KNOW THE FACTS

» 48% of people in nursing homes have Alzheimer’s or other dementias.

» Direct-care workers have difficult jobs, and many do not receive the training necessary to provide quality dementia care or have access to personal protective equipment (PPE).

» In the severe stage of dementia, people often become bed-bound and need round-the-clock care.

» Some unpaid caregivers continue to help with bathing, dressing, and other activities of daily living for LTC residents living with dementia.

» Isolation and limited support/cueing may lead to reduction in eating or drinking. This can create safety concerns, as the affected individual may not recognize food or distinguish between edible and inedible items on a food tray.

COVID-19 CHALLENGES

» Residents with dementia may have difficulty adhering to social distancing guidelines from other residents. Also, many need hands-on or close-proximity care from staff.

» Restricted access to LTC facilities may prevent unpaid caregivers, including family and friends, from assisting with direct care and emotional support for persons with dementia. A secondary impact may be increased strain on LTC care providers.

» Changes in staffing and schedules due to workforce shortages may disrupt the delivery of person-centered care to residents living with dementia. As a result, they may experience more confusion and manifest negative behaviors.

» Provisional staff and members of strike/bridge teams may have no or little training about dementia and person-centered care.

PUBLIC HEALTH RESPONSE

» Ensure LTC facilities understand and adhere to CDC and CMS COVID-19 guidance.

» Improve access to adequate personal protective equipment (PPE), disinfectant, and sanitation supplies for LTC settings.

» Promote use of the Alzheimer’s Association’s guidance for LTC professionals, including provisional staff hired due to workforce shortages or members of strike/bridge teams aiding with infection control.

» Facilitate planning between hospital systems and LTC facilities for evaluation and transfer of potential COVID-19 cases among the LTC population. Include steps for contacting caregivers in these plans.

» Ensure COVID-19 training for LTC professionals educates them how to cue hand-washing and other hygienic practices, minimize risk for themselves and residents, and monitor co-occurring conditions for persons living with dementia.

» Ensure LTC facilities review and update their emergency plans for potential natural or other disasters during the COVID-19 pandemic, including how to address the special needs of people with dementia.

» Ensure LTC facilities maintain communication with appropriate family or other key support individuals, even if done by phone or virtually, during this time of enforced separation.

RESOURCES

| Centers for Disease Control and Prevention | Guidance for LTC facility, nursing home management | Centers for Medicare & Medicaid Services | Guidance for LTC facility management | Centers for Disease Control and Prevention | Guidance for retirement communities, independent living | Alzheimer’s Association | Tips for professional caregivers |

Unless otherwise noted, all facts and statistics come from the 2020 Alzheimer’s Disease Facts and Figures report available at alz.org/facts.

COVID-19 & DEMENTIA
Unique Considerations for the Public Health Community: People Living with Dementia