Dementia screening tests: value in assisted living facilities in NJ

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**Background**
- Dementia is defined as a cognitive impairment or decline in mental ability, which is associated with memory loss. It primarily affects individuals over age 65.
- The study group in assisted living facilities is highly at-risk for developing dementia.
- This change often goes undetected, which leads to continued and often rapid decline in cognitive function.
- New screening tools are needed.

**Objective**
- The objective of this study is to survey assisted living facilities (ALF) throughout NJ regarding the perceived advantages and disadvantages of using various dementia screening tools.

**Methods**
- This study was approved by the Rutgers Institutional Review Board.
- 70 individuals completed the Phase 1 survey (n=70); Rutgers Institute of Pharmaceutical Industry Fellowships
- Figure 3: Percentage of ALF across the state recognized by the Health Care Association of NJ were SLUMS; 1%; MODDSI; 5%; MODMMSE; 8%
- 25 completed the Phase 2 survey (n=25)
- Respondents who would switch based on survey results: 64% of facilities use a dementia screening test for placement.
- 56% of follow-up respondents may change policy due to phase 1 results.
- 5% may switch to CADi because it is faster and easier to use.
- 8% of respondents indicated that the dementia screening process within their facility has improved due to their participation in this study.

**Limitations**
- This study was completed by a non-random sample population within an assisted living facility, and Google Forms does not have a method to prevent people with different email accounts from completing the survey based on being employed within the same-assisted living facility. Thus, more than one person per institution responded to the survey, which means the number of responses we receive would not exactly correlate with the number of facilities that respond to the survey.
- Some respondents were lost to follow-up due to illegible or incorrect email addresses provided on hard-copy surveys, or due to being transferred or employed at the same facility.

**Conclusions**
- MMSE is the most common tool used (59%) and 1 may switch to CADi because it is faster and easier to use.
- 8% of respondents indicated that the dementia screening process within their facility has improved due to their participation in this study.
- Some respondents were lost to follow-up due to illegible or incorrect email addresses provided on hard-copy surveys, or due to being transferred or employed at the same facility.

**Results (continued)**

![Figure 7: Percentage of Follow-Up Respondents Indicating Whether Possible Policy Change May Occur Due to Phase 1 Results (n=25)](image)

**Figure 7:** Percentage of Follow-Up Respondents Indicating Whether Their Facility Will Change Policy Due to Phase 1 Results (n=25)

- 56% of follow-up respondents may change policy due to phase 1 results.
- 8% of respondents indicated that the dementia screening process within their facility has improved due to their participation in this study.

**Results (continued)**

![Figure 8: Percentage of Follow-Up Respondents Indicating Whether Possible Policy Change May Occur Due to Phase 1 Results (n=25)](image)

**Figure 8:** Percentage of Follow-Up Respondents Indicating Whether Possible Policy Change May Occur Due to Phase 1 Results (n=25)

- 56% of follow-up respondents may change policy due to phase 1 results.
- 8% of respondents indicated that the dementia screening process within their facility has improved due to their participation in this study.

**Authors:**
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- The data set is representative of North, Central, and South Jersey across a majority of counties, with 81% (17/21) of NJ counties represented.