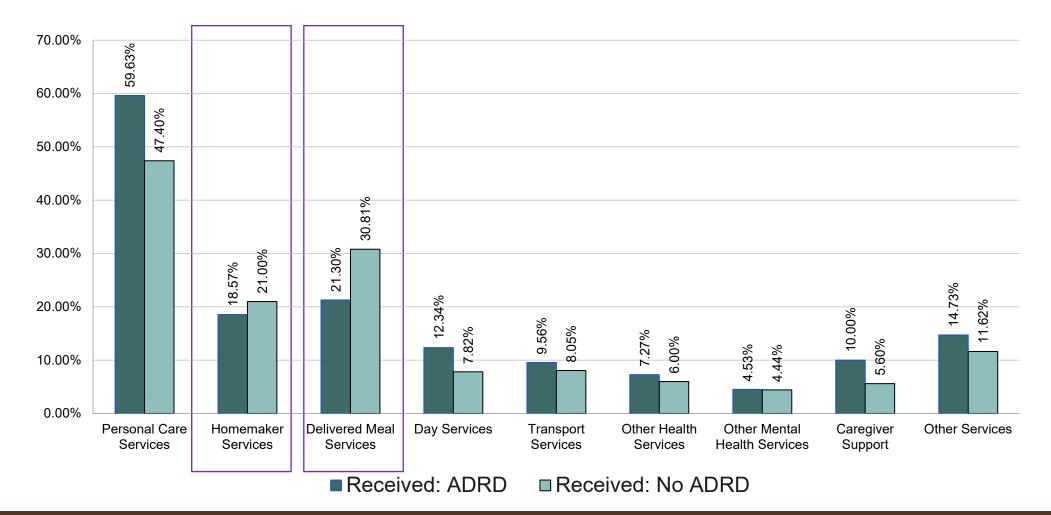


School of Public Health BROWN UNIVERSITY People with ADRD Were *More Likely* Than Those Without to Receive: Personal Care Services, Day Services, Caregiver Support, and Other Services



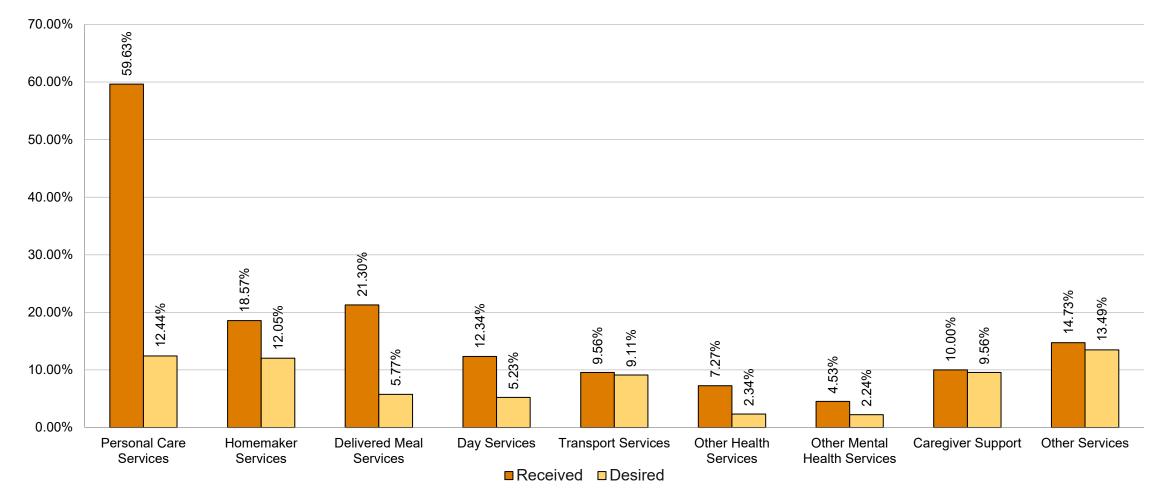


People with ADRD Were *Less Likely* Than Those Without to Receive: Homemaker Services and Home Delivered Meals



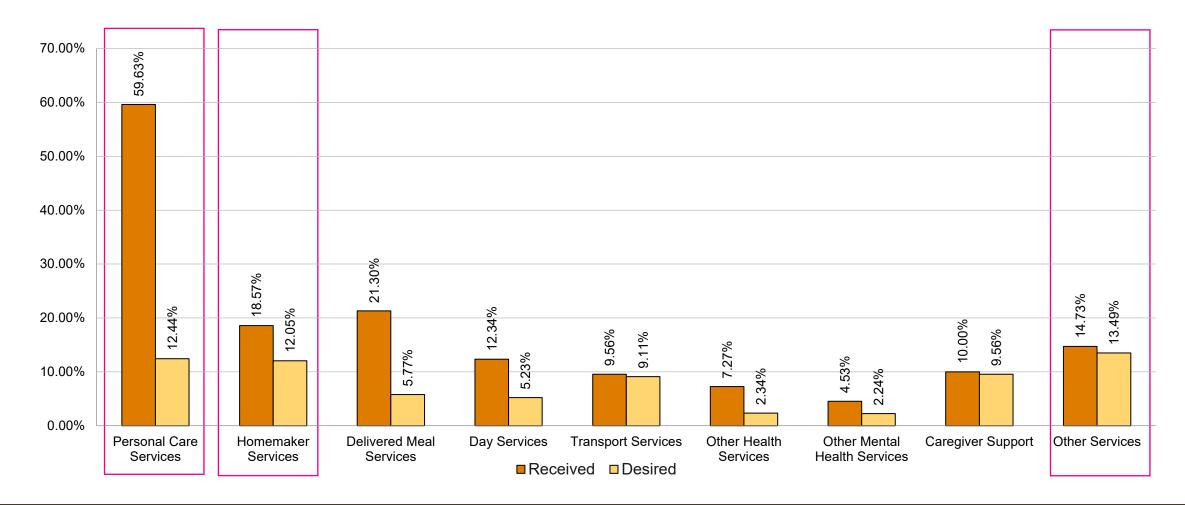


Services Received vs. Desired Among People with ADRD



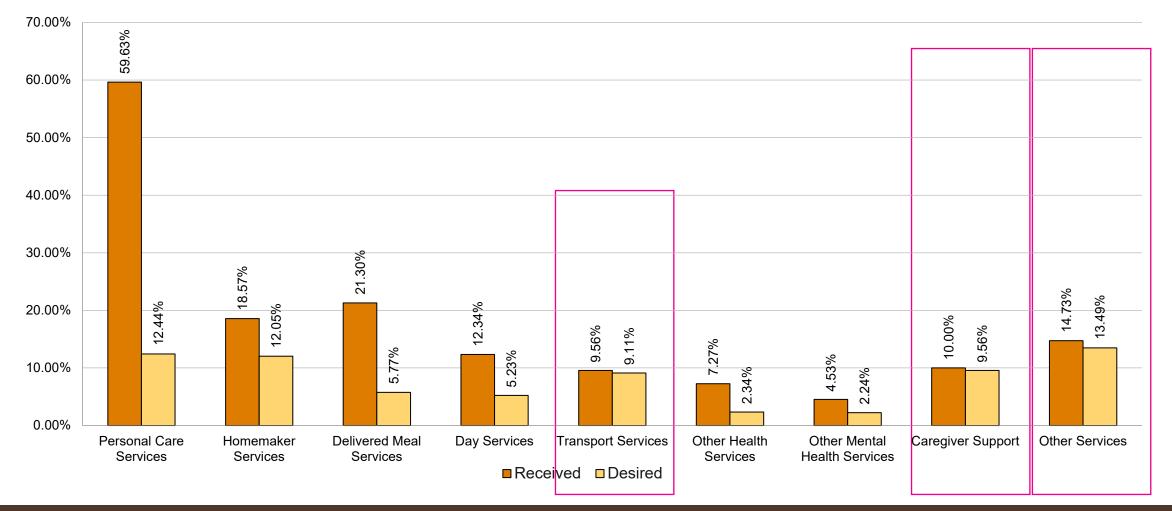


Respondents With ADRD Reporting Needing Personal Care, Homemaker, and Other Services at the Highest Rates



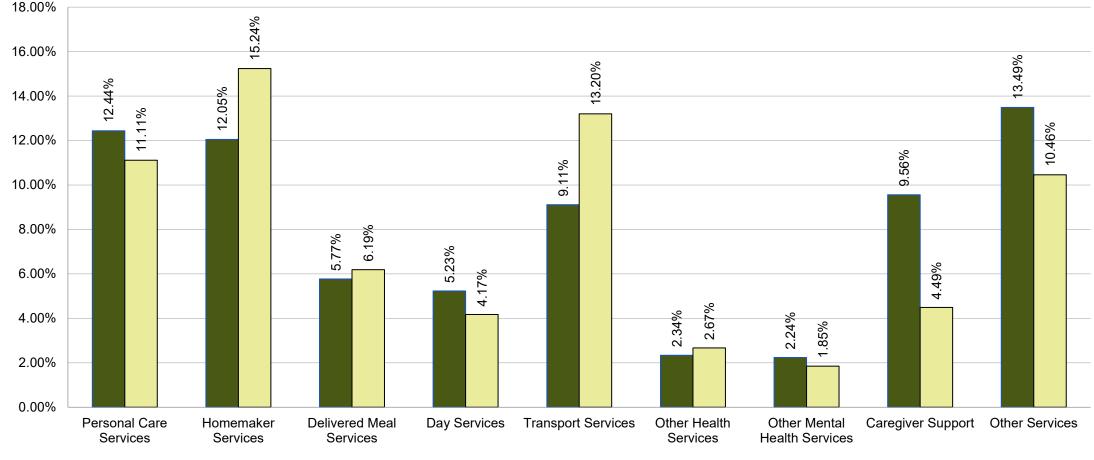


Respondents Received and Reporting Wanting Transportation, Caregiver and Other Services at Similar Levels





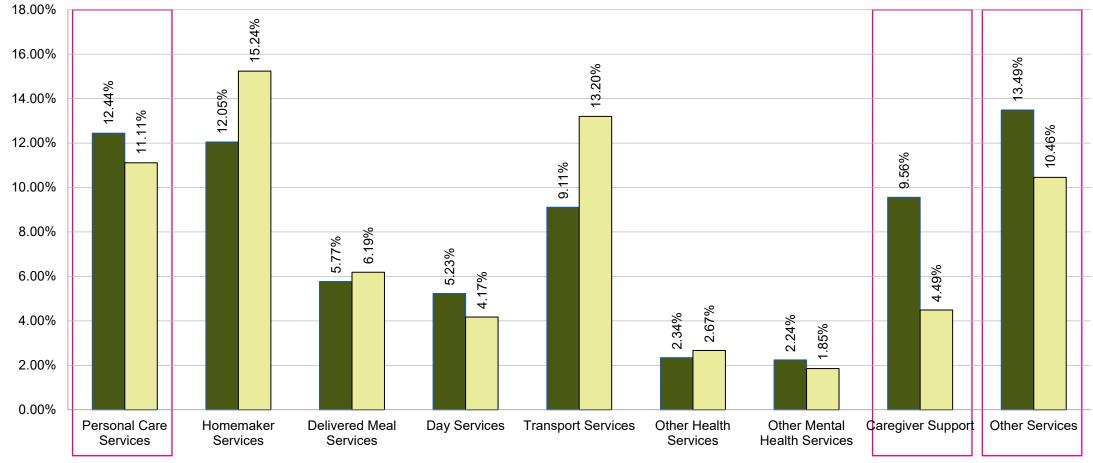
Services Desired Among People With and Without ADRD



Desired: ADRD Desired: No ADRD



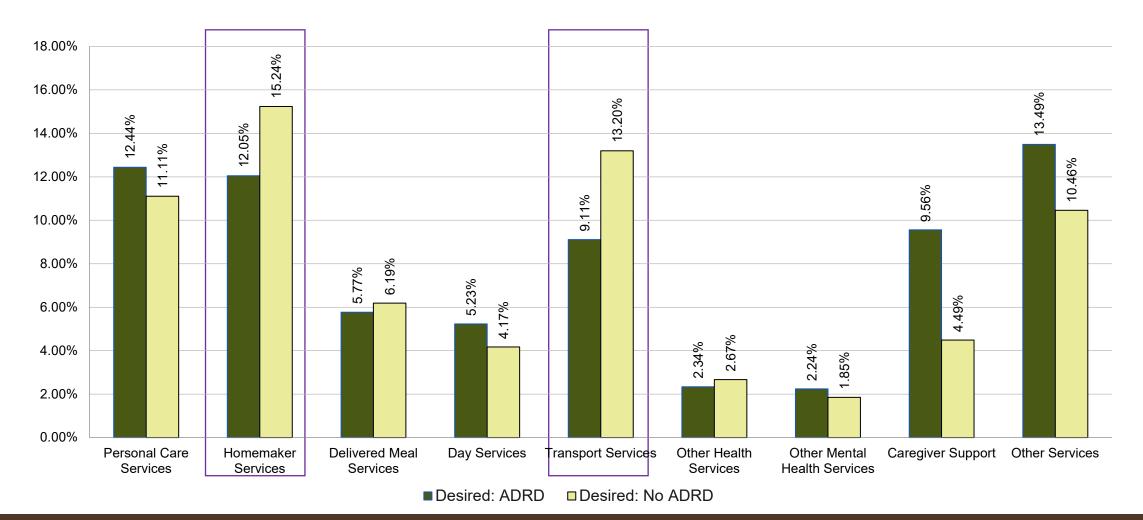
People With ADRD Reporting Needing Personal Care, Caregiver Support, and Other Services at Higher Rates Than Those Without



Desired: ADRD Desired: No ADRD

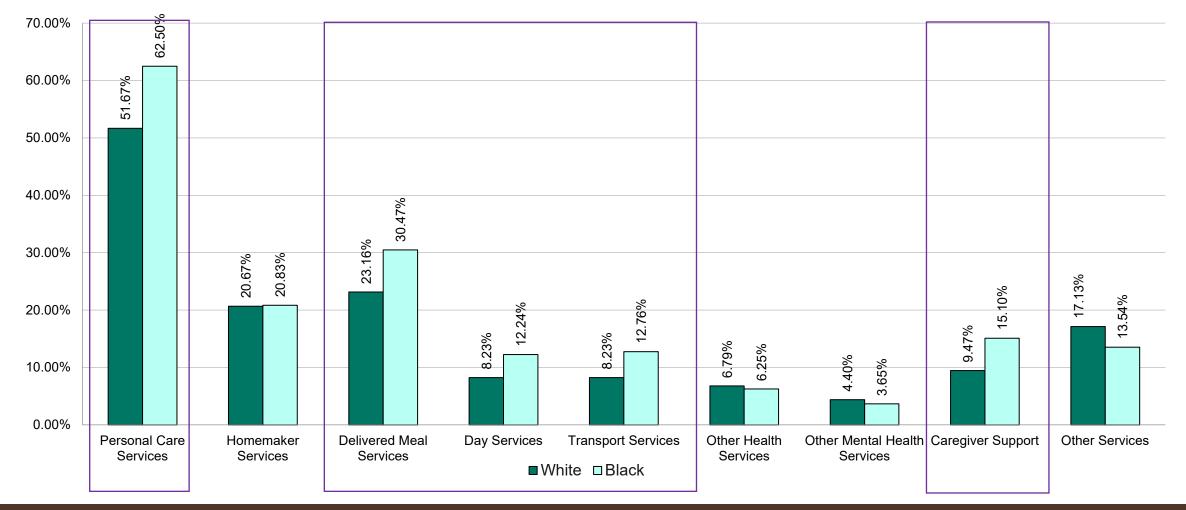


People With ADRD Reporting Needing Homemaker and Transportation at Lower Rates Than Those Without



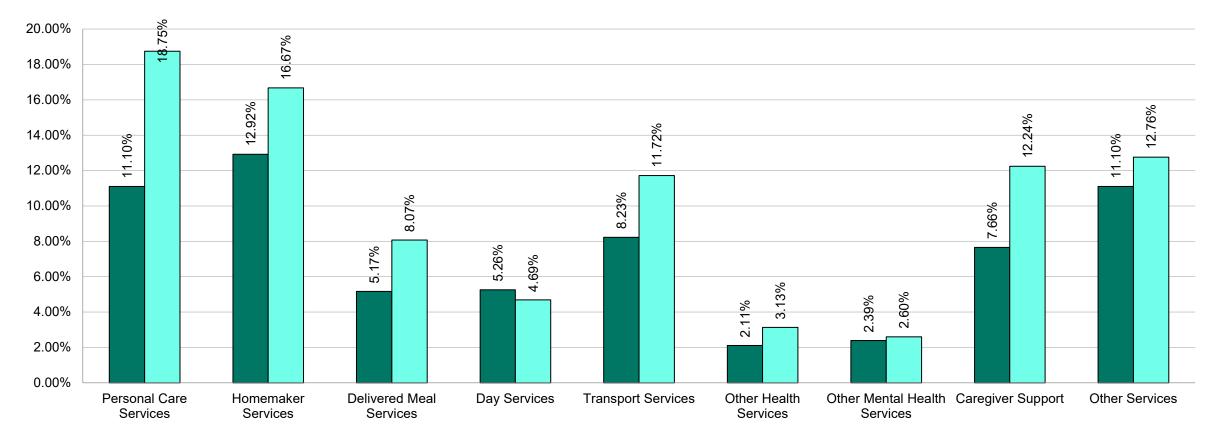


Black Respondents with ADRD Were More Likely to Receive Individual HCBS Compared to White Respondents with ADRD





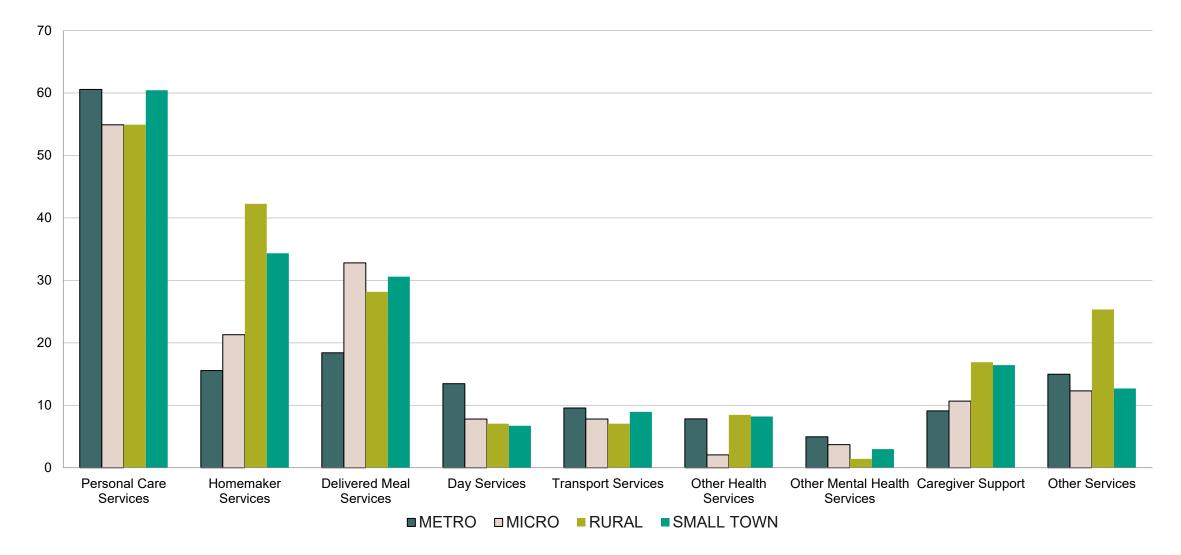
Black Respondents with ADRD Were More Likely to Report Needing Services Compared to White Respondents with ADRD



■White ■Black

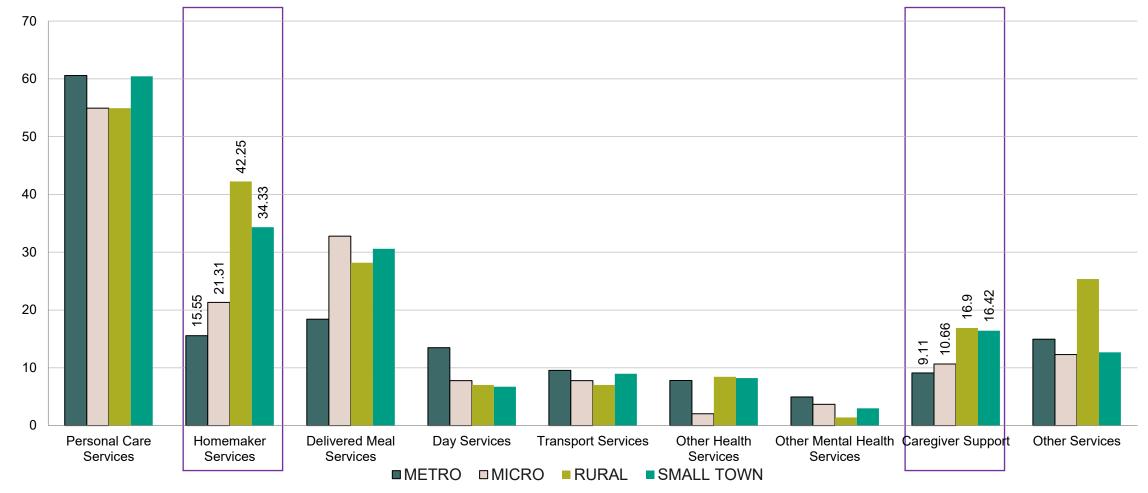


Services Received by People with ADRD by Geography



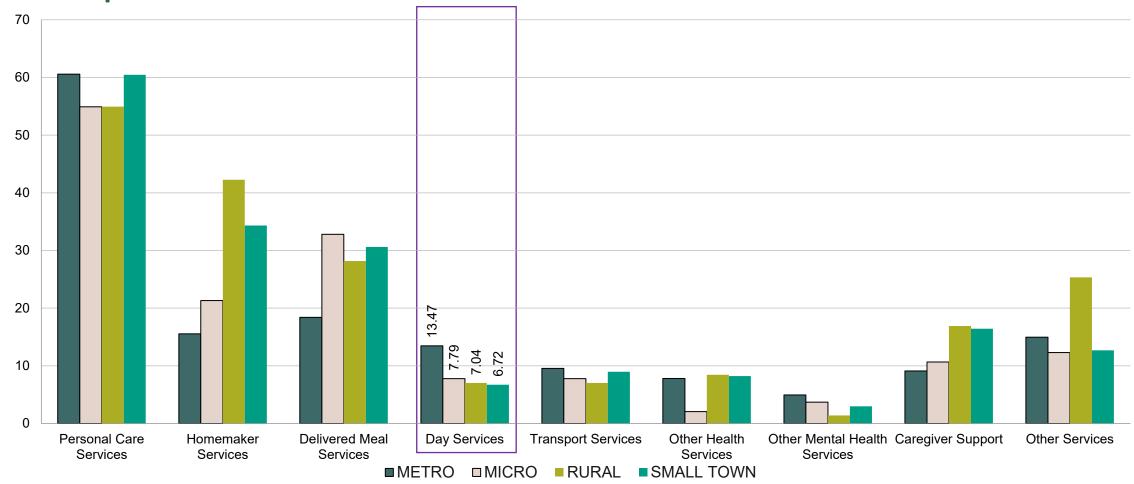


Homemaker services and caregiver support were more commonly used by people in rural areas compared to metro or micropolitan regions



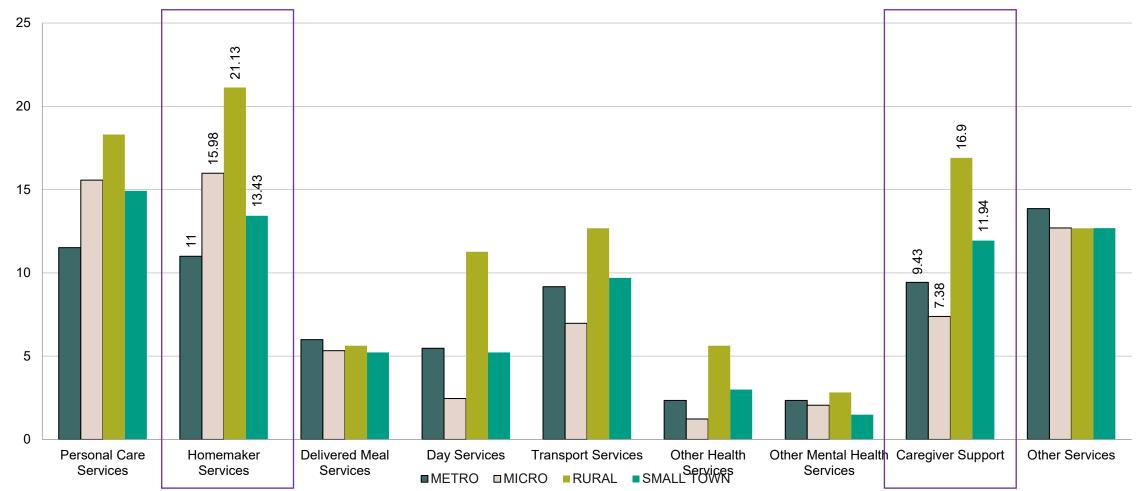


Day Services Were More Likely to be Received in Metropolitan Areas



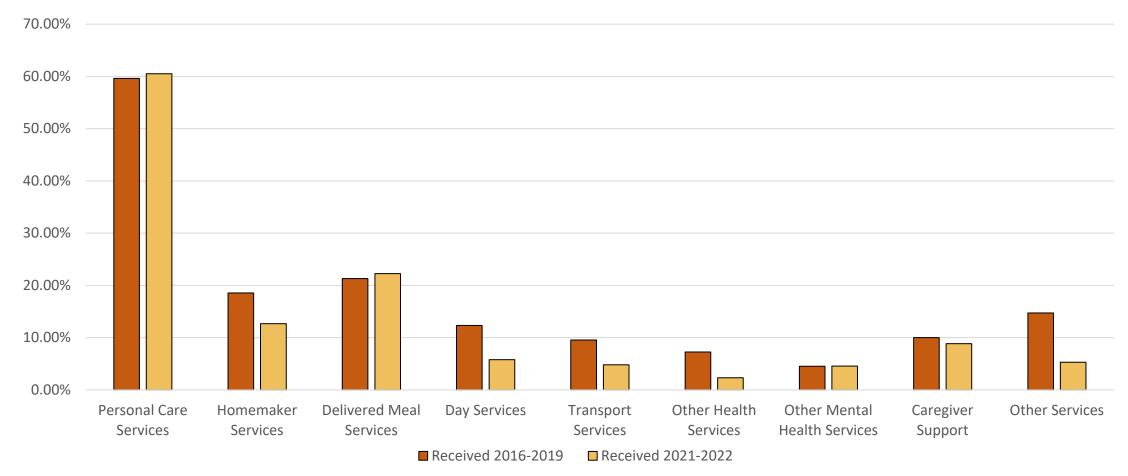


Respondents with ADRD in Rural Areas Were More Likely to Receive Homemaker Services and Caregiver Support and Were More Likely to Report Needing These Services



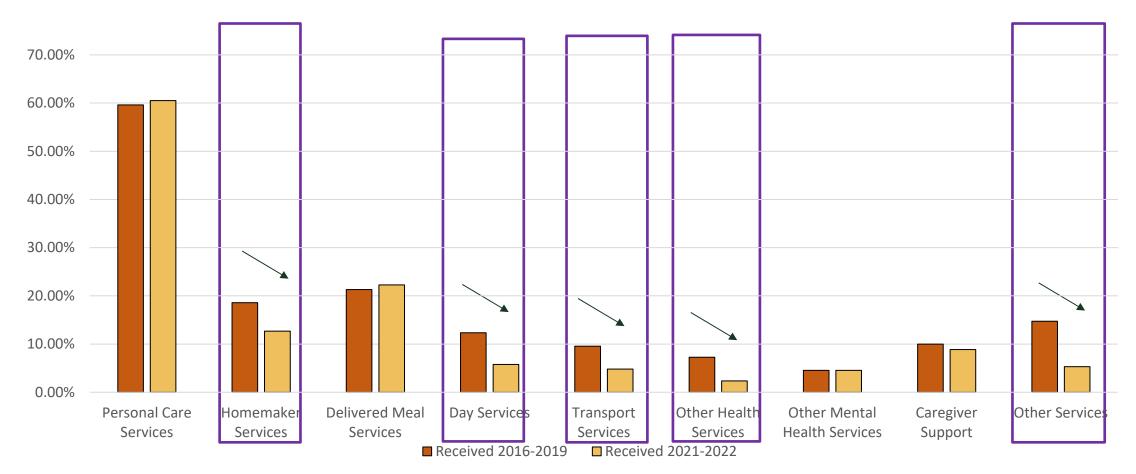


Services Used By People with Dementia Before vs. During the Pandemic

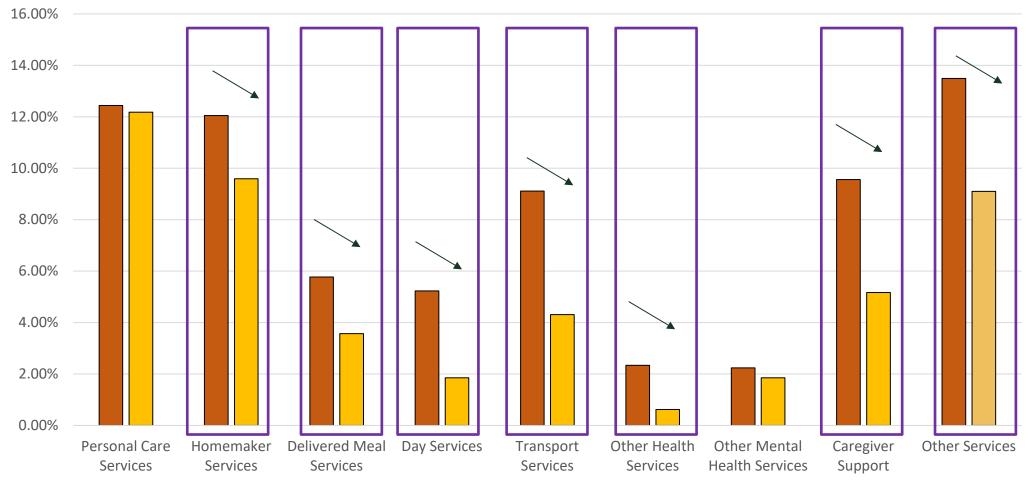




Homemaker, Day, Transportation, and Other Services Showed a Post Pandemic Decline In Services Received



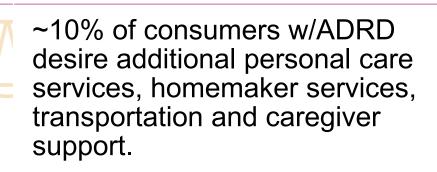
Fewer Respondents with ADRD Reported Needing Homemaker, Delivered Meals, Day, Transportation, Caregiver Support, and Other Services Post Pandemic



Desired 2016-2019 Desired 2021-2022



Discussion



Sociodemographic differences in services received and desired

• E.g., race and rural/urban differences in desired day services, transportation, caregiver support

Future work needs to examine the role of service quality as well as linking unmet needs to healthcare utilization and personcentered outcomes



Thank you

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Websites

- <u>www.nci-ad.org</u>
- https://www.sph.umn.edu/research/projects/equals/

