



Milken Institute Center for the Future of Aging

Recommendations to Build a Dementia-Capable Workforce and System amid COVID-19

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The Milken Institute is a nonprofit, nonpartisan think tank that helps people build meaningful lives in which they can experience health and well-being, pursue effective education and gainful employment, and access the resources required to create ever-expanding opportunities for themselves and their broader communities. The Center for the Future of Aging's Healthy Longevity program develops and promotes strategies to maintain and improve brain health for all ages, genders, and across diverse populations, and increases awareness of developing knowledge and evidence-based programs to promote prevention and wellness for healthier lives.

To address the impact that the COVID-19 virus is having on people living with dementia and their caregivers, this brief analyzes recent policy and funding updates and puts forward the following actionable recommendations to build a COVID-19 ready, dementia-capable workforce:

- 1. Increase funding for the Geriatrics Workforce Enhancement Program to build geriatric knowledge across the care system and improve understanding of how age-related diseases impact COVID-19**
- 2. Provide age-friendly care for older adults with dementia to reduce risk and limit exposure to COVID-19**
- 3. Develop and train workers to manage COVID-19 for people living with dementia in long-term care facilities**
- 4. Increase the cultural competency of the workforce to meet the needs of diverse older adults with dementia who are at increased risk from COVID-19**
- 5. Provide family caregivers with the tools, information, and support to meet the unique challenges of caring for people living with dementia during this pandemic**

People living with dementia and their caregivers face unique challenges in the face of the COVID-19 pandemic. Social distancing practices slow the spread of the virus. But, they may also increase isolation,

limit access to supportive services, and worsen outcomes for people living with dementia, either at home or in long-term care facilities. As the Milken Institute Center for the Future of Aging recommended in our 2019 report, “[Reducing the Cost and Risk of Dementia](#),” a culturally competent, dementia-capable workforce is required to ensure that those living with dementia and their caregivers get the right support and care at the right time. Today’s workforce must also be trained and equipped to reduce the spread and impact of COVID-19. The recently passed [Coronavirus Aid, Relief, and Economic Security \(CARES\) Act](#), as well as the [reauthorization of the Older Americans Act \(OAA\)](#), adopt several of the recommendations detailed in our report and provide much-needed support to caregivers, providers, hospitals, and long-term care facilities during this unprecedented time.

1. Increase funding for the Geriatrics Workforce Enhancement Program (GWEP) to build geriatric knowledge across the care system and improve understanding of how age-related diseases impact COVID-19.

Even though the number of people with Alzheimer’s disease is [projected to triple by 2050](#), there is an impending shortage of physicians, nurses, and social workers with specialized training in geriatrics and complex dementia care. We strongly support the recent [reauthorization of the GWEP program](#), which authorizes funding of nearly \$39 million over five years to build geriatric knowledge across the care system.

According to the [American Geriatrics Society \(AGS\)](#), “now more than ever, we need to provide more guidance and instruction so that all health professionals—not just geriatrics experts—understand how the range of health conditions older adults may have impact COVID-19 diagnosis, treatment, and care.” We join with AGS and the Elder Workforce Alliance to advocate for [increased funding](#) to promote geriatric education and fill workforce shortages through advanced recruitment and retention efforts. Additional funding will support the necessary staff, technology, training, and materials. It will also supplement funding for GWEP sites in key COVID-19 crisis areas to be determined by the Health Resources and Services Administration.

2. Provide age-friendly care for older adults with dementia to reduce risk and limit exposure to COVID-19.

Our current health-care system does not provide [optimal care to older adults with dementia](#) or enough support to their caregivers. The COVID-19 pandemic is amplifying health systems’ challenges in providing dementia care, including avoidable or preventable hospitalizations, poor coordination and communication across care teams, and high-risk care transitions. We strongly support [recommendations to address risks from COVID-19](#) that were put forward by the Institute for Healthcare Improvement and The John A. Hartford Foundation as part of their [Age-Friendly Health System Initiative](#). These recommendations seek to “reduce [the] need [of older adults] to present to the hospital, reduce hospitalizations and, if hospitalized or in post-acute or long-term care communities, increase the rate of safe discharges.”

To achieve these recommendations, we support the implementation of new tools and interventions to address COVID-19 risks that people with dementia face in hospitals and post-acute care settings. Increased telemedicine capacity, virtual triage, and diagnostic testing will help avoid preventable hospitalizations and reduce the risk of infection. Emergency departments and hospitals can help older adults with dementia transition out of high-risk settings by increasing clinical and social work care

coordination capacity, collaborating with community-based organizations to provide resources and support, and arranging rapid follow-up appointments. The Centers for Medicare & Medicaid Services and the Centers for Disease Control and Prevention recently released [guidelines](#) to reduce the risk of infection in long-term care facilities.

3. Develop and train workers to manage COVID-19 for people living with dementia in long-term care facilities.

Nearly [75 percent of people age 80 or older with dementia live in a nursing home, compared with only 4 percent of the general population age 80+](#). These residents are particularly vulnerable to [COVID-19 outbreaks](#) because age and underlying health conditions associated with dementia increase their risk. Understaffed nursing homes, rotating personnel, and under-trained workers further exacerbate the risks from COVID-19. We support efforts to increase workforce capacity in nursing homes and develop programs to train staff to treat COVID-19, especially for their residents living with dementia.

For example, Maryland [trains its nurses](#) in infection-control measures, contact-tracing, and other epidemiological skills. The nurses then dispatch to facilities where patients or staff have tested positive. Dispatching these nurses to nursing homes with high numbers of residents with dementia will help build workforce capacity and reduce risk from COVID-19. [NextStep's National COVID-Ready Caregiver Certification](#) focuses on improving the safety of long-term care workers, expanding the supply of qualified nursing assistants, and reducing workforce shortages by training the long-term care workforce. If widely adopted, this training program can minimize the impact of the virus on high-risk residents, including those living with dementia. Additionally, the proposed [Advancing Connectivity during the Coronavirus to Ensure Support for Seniors \(ACCESS\) Act](#) aims to overcome visitor restrictions by investing in telehealth infrastructure for nursing homes and enabling residents to remain connected.

4. Increase the cultural competency of the workforce to meet the needs of diverse older adults with dementia who are at increased risk from COVID-19.

Minority populations, including African Americans and Latinos, have a [higher lifetime risk of developing dementia](#) and are at higher risk from COVID-19. To address these disparities, we must develop a culturally competent, dementia-capable workforce. We support recent legislative efforts to diversify, expand, and educate the workforce on how prevalence, risk factors, and education about dementia varies across diverse populations. The provisions of the [Educating Medical Professionals and Optimizing Workforce Efficiency and Readiness \(EMPOWER\) for Health Act of 2019](#) was signed into law in March 2020 as part of the CARES Act. The EMPOWER for Health Act aims to benefit underserved communities by increasing access to health-care services and diversifying the workforce. We recommend continued efforts to expand dementia-specific training opportunities in underserved areas, develop partnerships with community-based organizations, and disseminate toolkits that address unique risk factors for diverse populations.

5. Provide family caregivers with the tools, information, and support to meet the unique challenges of caring for people living with dementia during this pandemic.

In 2019, [16 million Americans provided unpaid care](#) for people living with dementia in their homes. New shelter-in-place and social distancing guidelines may create new challenges and needs for these family caregivers. We support legislation that recognizes and supports family caregivers for their significant contributions.

The OAA reauthorization increases spending by 35 percent over the next five years to fund services for older adults like home-delivered meals, transportation services, and elder abuse prevention. It also includes provisions to help caregivers by extending the [RAISE Family Caregivers Act](#), which facilitates a national strategy to support family caregiving and strengthening the [National Family Caregiver Support Program](#), which provides family caregivers with respite care, education, training, and other support. The CARES Act also supports family caregivers by authorizing [paid sick leave benefits](#) and providing [unemployment assistance](#) during the COVID-19 pandemic. The Centers for Medicare & Medicaid Services temporarily [broadened access to Medicare telehealth services](#), which allows patients and caregivers to access care without having to travel to a health-care facility. We recommend exploring opportunities to expand covered services and benefits, targeting funding to support the unique needs of dementia family caregivers, and making changes permanent after the pandemic is over.