



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2019-2020

LFIR#: 1918

1. **Title of Project:** Alzheimer's Community Care, Inc.

2. **Senate Sponsor:** Gayle Harrell

3. **Date of Submission:** 01/25/2019

4. **Project/Program Description:**

Alzheimer's Community Care (Organization), a 501(c)(3) nonprofit, operates eleven (11) Specialized Alzheimer's Day Care Centers in Palm Beach, Martin, and St. Lucie counties. These centers are licensed under section 429.918, F.S., which mandates a higher standard of care for patients who require an adult day care facility and who suffer with probable Alzheimer's disease or another neurocognitive disorder. Eight (8) of the eleven (11) Organization centers are located in churches. The majority of patients qualify for nursing home placement, but 96% of caregivers want their family member to be at home and in their neighborhood. The average enrollment in health day care centers is 1 to 18 months; however, the average attendance in the Specialized Alzheimer's licensed day care is an average of three (3) to six (6) years. The funding request would be used for units of service (hour of patient care) as reimbursement. For every \$1.00 granted, 92 cents goes directly to services and resources.

5. **State Agency to receive requested funds :** Department of Elder Affairs

State Agency Contacted? No

6. **Amount of the Nonrecurring Request for Fiscal Year 2019-2020**

Type of Funding	Amount
Operations	1,500,000
Fixed Capital Outlay	
<b>Total State Funds Requested</b>	<b>1,500,000</b>

7. **Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)**

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	1,500,000	19.31%
Federal	373,777	4.81%
State (excluding the amount of this request)	2,255,920	29.04%
Local	1,588,204	20.45%
Other	2,049,963	26.39%
<b>Total Project Costs for Fiscal Year 2019-2020</b>	<b>7,767,864</b>	<b>100.0%</b>

8. **Has this project previously received state funding?** Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		
2018-19	1,500,000	1,500,000	394	No

9. **Is future-year funding likely to be requested?** No



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#### 10. Details on how the requested state funds will be expended

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs:</b>		
Salary and Benefits	Program Manager(s), Program Nurse(s), Program Assistant(s), Activities Coordinator(s), and Case Manager(s).	1,500,000
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>1,500,000</b>

#### 11. Program Performance:

**a. What is the specific purpose or goal that will be achieved by the funds requested?**

The requested funds will be used for critical support within the Specialized Adult Day Care services to low-income patients afflicted with Alzheimer's disease or other neurocognitive disorders. Of those we care for, 88% of patients are never institutionalized. At all levels of care, no matter what stage of the disease process, our Family Nurse Consultants (FNC) ensure families are never isolated throughout the disease process. All of the funding request is used as cost reimbursement throughout the 11 day centers, with no preference to culture, economic status, or language spoken, even if they revert to their first language. It is a fact that 70% of caregivers over the age of 65 are at-risk to die before their patients if they do not receive intervention. These caregivers receive peace of mind during the day to maintain employment, attend to their own medical and emotional needs, do shopping, etc., to sustain a home.

**b. What are the activities and services that will be provided to meet the intended purpose of these funds?**

As the 11 Day Cares are licensed under section 429.918, F.S., they require a higher level of dementia-specific care, which means: 1. each patient must have an individualized plan of care that is updated quarterly; 2. their cognition must be regularly evaluated using the BIMS evaluation tool; 3. their spiritual well-being, physical exercise, socialization, and cognitive stimulation are provided in at least 70% of the daily operations; and 4. staff/patient ratio of 1:5 with a nurse present for 75% of the center's daily operations. ID Locator service interventions are provided for those patients that are at-risk for wandering with extensive training for caregivers to prevent an occurrence, but if needed, caregivers are trained on how to react by calling 911 so their loved ones can be returned swiftly and safely. Over 775 patients have been served since 2013 and if an elopement occurs, 100% of them have been found alive within 30 minutes to an hour. Seconds are critical when saving a life.



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**c. What are the direct services to be provided to citizens by the appropriations project?**

The target population are patients who suffer with Alzheimer's disease or other neurocognitive disorders. The Organization's Specialized Day Care families are assigned an FNC to develop individualized care plans. The FNC uses the Brief Interview for Mental Status (BIMS) as a standard tool to measure cognitive functions and administers the Zarit Burden Scale to caregivers to assess stress. Program staff also evaluate: 1. patient functional capacity including all ADLs which are rated monthly on a five-point scale ranging from complete independence to total assistance needed inclusive of nutritional (weight loss/gain) and fluid intake capacity; 2. incidence of patient falls at center and at home; 3. ongoing evaluation of patient's fall risks; and 4. participation in cognitive and other therapeutic activities. Being Joint Commission accredited, ACC conducts ongoing monitoring of patients to ensure that interventions are achieving outcomes at each stage.

**d. Who is the target population served by this project? How many individuals are expected to be served?**

The target population are patients who are diagnosed with Alzheimer's disease or other neurocognitive disorders and their caregivers. The majority of caregivers are increasingly children of patients, but there are still a large part who are spouses. An unintended population are the families' medical practitioners, because as the disease progresses, contact by the Program Nurse or Manager may become a daily activity. When a patient begins to show unsteadiness, it is likely he/she is experiencing a change in the disease process or he/she is becoming agitated especially following a poor nights sleep, etc. All these are signals that, if left unattended, could lead to hospitalization, but because of the staff's familiarity of the patient's condition such medical risks are diminished with gratitude from the family. It is expected that this grant will keep over 385 to 400 families in their homes and caregivers will have a lightened load because of the experts at the Centers who stand by them.

**e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?**

Preserving an Alzheimer's disease or other neurocognitive disorder family member's ability to live in their communities and homes safely with security while preserving their well-being, welfare, dignity, and integrity throughout the duration of the disease process are successful outcomes and what families wish for. Hispanic patients exhibit Alzheimer's 5 to 8 years sooner than their Caucasian peers, and African Americans have the disease for longer periods of time but go undiagnosed because of a lack of access to health care and treatment. It is not uncommon in a Spanish speaking center for there to be 12 or more countries (Central/South America) represented, but with their music, singing, and playing dominoes with an intensity by both male and females, stimulation is an ongoing and active intervention and laughter is only a smile a way. The centers reflect the neighborhoods they are located in and affords an environment that is non-threatening and safe for their culture and language.

**f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?**

The Specialized Alzheimer's Day Care program also receives input from the Organization's Standing Committees, each chaired by a Board member and include representatives from Adult Protective Services, local Memory Disorder Centers, 211, Geriatric Care Managers, law enforcement deputies, and the long-term care network. Patient and caregiver assessment tools are based on Form 701-B, a standardized instrument approved by the FL Department of Elder Affairs. To ensure continuous quality improvement, the Organization also gathers qualitative feedback through annual caregiver satisfaction surveys and exit surveys completed by



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caregivers when patients leave the program. If there are areas where the program is not meeting intended outcomes, corrective action plans are developed and implemented under the supervision of the CEO and reported to the Board of Directors for their comments and recommendations for change or improvement when necessary.

**12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.**

N/A

**13. Requestor Contact Information:**

- a. **Name:** Mary Barnes
- b. **Organization:** Alzheimer's Community Care
- c. **E-mail Address:** mbarnes@alzcare.org
- d. **Phone Number:** (561)683-2700

**14. Recipient Contact Information:**

- a. **Organization:** Alzheimer's Community Care, Inc.
- b. **County:** Palm Beach
- c. **Organization Type:**
  - For Profit
  - Non Profit 501(c) (3)
  - Non Profit 501(c) (4)
  - Local Entity
  - University or College
  - Other (Please specify)
- d. **Contact Name:** Mary Barnes
- e. **E-mail Address:** mbarnes@alzcare.org
- f. **Phone Number:** (561)683-2700

**15. Lobbyist Contact Information**

- a. **Name:** Ken Pruitt
- b. **Firm Name:** The P5 Group, LLC
- c. **E-mail Address:** Ken@theP5Group.com
- d. **Phone Number:** (772)971-5760