

# Nursing Science Transforms Featured Researchers

## Background

More than 50 percent of Americans with dementia do not receive a cognitive assessment before they are institutionalized. Rural, older adults encounter a multitude of factors that put them at an even higher risk for developing Alzheimer's disease (AD) such as limited education, decreased health literacy, low income, increased heart disease, lack of insurance, and limited access to health care. Minorities face an additional risk – African-Americans are nearly twice as likely and Hispanics are 1.8 times more likely than Whites to develop AD.



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## Early detection, diagnosis and treatment of AD in rural, underserved communities

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## The Research

The interprofessional team just received a \$95,000 pilot grant from the Ed and Ethel Moore Alzheimer's Disease Research Program of the Florida Department of Health to test a novel mechanism for early detection, diagnosis and treatment of AD in rural, underserved communities.

The study will compare the effectiveness of home-based or clinic screenings in underserved individuals identified as being at risk, with follow-up evaluations by gerontology-trained and culturally competent nurse practitioners who will conduct dementia-specific geriatric assessments. The team anticipates that offering health care access to a nurse practitioner at either a rural clinic site or home health visit will be more effective than the current practice of waiting until symptoms develop. We also expect that home-based dementia screening and detection services will be more effective than screening and treatment at a local clinic.

The researchers will also pilot-test a referral program titled "ROAD (Rural Older Adults with Dementia)-Next-Steps," that is modeled after the Alzheimer's Association Next Steps' program of following patients after cognitive assessment to ensure that rural residents receive continuing support as needed.

A key outcome of this study is to delay earlier transitions to skilled nursing facilities, which could decrease health care costs by up to 30 percent for people with AD. Prior studies have shown that Medicaid can provide home care based services to three people for the cost of caring for one person in a long-term care institution. The long-term goal of the study is to create a model for increasing early detection and treatment of AD in rural underserved populations by eliminating barriers such as transportation, long wait times, and lack of available providers who are willing and trained to conduct dementia evaluations.