



Indiana
Family and Social Services Administration

Dementia Strategic Plan
and
Annual Report

State Fiscal Year 2021

In compliance with IC 12-9.1-5

**Dementia Strategic Plan and Annual Report
December 2021**

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Executive Summary

The Dementia Strategic Plan and Annual Report was established during the 2021 legislative session through House Enrolled Act (HEA) 1177. Under Indiana Code (IC) 12-9.1-5, the Indiana Family and Social Services Administration (FSSA) Division of Aging is required to develop a dementia strategic plan to identify and significantly reduce the prevalence of dementia in Indiana.

The Dementia Strategic Plan must do the following:

1. Assess Indiana's current and future status concerning dementia
2. Identify strategies to increase awareness of dementia
3. Identify strategies to enhance Indiana's dementia-based workforce
4. Identify strategies to increase access to home and community-based services for individuals with dementia
5. Identify strategies to enhance the quality of care for individuals with dementia
6. Recommend strategies to decrease health disparities concerning dementia
7. Identify and increase state-based support for Alzheimer's disease research
8. Identify needed state policies or actions to act upon findings

Beginning December 1, 2021, the Division shall submit annually a summary of the dementia strategic plan and a report concerning outcomes from implementation of the dementia strategic plan to the general assembly.

This initial Dementia Strategic Plan was developed based on work and recommendations of the Indiana Dementia Care Advisory Group. In addition, this initial plan includes approaches to be undertaken by the Division of Aging in the coming year to develop a comprehensive Dementia Strategic Plan, building on the prior work of the Advisory Group and addressing gap areas not covered in this initial plan.

Basis for the Dementia Strategic Plan and Annual Report

IC 12-9.1-5 is the basis for the Dementia Strategic Plan and Annual Report. The code has three sections and is reproduced below.

IC 12-9.1-5

Chapter 5. Strategic Plan to Address Dementia

[12-9.1-5-1](#)Division required to develop dementia strategic plan

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IC 12-9.1-5-1

Division required to develop dementia strategic plan

Sec. 1. The division shall develop a dementia strategic plan to identify and significantly reduce the prevalence of dementia in Indiana.

As added by P.L.36-2021, SEC.1.

IC 12-9.1-5-2

Dementia strategic plan requirements

Sec. 2. (a) The dementia strategic plan must include the following:

- (1) Proposed state actions.
- (2) Implementation steps.
- (3) Recommendations to carry out the purposes of the plan.

(b) The dementia strategic plan must do the following:

- (1) Assess Indiana's current and future status concerning dementia, including the following:
 - (A) Determine Indiana trends concerning the diagnosis of dementia, and the current and future economic cost on Indiana.
 - (B) Evaluate the services, resources, and care available to address the needs of individuals with dementia, and their families and caregivers.
 - (C) Identify methods to reduce the financial costs of dementia care while improving care and services in Indiana.
- (2) Identify strategies to increase awareness of dementia, including the following:
 - (A) Educate health care providers:
 - (i) on the importance of early detection and diagnosis of Alzheimer's disease and dementia;
 - (ii) on the importance of an annual wellness visit for cognitive health; and
 - (iii) of Medicare having a billing code for individuals with cognitive impairment.
 - (B) Promote culturally appropriate public health campaigns to increase understanding and awareness of early warning symptoms of dementia, and the value of early detection and diagnosis.
 - (C) Incorporate messages on brain health, including how to reduce the risk of cognitive decline, in existing public health campaigns and in diverse community settings where there is a greater risk of developing dementia.

- (3) Identify strategies to enhance Indiana's dementia based workforce, including the following:
 - (A) Analyze dementia specific training requirements for paid professionals engaged in the care of individuals with dementia in institutions and home and community based settings.
 - (B) Increase the number of individuals pursuing careers in dementia care and geriatric occupations to meet future state needs.
 - (C) Enhance the capacity of adult protective services workers and law enforcement to properly respond to individuals with dementia.
- (4) Identify strategies to increase access to home and community based services for individuals with dementia, including the following:
 - (A) Identify the type, cost, and variety of dementia services in Indiana.
 - (B) Assess capacity and access to adult day care, respite care, assisted living, and long term care services.
 - (C) Identify methods to expand Indiana's health care system capacity to meet the growing number and needs of individuals with Alzheimer's disease and dementia.
- (5) Identify strategies to enhance the quality of care for individuals with dementia, including the following:
 - (A) Assess quality care measures for long term care facilities, assisted living facilities, and residential programs available to care for individuals with dementia.
 - (B) Uncover any existing gaps in dementia services and determine a plan to cover the gap in service.
 - (C) Identify methods to improve dementia services provided in home and community based settings.
- (6) Recommend strategies to decrease health disparities concerning dementia in ethnic and racial populations in Indiana.
- (7) Identify and increase state based support for Alzheimer's disease research through Indiana universities and other resources.
- (8) Identify needed state policies or actions to act upon findings under this section and implement the recommendations of the plan, setting forth a time frame for implementation.

As added by P.L.36-2021, SEC.1.

IC 12-9.1-5-3

Annual report

Sec. 3. (a) Beginning December 1, 2021, the division shall submit annually:

- (1) a summary of the dementia strategic plan; and
- (2) a report concerning outcomes from implementation of the dementia strategic plan;

to the general assembly.

(b) The dementia strategic plan and report required under subsection (a) must be submitted in an electronic format under [IC 5-14-6](#).

As added by P.L.36-2021, SEC.1.

Dementia Strategic Plan

Introduction

Like the rest of the nation, Indiana is experiencing a significant population change due to the aging of the baby-boom generation. According to figures provided by the Alzheimer's Association, by the year 2025, this entire generation will be age 60 and over, with the largest population growth occurring in those 85 and older. It is further estimated that 17% or 1.1 million of the more than 6.6 million Hoosiers are currently age 65 or older. Over 110,000 of these seniors (and others with younger onset) have Alzheimer's disease and/or a related type of dementia causing cognitive impairment to the extent that functional limitations necessitate assistance in activities of daily living by another individual, frequently a family caregiver. The vast majority (80%) of persons with dementia still reside in community settings including many that live alone.

According to the Alzheimer's Association, approximately 215,000 Hoosiers are providing unpaid care for someone with dementia. Caring for and supporting persons with dementia is complicated and often comes with specific challenges such as behavioral symptoms and mobility problems that may lead to significant caregiver stress. Most caregivers, direct care workers and health care professionals have little training in dementia care. Indiana's long-term services and supports (LTSS) system has a broad set of home- and community-based services (HCBS) and facility-based or institutional care that help meet the needs of persons with functional limitations; and is collaborating with partners across the state to enhance these services so as to better meet the specific needs of persons with dementia and their caregivers.

Indiana is diligently working toward improving FSSA's LTSS system. Person-centeredness is a seminal pillar of these efforts. Efforts are aimed at designing a system in which older Hoosiers, that qualify for Medicaid, regardless of where they live in the state or who pays for their care, and their caregivers will be empowered to make informed decisions, to exercise control over their LTSS needs, and to achieve their personal goals and preferences. Ultimately, it will be a one-stop coordinated system that seamlessly connects individuals to the full range of LTSS options, expanding access to services and supports in an unbiased manner.

Access to FSSA's LTSS system is coordinated by FSSA's Division of Aging and Office of Medicaid Policy and Planning. As well, FSSA engages with key stakeholders in an effort to implement statewide person-centered planning. In recent years, FSSA launched the INconnect Alliance campaign. Its purpose is to enhance public outreach and partnership with organizations that provide referrals for wraparound LTSS services. Through its online website (www.in.gov/fssa/inconnectalliance), INconnect Alliance provides access to information and resources. Information and recourses are also available by calling toll free 800-713-9023. FSSA's LTSS system can also be accessed through the statewide network of 15 Area Agencies on Aging (AAAs). AAAs provide LTSS information, referral services, and options counseling which is unbiased person-centered counseling. Options counselors help identify and connect Older Hoosiers and their support network or friends and family with needed services. This includes services available in their community, federal and state programs funded under the

Older Americans Act Title III Supportive Services, Indiana’s Community and Home Options to Institutional Care for the Elderly and Disabled program (CHOICE), and the Medicaid HCBS Aged and Disabled Waiver. Services offered under these programs—some of which have specific eligibility criteria—include but are not limited to transportation, congregate and home-delivered meals, personal care assistance with activities of daily living, home modifications, personal emergency response system, caregiver support, respite care, adult day services, and assisted living including memory care.

While recognizing the urgent need to enhance FSSA’s LTSS system for the growing number of Hoosiers with dementia and their caregivers, in 2019 FSSA’s Division of Aging coordinated with community partners to launch the Dementia Care Initiative which is aimed at improving HCBS for people with dementia and their caregivers. Planning and implementation of these efforts was facilitated by the Indiana Dementia Care Advisory Group that consists of members representing more than two dozen partner organizations and agencies that are dedicated to this cause (see Table 1). FSSA’s goal for the Dementia Care Initiative is to further develop, coordinate, and expand services that optimize the quality of life for people with dementia and their caregivers. Over the past two years, the Indiana Dementia Care Advisory Group has worked to catalog the array of dementia related services in Indiana and to establish priorities that result in easier access to quality services to support the growing number of Hoosiers impacted by Alzheimer’s disease and related dementias.

The Dementia Strategic Plan was established by House Enrolled Act (HEA) 1177 – 2021. Under Indiana Code (IC) 12-9.1-5, FSSA’s Division of Aging is required to develop a dementia strategic plan to identify and significantly reduce the prevalence of dementia in Indiana. This initial Dementia Strategic Plan was developed based on work and recommendations of the Indiana Dementia Care Advisory Group. In addition, this initial plan includes approaches that will be undertaken by the Division of Aging in the coming year to develop a comprehensive Dementia Strategic Plan, which builds on the prior work of the Advisory Group.

Table 1: Indiana Dementia Care Advisory Group*

1. AARP Indiana
2. Aging & In-Home Services of NE Indiana (Area 3)
3. Alzheimer's Association Greater Indiana Chapter
4. CHOICE Board
5. CICOA Aging & In-Home Solutions (Area 8)
6. Commission on Aging
7. Dementia Friends Indiana (DFI)
8. Indiana Association of Adult Day Services (IAADS)
9. Indiana Association of Area Agencies on Aging (IAAAA)
10. Indiana Association for Home & Hospice Care (IAHHC)
11. Indiana Center for Assisted Living (INCAL)
12. Indiana Department of Health (IDOH)
13. Indiana Department of Homeland Security (IDHS)
14. Indiana Health Care Association (IHCA)
15. Indiana Hospital Association (IHA)
16. Indiana University Center for Aging Research (IU CAR)
17. Indiana University Center for Health Innovation and Implementation Science (IU CHIIS)
18. Indiana University Geriatrics Workforce Enhancement Program (IU GWEP)
19. Indiana University Health Bloomington
20. LifeStream Services (Area 6 & Area 9)
21. Qsource, Medicare Quality Improvement Organization (QIO)
22. Real Services (Area 2)
23. Sandra Eskenazi Center for Brain Care Innovation (SECBCI)
24. The Solutions Center
25. Thrive Alliance (Area 11)
26. University of Indianapolis Center for Aging & Community (UIndy CAC)
27. University of Southern Indiana Geriatrics Workforce Enhancement Program (USI GWEP)

*Members of the Indiana Dementia Care Advisory Group and FSSA's Division of Aging contributed to the final recommendations of this report.

IC 12-9.1-5-2(b)

(1) Assess Indiana’s current and future status concerning dementia, including the following:

(A) Determine Indiana trends concerning the diagnosis of dementia, and the current and future economic cost on Indiana.

(B) Evaluate the services, resources, and care available to address the needs of individuals with dementia, and their families and caregivers.

(C) Identify methods to reduce the financial costs of dementia care while improving care and services in Indiana.

(A) Determine Indiana trends concerning the diagnosis of dementia, and the current and future economic cost on Indiana.

According to the latest statistics from the Alzheimer’s Association, 110,000 Hoosiers are living with Alzheimer’s Disease, and this number is expected to increase by 18% to 130,000 by 2025. In addition, 215,000 Hoosiers are providing unpaid care for someone with dementia. In 2020, approximately \$1.054 billion in Indiana Medicaid costs of care were for people with Alzheimer’s Disease and related dementias. It is anticipated that these costs will increase by 17% annually.

In the coming year, FSSA’s Division of Aging and the Indiana Dementia Care Advisory Group will gain further information on access to home and community-based services (HCBS) for individuals with dementia from the 2020 Caregiver Survey and 2022 Behavioral Risk Factor Surveillance Survey Cognitive Decline module. The information will inform the 2022 Dementia Strategic Plan strategies to increase access to HCBS for these individuals.

(B) Evaluate the services, resources, and care available to address the needs of individuals with dementia, and their families and caregivers.

In 2019, FSSA’s Division of Aging and community partners launched the Dementia Care Initiative with the goal to develop and expand dementia-capable HCBS that maximize the ability of people with dementia to remain independent in the community, which includes support for caregivers. The Indiana Dementia Care Advisory Group was formed to spearhead the planning and implementation of Indiana’s Dementia Care Initiative. Responsibilities of the organizations and agencies represented on the Advisory Group are to: (a) actively engage in the planning process; (b) coordinate with activities of their organization; (c) identify additional resources and opportunities; (d) develop strategies to address barriers and challenges; and (e) identify resources and avenues for sustainability.

Chaired by the Division of Aging Medical Director, the Advisory Group had its kickoff meeting in June 2019. Ten additional meetings were held over the subsequent 16 months, culminating in the Advisory Group's most recent meeting in October 2020, at which time final recommendations to the Division of Aging were discussed and finalized. A planning team organized Advisory Group meetings and included leadership of the Alzheimer's Association Greater Indiana Chapter and Dementia Friends Indiana.

Initially, an environmental scan was conducted to help determine the current status of dementia care services and supports in Indiana. Over the span of five meetings held between October 2019 and February 2020, 19 organizations and agencies of the Advisory Group each presented on the current and planned activities in dementia care, including: (a) supporting people with dementia; (b) supporting caregivers; and (c) training programs (see Table 2). In June 2020, the Advisory Group met virtually due to the COVID-19 pandemic. There, organizations discussed new dementia care resources and shared their solutions to the difficulties encountered in supporting persons living with dementia and caregivers during the pandemic. During three virtual meetings held in the summer of 2020, the Advisory Group discussed the current status of Indiana's dementia-capable HCBS and developed corresponding recommendations. Note, the scope of the recommendations is areas for greatest opportunity of improvement within the coming two years. In evaluating the strengths and weaknesses of Indiana's dementia care, the Advisory Group reviewed the components of a "model dementia-capable system", which are used by the Administration for Community Living, U.S. Department of Health and Human Services to assess the dementia-capability of states and communities. The seven model components of a dementia-capable HCBS system are as follows:

1. Identify people with possible dementia and recommend that they see a physician for a timely, accurate diagnosis to rule out reversible causes of dementia or conditions that resemble it.
2. Ensure that program eligibility and resource allocation take into account the impact of cognitive disabilities.
3. Ensure that staff communicate effectively with people with dementia and their caregivers and provide services that are person and family-centered, offer self-direction of services, and are culturally appropriate.
4. Educate workers to identify possible dementia and understand the symptoms of dementia and appropriate services.
5. Educate the public about brain health, including information about the risk factors associated with developing dementia, first signs of cognitive problems, management of symptoms if individuals have dementia, support programs, and opportunities to participate in research.
6. Implement quality assurance systems that measure how effectively providers serve people with dementia and their caregivers.
7. Encourage development of dementia-friendly communities, which include key parts of dementia-capability.

The Advisory Group identified that Indiana best performs key component seven (communities). The key components identified for greatest opportunity for improvement were: one (people);

four (workers); and five (public). Also, the Advisory Group indicated emphasis should be placed on heightening the public's awareness and knowledge of dementia and instilling the desire to be evaluated for dementia. Additionally, the Advisory Group concluded that content on dementia is readily available, but usefulness of such content will fall short if the general public's desire to expand their knowledge of dementia lacks. Factors cited as significant obstacles to the public's increased awareness and desire to expand their knowledge were denial, fear, and stigma. In response, the Advisory Group decided to utilize the approach taken by Dementia Friends Indiana that helps overcome such obstacles and promotes awareness and expands the public's knowledge of dementia.

In the coming year, FSSA's Division of Aging and the Indiana Dementia Care Advisory Group will further evaluate the services, resources, and care available to address the needs of individuals with dementia, and their families and caregivers.

(C) Identify methods to reduce the financial costs of dementia care while improving care and services in Indiana.

In the coming year, FSSA's Division of Aging and the Indiana Dementia Care Advisory Group will gain further information on the financial costs of dementia care, and in the 2022 Dementia Strategic Plan identify methods to reduce these costs.

Table 2: Advisory Group Dementia Care Activities*

Organization	Dementia Care Activities		
	Supporting PLWD	Supporting Caregivers	Training Programs
Dementia Friends Indiana			<ul style="list-style-type: none"> • Public • Community Partners • Caregivers • Workforce
Alzheimer’s Association	<ul style="list-style-type: none"> • Social Engagement • Physician Referral • Public Policy 	<ul style="list-style-type: none"> • 24/7 Helpline • Care Consultation • Support Groups • Community Resource Finder 	<ul style="list-style-type: none"> • Public • Caregivers • Volunteers
REAL Services	<ul style="list-style-type: none"> • Memory Cafes • Living Life Well Social Group • Specialty Options Counseling/Care Management • Adult Day Village 	<ul style="list-style-type: none"> • Support Groups • Resource Fair • Gathering Center 	<ul style="list-style-type: none"> • Public • Community Partners • Caregivers • Volunteers • Workforce
Sandra Eskenazi Center for Brain Care Innovation	<ul style="list-style-type: none"> • Interprofessional Assessment • Comprehensive Dementia Care • Specialty Care Management 	<ul style="list-style-type: none"> • Care Coach 	<ul style="list-style-type: none"> • Caregivers • Workforce
Aging & In-Home Services of Northeast Indiana		<ul style="list-style-type: none"> • Coaching Program • Support Groups 	<ul style="list-style-type: none"> • Public • Community Partners • Caregivers
AARP Indiana	<ul style="list-style-type: none"> • Public Policy 	<ul style="list-style-type: none"> • Community Resource Finder • Resource Guide 	<ul style="list-style-type: none"> • Public • Caregivers
LifeStream Services			<ul style="list-style-type: none"> • Public • Community Partners • Caregivers • Workforce

Table 2: Advisory Group Dementia Care Activities* (continued)

Organization	Dementia Care Activities		
	Supporting PLWD	Supporting Caregivers	Training Programs
Indiana Department of Homeland Security			<ul style="list-style-type: none"> • Public • Community Partners • First Responders (Fire Depts, EMS, etc.) • Workforce
Qsource, Medicare QIO	<ul style="list-style-type: none"> • LTC Facility Quality 		<ul style="list-style-type: none"> • Community Partners • Volunteers • Workforce
Indiana State Department of Health	<ul style="list-style-type: none"> • LTC Facility Licensure • LTC Facility Quality 		<ul style="list-style-type: none"> • Community Partners • Workforce
CICOA Aging & In-Home Solutions	<ul style="list-style-type: none"> • Specialty Options Counseling 	<ul style="list-style-type: none"> • Workshops • Counseling 	<ul style="list-style-type: none"> • Public • Community Partners • Caregivers • Workforce
Indiana University GWEP	<ul style="list-style-type: none"> • Memory Screening • Geriatrics Consultation & Primary Care • Primary Care 	<ul style="list-style-type: none"> • Community Resources 	<ul style="list-style-type: none"> • Community Partners • Caregivers • Workforce
University of Sothern Indiana GWEP	<ul style="list-style-type: none"> • Memory Screening • Primary Care 	<ul style="list-style-type: none"> • Workshops • Community Resources 	<ul style="list-style-type: none"> • PLWD • Community Partners • Caregivers • Workforce
IHCA/INCAL	<ul style="list-style-type: none"> • Nursing Facilities • Assisted Living • Memory Care • Independent Living 		<ul style="list-style-type: none"> • Community Partners • Workforce

Table 2: Advisory Group Dementia Care Activities* (continued)

Organization	Dementia Care Activities		
	Supporting PLWD	Supporting Caregivers	Training Programs
The Solutions Center			<ul style="list-style-type: none"> • Public • Community Partners • Workforce
Thrive Alliance			<ul style="list-style-type: none"> • Public • Community Partners • Caregivers • Volunteers • First Responders
Indiana Association of Adult Day Services	<ul style="list-style-type: none"> • Adult Day Services Centers 	<ul style="list-style-type: none"> • Respite • Informal Support • Support Groups • Retreats 	<ul style="list-style-type: none"> • Community Partners • Caregivers • Workforce
University of Indianapolis Center for Aging & Community			<ul style="list-style-type: none"> • Community Partners • Workforce
Indiana Commission on Aging	<ul style="list-style-type: none"> • Living Longer / Living Better Initiatives in Indiana Communities 	<ul style="list-style-type: none"> • Living Longer / Living Better Initiatives in Indiana Communities 	<ul style="list-style-type: none"> • Public • Community Partners • Caregivers • Volunteers • Workforce
Indiana AAAs / Indiana Association of Area Agencies on Aging	<ul style="list-style-type: none"> • In-home Assessment • Options Counseling • Care Planning • HCBS Care Management 	<ul style="list-style-type: none"> • Support Groups • Caregiver Respite Services 	

*Abbreviations: PLWD – People Living With Dementia; QIO – Quality Improvement Organization; GWEP – Geriatrics Workforce Enhancement Program; HCBS – Home and Community Based Services

IC 12-9.1-5-2(b)

(2) Identify strategies to increase awareness of dementia, including the following:

(A) Educate health care providers:

- i. on the importance of early detection and diagnosis of Alzheimer's disease and dementia;**
- ii. on the importance of an annual wellness visit for cognitive health; and**
- iii. of Medicare having a billing code for individuals with cognitive impairment**

(B) Promote culturally appropriate public health campaigns to increase understanding and awareness of early warning symptoms of dementia, and the value of early detection and diagnosis.

(C) Incorporate messages on brain health, including how to reduce the risk of cognitive decline, in existing public health campaigns and in diverse community settings where there is a greater risk of developing dementia.

The Final Recommendations to FSSA's Division of Aging for Improving Indiana's Dementia-Capable HCBS System as submitted October 27, 2020, are consistent with this section of the Dementia Strategic Plan are reproduced below.

Recommendation/Goal #1: Hoosiers will have an awareness of the risk factors and early signs of dementia and know how to obtain additional information about dementia symptom management, support programs, and opportunities to participate in research.

Strategies

- a) Conduct culturally appropriate public health campaigns to increase understanding and awareness of early warning signs of Alzheimer's and other dementias and the value of early detection and diagnosis.
- b) Incorporate communication about brain health, including how to reduce the risk of cognitive decline in Indiana's existing public health campaigns. Campaigns are in partnership with Indiana Department of Health (IDOH) and place emphasis on diverse communities who are at greater risk of developing Alzheimer's disease.
- c) Determine what can be accomplished with current resources and what additional resources are needed for a new awareness campaign such as: (1) developing new awareness campaign collateral specific to Indiana; (2) paid media to broadcast the campaign message; and/or (3) establishing a position within the Division of Aging dedicated to dementia.

In the coming year, FSSA's Division of Aging and the Indiana Dementia Care Advisory Group will evaluate proposed strategies and identify additional strategies to increase awareness of dementia for inclusion in the 2022 Dementia Strategic Plan.

IC 12-9.1-5-2(b)

(3) Identify strategies to enhance Indiana's dementia-based workforce, including the following:

- (A) Analyze dementia specific training requirements for paid professionals engaged in the care of individuals with dementia in institutions and home and community-based settings.**
- (B) Increase the number of individuals pursuing careers in dementia care and geriatric occupations to meet future state needs.**
- (C) Enhance the capacity of adult protective services workers and law enforcement to properly respond to individuals with dementia.**

The Final Recommendations to FSSA's Division of Aging for Improving Indiana's Dementia-Capable HCBS System as submitted October 27, 2020, are consistent with this section of the Dementia Strategic Plan are reproduced below.

Recommendation/Goal #2: Indiana's Aging Network, especially AAA and HCBS provider staff, will be aware of dementia and associated caregiver issues and how to access additional information and ongoing resources.

Strategies

- a) Provide to Dementia Friends Indiana (DFI) information sessions and opportunities for certification. These will be offered virtually and in-person across the state.
- b) Deliver DFI training via AAA network/IAAAA in partnership with DFI, the Alzheimer's Association, and Indiana University and University of Southern Indiana Geriatrics Workforce Enhancement Program (USI GWEP).
- c) Determine what tools and resources can be added with current resources, and what additional resources are needed for enhanced training. This may include:
 - Understanding symptoms and conditions that mimic dementia
 - How to talk to families about concerns
 - How/where to refer families for clinical evaluation
 - What to expect of the standard diagnostic process
 - How to prepare a client and their family for a visit to the doctor
- d) Assess program effectiveness and implement a monitoring program with feedback mechanisms for continuous improvement.

Recommendation/Goal #3: Indiana's facilitators of person-centered planning, especially Aging and Disability Resource Center (ADRC) Options Counselors and A&D Waiver Care Managers, will be able to identify people with signs of cognitive problems, know that there are multiple potential causes, and make referrals for an accurate diagnosis and additional information and supports.

Strategies

- a) Identify (or develop) a comprehensive, standardized, low-cost, and effective training program and practical application tools for state-wide adoption. Ensure Options Counselors (OCs) and Care Managers (CMs) know how to use the international Resident Assessment Instrument (inter-RAI) Home Care assessment tool (Section C. Cognition) for identification of people with signs of cognitive problems and understand how to refer clients to a local memory assessment center and Alzheimer’s Association.
- b) Determine required and optional components of the training and methods for evaluating competence and awarding certification.
- c) Develop incentives for both individuals and provider organizations to ensure compliance (e.g., career path advancement, compensation for training time).
- d) Track process and outcome measures where feasible and implement a monitoring program with feedback mechanisms for continuous improvement.
- e) Determine what training can be accomplished with current resources and what additional resources are needed for enhanced training.

Recommendation/Goal #4: Indiana’s Direct Care Workers providing in-home assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs) to A&D Waiver participants living with dementia, especially personal care service staff providing Attendant Care and Home and Community Assistance Services, will be competent in recognizing, understanding, and meeting the unique needs of people with dementia and their caregivers.

Strategies

- a) Identify (or develop) a comprehensive, standardized, low cost, and effective training program and practical application tools for statewide adoption.
- b) Determine both required and optional components of the training and methods for evaluating competence and awarding certification.
- c) Develop incentives for both individuals and provider organizations to ensure compliance and long-term sustainability (e.g., career path advancement, compensation for training time, etc.).
- d) Track process and outcome measures where feasible and implement a monitoring program with feedback mechanisms for continuous improvement.
- e) Determine what training can be accomplished with current resources and what additional resources are needed for enhanced training.

In the coming year, FSSA’s Division of Aging and the Indiana Dementia Care Advisory Group will identify additional strategies to enhance Indiana’s dementia-based workforce for inclusion in the 2022 Dementia Strategic Plan.

IC 12-9.1-5-2(b)

(4) Identify strategies to increase access to home and community-based services for individuals with dementia, including the following:

(A) Identify the type, cost, and variety of dementia services in Indiana.

(B) Assess capacity and access to adult day care, respite care, assisted living, and long-term care services.

(C) Identify methods to expand Indiana's health care system capacity to meet the growing number and needs of individuals with Alzheimer's disease and dementia.

In the coming year, FSSA's Division of Aging and the Indiana Dementia Care Advisory Group will gain further information on access to home and community-based services (HCBS) for individuals with dementia, and in the 2022 Dementia Strategic Plan identify strategies to increase access to HCBS for these individuals.

IC 12-9.1-5-2(b)

(5) Identify strategies to enhance the quality of care for individuals with dementia, including the following:

(A) Assess quality care measures for long term care facilities, assisted living facilities, and residential programs available to care for individuals with dementia.

(B) Uncover any existing gaps in dementia services and determine a plan to cover the gap in service.

(C) Identify methods to improve dementia services provided in home and community-based settings.

In the coming year, FSSA's Division of Aging and the Indiana Dementia Care Advisory Group will gain further information on the quality of care for individuals with dementia, and in the 2022 Dementia Strategic Plan identify strategies to enhance the quality of care for these individuals.

IC 12-9.1-5-2(b)

(6) Recommend strategies to decrease health disparities concerning dementia in ethnic and racial populations in Indiana.

According to the Alzheimer’s Association, women are more likely to develop Alzheimer’s disease and make up about two-thirds of caregivers. In addition, older Black and Hispanic/Latino Americans are more likely to develop the disease than older White Americans. Older LGBTQ people are less likely to be married or have children to care for them. Furthermore, discrimination is a barrier to Alzheimer’s and dementia care. These populations reported discrimination when seeking health care: (a) 50% of Black Americans; (b) 42% of Native Americans; (c) 34% of Asian Americans; and (d) 33% of Hispanic Americans.

In the coming year, FSSA’s Division of Aging and the Indiana Dementia Care Advisory Group will collaborate with Indiana Minority Health Coalition to gain further information on existing disparities; and in the 2022 Dementia Strategic Plan recommend strategies to decrease health disparities concerning dementia in ethnic and racial populations in Indiana.

IC 12-9.1-5-2(b)

(7) Identify and increase state-based support for Alzheimer's disease research through Indiana universities and other resources.

In the coming year, FSSA’s Division of Aging and the Indiana Dementia Care Advisory Group will identify state-based support for Alzheimer’s disease research through Indiana universities and other resources and make recommendations for increasing this support.

IC 12-9.1-5-2(b)

(8) Identify needed state policies or actions to act upon findings under this section and implement the recommendations of the plan, setting forth a time frame for implementation.

The Final Recommendations to FSSA’s Division of Aging for Improving Indiana’s Dementia-Capable HCBS System as submitted October 27, 2020, and not previously delineated, concern structural related recommendations are reproduced below.

Structural Recommendations

- a) Initiate a new full-time position within the Division of Aging dedicated to enhancing Indiana’s dementia-capable HCBS system.
- b) Support cross-agency efforts to build a more dementia-friendly state (e.g., Indiana Department of Homeland Security proposed a requirement for dementia-friendly training for all first responders).
- c) Identify organizational opportunities between FSSA and IDOH to better address the growing public health challenge of dementia, including support of people living with dementia and their caregivers and facilitating access to dementia-capable HCBS.

- FSSA's Division of Aging planned actions for the coming year to act upon and implement the Advisory Group recommendations outlined below.

Division of Aging Planned Actions to Implement Recommendations

- Add to the Indiana Dementia Care Advisory Group other members that bring important perspectives. These positions include:
 - Family caregiver of a person living with dementia
 - Structured Family Caregiving service provider
 - Indiana Minority Health Coalition
 - Add to the planning team of the Indiana Dementia Care Advisory Group the following:
 - IDOH designated staff person for dementia collaboration with Division of Aging
 - Indiana Association for Home and Hospice Care
 - Host, at least quarterly, virtual and/or in-person meetings of the Indiana Dementia Care Advisory Group, and add to Advisory Group responsibilities to monitor progress of implementation of the Dementia Strategic Plan
 - Additional actions will be taken to implement new actions taken and policies enacted by the State (see below)
- State policies and actions needed implement the Advisory Group's recommendations are outlined below. Also included is a timeframe for implementation.

State Policies and Actions Needed to Implement Recommendations

Structural Recommendations

- New full-time position within the Division of Aging dedicated to dementia and funding for new full-time employees (FTE)
- One-hour basic dementia training for first responders and provide funding for training program (Dementia Friends)

Recommendation/Goal #1

- Designate within IDOH appropriate staff for collaboration with FSSA's Division of Aging on development and implementation of the Dementia Strategic Plan

Recommendation/Goal #2

- One-hour basic dementia training for all AAAs and A&D waiver provider staff

Recommendation/Goal #3

- To be included in 2022 Dementia Strategic Plan

Recommendation/Goal #4

- Six-hours dementia care training for Direct Care Workers providing personal care services under the A&D waiver (Attendant Care and Home & Community Assistance) to people living with dementia; and provide funding for a Direct Care Worker Dementia Training Program.

Timeframe for Implementation

- July 2022 – September 2023 (15 months)
- 2022 Dementia Strategic Plan and Annual Report will include outcomes from implementation as follows:
 - Dementia Strategic Plan including all elements under IC 12-9.1-5
 - Key stakeholders added to the Indiana Dementia Care Advisory Group
 - Regular meetings initiated of the Indiana Dementia Advisory Group
 - Dementia Coordinator recruited, hired and on the job 3 months or more
 - IDOH designated staff have started to collaborate with FSSA's Division of Aging on the planning of public health campaigns
 - Required basic dementia training initiated for first responders
 - Required basic dementia training initiated for AAA and HCBS staff
 - Required dementia care training initiated for Direct Care Workers

Annual Report

This year's Annual Report outlines initiatives of the Indiana Dementia Care Advisory Group and related organizations conducted over the past year or two that are consistent with the priorities and recommendations proposed by the Advisory Group in October 2020. A list of both new and expanded activities toward implementation of recommendations is provided below. The next Annual Report will be submitted by December 1, 2022, concerning outcomes from implementation of the initial Dementia Strategic Plan.

IC 12-9.1-5-2(b)(2) Identify strategies to increase awareness of dementia.

Recommendation/Goal #1: Hoosiers will have an awareness of the risk factors and early signs of dementia, and how to obtain additional information about dementia symptom management, support programs, and opportunities to participate in research.

New and/or Expanded Advisory Group Dementia Awareness Activities (2020-2021)

- Alzheimer's Association Greater Indiana Chapter
 - ✓ Support groups and education programs
 - ✓ Online resources

- Dementia Friends Indiana
 - ✓ Dementia Friends interactive workshops
 - ✓ Community partnerships (e.g., Memory Cafés, dementia choir, dementia arts and culture program)

- Indiana's 15 AAAs: 2019-2022 State Plan on Aging
 - ✓ Educational opportunities and resources for people living with dementia (PLWD) and their families
 - ✓ Programs to support informal caregivers

- Living Longer / Living Better – Indiana Commission on Aging
 - ✓ Community and healthcare partnerships that promote local Age Friendly and Dementia Friendly initiatives (e.g., Brown, Marshall, Randolph, and Tipton counties)

- Indiana University Geriatrics Workforce Enhancement Program – Health Resources and Services Administration, U.S. Department of Health and Human Services (HHS) Grant
 - ✓ Caregiver education on dementia and related community resources

- University of Southern Indiana Geriatrics Workforce Enhancement Program – Health Resources and Services Administration, U.S. DHHS Grant
 - ✓ Initiated Dementia Friendly Communities in Petersburg and Rockport (in partnership with Generations (AAA 13) and SWIRCA (AAA 16) & more
 - ✓ Caregiver education sessions targeting rural and underserved communities
 - ✓ Caregiver virtual support programs

- Indiana University Alzheimer’s Disease Programs Initiative – Administration for Community Living, U.S. DHHS Grant (awarded August 2020)
 - ✓ 6 Care Coaches provide people living with dementia (PLWD) and their caregivers the evidence-based Caregiver Stress Prevention Bundle to reduce dementia symptoms and caregiver stress
- Aging & In-Home Services of Northeast Indiana Alzheimer’s Disease Programs Initiative – Administration for Community Living, U.S. DHHS Grant (awarded September 2021)
 - ✓ Beginning in 2022, Transition Coaches will provide PLWD and their caregivers the evidence-based Hospital2Home Dementia Capable Care Transitions Program to reduce hospital readmissions and reduce caregiver burden

IC 12-9.1-5-2(b)(3) Identify strategies to enhance Indiana's dementia-based workforce.

Recommendation/Goal #2: Indiana’s Aging Network, especially AAA and HCBS provider staff, will be aware of dementia and associated caregiver issues and how to access additional information and ongoing resources.

Recommendation/Goal #3: Indiana’s facilitators of person-centered planning, especially Aging and Disability Resource Center (ADRC) Options Counselors and A&D Waiver Care Managers, will be able to identify people with signs of cognitive problems, know that there are multiple potential causes, and refer for an accurate diagnosis and additional information and supports.

Recommendation/Goal #4: Indiana’s direct care workers providing in-home assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADL)s to A&D Waiver participants living with dementia, especially personal care service staff providing Attendant Care and Home and Community Assistance Services, will be competent in recognizing, understanding, and meeting the unique needs of people with dementia and their caregivers.

New and/or Expanded Advisory Group Dementia Workforce Activities (2020-2021)

- Alzheimer’s Association Greater Indiana Chapter
 - ✓ Community Resource Finder (in partnership with AARP)
 - ✓ Care consultation via helpline
- Dementia Friends Indiana
 - ✓ Dementia Friends interactive workshops for AAA staff
 - ✓ Healthcare partnerships (e.g., hospitals, primary care offices)
 - ✓ First responder training in partnership with Indiana Department of Homeland Security (e.g., EMS and fire departments)

- Indiana University Geriatrics Workforce Enhancement Program – Health Resources and Services Administration, U.S. DHHS Grant
 - ✓ Statewide Echo webinar sessions on dementia care for AAA and HCBS provider staff (e.g., A&D Waiver Care Managers, Options Counselors, and Adult Protective Services workers)
 - ✓ Dementia Friends training for medical students (in partnership with CICOA Aging & In-Home Solutions.
 - ✓ Dementia education and training offerings for primary care clinic staff, community health workers, and medical, nursing and social work students

- University of Southern Indiana Geriatrics Workforce Enhancement Program – Health Resources and Services Administration, U.S. DHHS Grant
 - ✓ Artificial Intelligence Virtual Assistant that supports PLWD
 - ✓ Direct care worker virtual support programs
 - ✓ Faculty, health care professionals, and student education in dementia care
 - ✓ Dementia education and training offerings and quality improvement support for primary care clinic providers and staff
 - ✓ Dementia care education to nursing facility staff, administrators, and formal and informal caregivers

- Indiana University Alzheimer’s Disease Programs Initiative – Administration for Community Living, U.S. DHHS Grant (awarded August 2020)
 - ✓ Intensive dementia care training to Dementia Care Coaches and other project staff of 5 AAAs
 - ✓ Dementia care webinar training to HCBS provider staff (e.g., Attendant Care and Home and Community Assistance Services)

- Aging & In-Home Services of Northeast Indiana Alzheimer’s Disease Programs Initiative – Administration for Community Living, U.S. DHHS Grant (awarded September 2021)
 - ✓ Beginning in 2022, dementia care training will be provided to hospital staff and emergency medical technicians