Dementia Training for Direct Care Workers

Those with Alzheimer’s are high users of long-term care services.

- At the age of 80, three-fourths of people with Alzheimer’s are expected to be admitted to a nursing home, compared with just 4% of the general population.

- People living with Alzheimer’s are nearly four times as likely to need skilled nursing facility care and over twice as likely to require home health care as individuals without the condition.

- More than 60% of seniors living in a nursing home have moderate or severe cognitive impairment. Among those in residential care settings, 42% have Alzheimer’s or another dementia.

Individuals with Alzheimer’s have needs that often make care delivery challenging and more demanding.

- More than 95% of individuals with dementia have at least one other chronic condition. Caring for someone with multiple chronic conditions — especially when that includes dementia — significantly complicates the care needed.

- As the disease progresses, individuals are unable to complete activities of daily living (such as eating, dressing, and bathing) without assistance.

- Over time, people with Alzheimer’s will lose the ability to use words and may communicate their needs through behavior, which presents added challenges for care workers.

Percent of Individuals with Alzheimer’s and Other Dementias By Setting

- Nursing Homes: 48%
- Residential Care Facilities: 42%
- Home Health Care: 32%
- Adult Day Programs: 31%

What Can States Do?

- Require a minimum of six to eight hours of evidence-based dementia training for all those who serve individuals with dementia.

- Ensure continuing education to reinforce best practices in the care of those with dementia.

- Implement a culturally-competent curriculum that incorporates principles of person-centered care.

- Allow portability of completed dementia care training across employment settings.

- Ensure trainers meet minimum requirements to qualify as instructors of a dementia curriculum.

- Designate a state agency to monitor dementia training programs, evaluate their effectiveness, and ensure compliance with state dementia training requirements.
Care workers often do not have sufficient dementia-specific knowledge to effectively support those with Alzheimer’s and other dementias.

- Certified nursing assistants and home health aides receive at least 75 hours of required training. But, Alzheimer’s and dementia care is only one of 40 required topics that must be covered in this time frame.
- While reviews have shown that staff training programs to improve the quality of dementia care in nursing homes have positive benefits, staff are unlikely to receive adequate dementia training.
- Training that is provided often does not cover the skills and competencies that will equip workers to appropriately care for those with a significant cognitive impairment.
- Even in states with dementia-specific training requirements, many of those policies are out of date, cover only a subset of workers, lack competency standards, and have inadequate enforcement mechanisms.

Dementia training of those involved in the delivery of care can improve the quality of care and experiences for individuals with Alzheimer’s and other dementias.

- A cornerstone of providing quality dementia care is to ensure that all professional care staff involved in the delivery of care to people with dementia receive dementia-specific training.
- Dementia training should ensure that care workers have the ability to:
  - Provide person-centered dementia care
  - Communicate with individuals with Alzheimer’s
  - Address behavioral symptoms, including alternatives to physical and chemical restraints
  - Address specific aspects of safety, such as wandering.
- Periodic continuing education is also needed to ensure that care workers have the latest information on best practices in the care of those with dementia.

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<th>Direct Care Workers: Who Should Receive Training?</th>
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<tr>
<td><strong>Direct Service Staff</strong></td>
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<tr>
<td>An employee whose work involves extensive contact with participants or residents. These staff members may have different titles and may include registered nurses, licensed practical nurses, licensed vocational nurses, nurse practitioners, certified nurse aides, nursing assistants, physician assistants, home health or personal care aides, activities directors, feeding assistants, social workers, dietary staff, respite care providers, adult day care providers, and all occupational, physical, and speech therapy staff.</td>
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<td><strong>Administrative Staff</strong></td>
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<td>A senior manager of a facility or program, including administrators and managerial staff that supervise direct service staff.</td>
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<td><strong>Additional Staff</strong></td>
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<td>Those who have incidental contact with residents or program participants on a recurring basis. That includes people include housekeeping, front desk, maintenance, or other administrative staff, as well as other individuals who have such incidental contact.</td>
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