

Meeting of Virginia I. Jones Alzheimer’s and Related Disorders Council

June 23, 2016 1:30PM – 3:30PM
Behavioral Health Administration Headquarters
Spring Grove Hospital Center, Dix Building, Basement
Catonsville, MD 21228

Council Members Present:

Stevanne Ellis Department of Aging, Co-Chair
Albert Zachik, M.D. Department of Health and Mental Hygiene, Behavioral Health
Administration, Co-Chair

Tabassam Majid, Ph.D.
William Neely
Ilene Rosenthal
Suzanne Carbone
Karin Lakin
Ernestine Jones Jolivet
Lisa Larson
Cynthia Fields
Marie McLendon
Cass Naugle
Michele Douglas
Karen Kauffman

Staff:

Michael Hawkins Department of Health and Mental Hygiene, Behavioral Health
Administration
Rosanne Hanratty Department of Aging
Jodie Chilson Department of Legislative Services

Greetings and Introductions—Stevanne Ellis, Co-Chair; Albert Zachik, Co-Chair:

Dr. Zachik and Ms. Ellis welcomed members and guests to the Council meeting. Council member introductions followed.

Discussion of Open Positions on the Council

The Council discussed the positions that remain open and those that were created by the passing of SB549. There was a discussion about the definition of “Home Care” in terms of the representative of that industry.

Presentation – Tabassam Majid, Ph.D.

CHAMPIONS study: assessing the priorities in care decisions for family members whose loved ones have any form of Alzheimer’s disease and related dementias.

Highlights

- Engage family care givers in decisions
 - This includes a mixed method of interviews and focus groups to determine what is important in care giving and real life scenarios and choices to help determine priorities.
- Broad Goals for Care Management
 - Live at home?
 - Behavior?
 - Therapy?
 - Beyond medical management?
 - Support, family, community based?
 - Care giver driven and designed?
- Priorities change over time
 - Services should be tailored to the care givers.
- State or National Approach?
- The study is helping researchers learn more about those that are diagnosed at a younger age.
- Ranked Concepts:
 - Caregiver emotional reactions
 - Navigating Health Care System
 - Advocacy
 - Family Dynamics
- Navigation:
 - What provider?
 - How much does it cost?
 - How does the information flow?
- An analysis is due in August
- There is no insurance or age requirement associated with the study.

Workgroup Reports

Enhancing Support

1. Promote and Expand Home and Community Based Care
 - a. Respite
 - b. Adult Medical Day Care
 - c. Support Groups
- Identifying/Inventory of these services

- Maryland Access Point (MAP) has helped but is being reviewed
 - This is a work in progress
 - It should be publicized more
- There is a lot of information available
- Developing a System of Care
 - Information is useful but tangential

2. Review Access Points

3. Help families plan for future

- Legal and Financial Planning
 - Healthy Brain Initiative
 - Steps that could be taken at a state or local level
 - Grant Opportunities
 - Council Priorities
 - Review other state councils

Quality of Care

Recruiting new members

Looking at facilities that need training

Quality Care Guidelines

- A private organization turned guidelines into a training that is supported by the Centers for Medicare and Medicaid. (HealthCare Interactive)
 - It is interactive
 - Includes live scenarios
 - Tests
 - Can be implemented individually and in teams
- Turned into a grant proposal to the Office of Health Care Quality.

Jim McGill:

Mr. McGill discussed a grant proposal that focuses on assisted living and training and expansions to nursing homes.

Funding is hoping to support nursing homes in Baltimore and Charles County and assisted living facilities in Charles County.

The hope is to cover urban, suburban and rural areas.

Public Awareness

The group is finalizing the palm card and asked for feedback.

Questions included how it will be funded and distributed. Distribution ideas:

- Mental Health Authority of Maryland
- Call to Care
- Senior Centers
- Waiver Providers
- Johns Hopkins Memory Advisory Board
- Lists serves of council members and agencies
- Maryland Access Point

Funding ideas:

- Call to Care
- Private partners
- Include in Agency Mailings

Early Identification

Warning signs approach that includes working with the *Public Awareness* workgroup.

Annual wellness visits are critical but might not be good enough as a cognitive screening.

There have been barriers to implementing screenings that include determining which test to use, how often to use it and at what age.

Adjournment: The Council adjourned at 3:00 PM

Minutes submitted by Michael Hawkins