



CalHHS

## Alzheimer's Disease and Related Disorders Advisory Committee Meeting



### Welcome & Logistics Review



### **Carroll De Andreis**

Manager, MPA Stakeholder & Public Engagement California Department of Aging (CDA)

### Meeting Logistics



- Join by smart phone, tablet, or computer: <a href="https://us06web.zoom.us/j/81784406771">https://us06web.zoom.us/j/81784406771</a>
- Join by phone (audio only):

Tel: 888-788-0099 | Meeting ID: 817 8440 6771

- Live captioning and American Sign Language (ASL) interpreting: streamed through webinar (Zoom)
- Meeting slides, transcript and recording will be posted to the CalHHS Alzheimer's Disease & Related Disorders webpage

## Virtual Meeting Operations



- The chat function is only enabled for Committee Members, California Department of Aging (CDA) and other state staff and invited guests to share meeting-related resources and information. The public will be able to view content shared in the chat during the meeting.
- We invite the public to provide comments. Please hold comments until the designated Public Comment period.
- Additional public comments and questions can be posted in Zoom using the Question & Answer feature or sent via email to EngAGE@aging.ca.gov.

### **Public Comment**



Time is reserved on the meeting agenda for public comment.

- In-Person Comments: Raise your hand or let Michelle know you want to make a public comment.
- **Verbal Comments**: "Raise your hand" in the Reactions feature of Zoom or press \*9 on your phone dial pad to enter the line for a verbal comment. The moderator will unmute your line and announce your name or the last 4 digits of your phone number.
- Written Comments: You may submit comments throughout the meeting using the Zoom Q&A or email <a href="mailto:Engage@aging.ca.gov">Engage@aging.ca.gov</a>.

**Note**: Public commentors will each have 2 minutes.

### Welcome and Introductions



### **Catherine Blakemore**

Committee Chair Family Member Representative

### Today's Agenda



- 1. Welcome and Introductions, May Minutes
- 2. Building a Community to Support Individuals with Dementia At Risk for Wandering
- 3. Committee Question and Answer (Q&A) and Discussion
- 4. Finalizing Master Plan for Aging Initiative Recommendations
- 5. Break
- 6. California Department of Aging Update
- 7. California Department of Public Health Update
- 8. Legislative Update
- Public Comment
- 10. Finalize Recommendations for CalHHS Secretary
- 11. Closing Comments, Upcoming Meeting Dates and Next Steps

### Committee Member Introductions



### **Committee Chairs**

- Catherine Blakemore, Family Member Representative (Chair)
- Dr. Wynnelena Canlas Canio, Kaiser Permanente, Mental Health Field Rep (Vice Chair)

#### **Committee Members**

- Barbra McLendon, Alzheimer's Los Angeles, Service Provider Rep
- Carlos Olivas III, Family Member Rep
- Celine Regalia, Providence Community Health Napa Valley, Alzheimer's Day Care Resource Center Rep
- Claire Day, Alzheimer's Association, Consumer Organization Rep

## Committee Member Introductions (Cont.)



- Dr. Dolores Gallagher Thompson, Stanford University, Social Research Rep
- Julie Souliere, CA Health & Human Services Agency
- Ken Graffeo, Consumer Rep
- Myra Garcia, Consumer Rep
- Sally Bergman, Elder Law Rep
- Dr. Sarah Tomaszewski Farias, UC-Davis, Alzheimer's Disease Diagnostic & Treatment Centers Rep
- Todd Shetter, ActivCare Living, Service Provider Rep
- Dr. William Mobley, UC San Diego, Academic Medical Research Rep

# Building a Community to Support Individuals with Dementia At Risk for Wandering



- Overview of the issue Barbra McLendon
- Personal Story Kirk Moody
- Community Perspectives
  - Barbra McLendon
  - Wynnelena Canlas Canio, MD, AGSF, CMD
  - Chloe Ferem
- Recommendations Catherine Blakemore



Barbra McLendon Senior Public Policy Director

### What is it?

**Wandering** is a term used to describe getting lost and becoming disoriented.

Although it is a common behavior associated with Alzheimer's disease and other dementias, wandering is often overlooked as a concern among families and caregivers.



### **Exit Seeking**

Exit-seeking behavior is a type of wandering that people with dementia may exhibit when they try to leave their home or facility without a **companion**. It's a goal-directed behavior that requires cognitive ability, such as forming thoughts, planning actions, and carrying them out. People who exhibit exit-seeking behavior may be motivated by curiosity, distress, or a belief that they still have responsibilities.



### Roaming

Fronto-Temporal Dementia (FTD) - roaming refers to a form of compulsive behavior that presents as walking, biking, or driving the same route repeatedly.

Roaming is a result of experiencing compulsory restlessness, reacting to a stressful environment, or trying to satisfy an unmet need. A person with FTD may also roam to visit their favorite places around town or to see familiar faces.



## Elopement

### **Autism**

Elopement is when a child with autism wanders away from caregivers or a secure location.

- Nearly half of children with autism spectrum disorder (ASD) will attempt to wander or bolt from a safe place at some point.
- Drowning is one of the leading causes of death among individuals with autism who elope.
- Many of the same preventative steps apply for this population as well



### Why Does It Happen?

Everyone with memory loss is at risk of wandering. Changes in the brain can cause a person with dementia to become confused and disoriented, even when in a familiar place.

Often, someone who is wandering is:

- Searching for something
- Escaping from something
- Reliving the past
- Self-soothing



### Why Does It Happen?

#### They may also:

- Have a reaction to a new medication
- Be bored not enough stimulation or activity
- Be confused- mainly in the afternoon or evening

Getting lost is scary and can be dangerous.



### Why it matters

- 60% of people with dementia will wander.1
- Time is of the essence when a loved one wanders away. Of those not found within 24 hours, 50% will suffer serious injury or death.2



"Grandpa is Missing"/ Alzheimer's Los Angeles

2. McShane R, Gedling K, Keene J, Fairburn C, Jacoby R, Hope T. Getting lost in dementia: a longitudinal study of a behavioral symptom. Int Psychogeriatr. 1998;10(3):253–260. doi: 10.1017/S1041610298005365.



Alzheimer's Association

# The Search for Nancy

"Wandering" can happen at any time – and have a terrible outcome

Aug 1, 2024 Kirk Moody

### Background

- Nancy Paulikas
  - 55 years old
  - Early onset Alzheimer's disease
  - Was wearing a MedicAlert bracelet
  - Wandered from Los Angeles County Museum of Art on Oct. 16, 2016
  - Thorough search of grounds by family and museum staff
  - LAPD called after ~1 hour



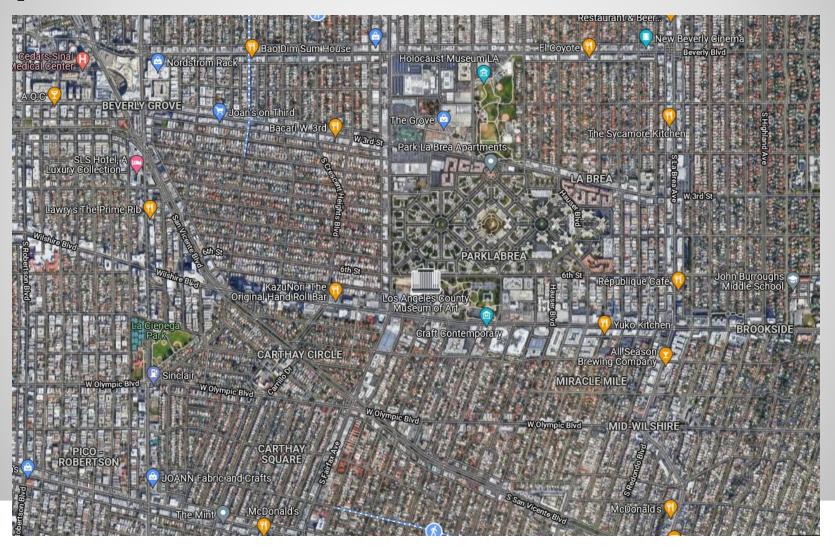


### **Immediate Search Efforts**

- LAPD on scene in less than 10 minutes
- Helicopter deployed within one hour
- Street-by-street search for 2 sq. mi. in evening
- However, no canine crew was used



## **Two Square Miles Around LACMA**



# Despite Herculean Efforts, We Didn't Find Nancy

- Friends, family, volunteers began deploying to area to help search
  - Flyers printed, distributed, posted
  - Local canvassing help from homeless population
  - 30-50 people per day were on the ground looking for Nancy for the first several weeks
- Remote volunteers began making phone calls to hospitals and care facilities
  - All the greater Los Angeles hospitals were called every day for over a month
- These efforts inevitably waned, but several of us continued searching ...
- Nancy's remains were found in a remote location and identified 26 months after she went missing

### What Caregivers Can Do to Reduce Risk of Wandering

There may not be warning before the first wandering incident.

Consider these simple strategies:
Always provide supervision and be sure the person with memory loss is never left alone.

- Increase home safety measures, such as devices that signal when a door is opened, night lights, window locks and stair gates to prevent falls.
- Provide visual cues: People with dementia may forget where they are, even when inside their own home. It can help to post signs or photos on cabinets, drawers, and doors to important rooms, such as their bedroom and the bathroom.



# What Caregivers Can Do to Reduce Risk of Wandering

- Avoid potential triggers and be aware of the environment. Avoid busy places that can cause confusion, be aware of noise and activity levels and be sure basic needs are met.
- Ask your neighbors to keep an eye out and tell you if they see your person with dementia outside alone or walking away from home.
- Help him or her exercise during the day... take a walk or dance to music. Consider providing a place to wander safely such a path through the house or fenced backyard.
- Put away purses, coats, keys, sunglasses... things that might make your person think about leaving.



# What Caregivers Can Do to Reduce Risk of Wandering

#### **BE COMFORTING**

- Offer food or do something that will take his or her mind off wanting to leave
- Ask for help... folding clothes, making dinner, etc.
- Sit quietly with him or her... listen to music or watch a TV show



### Plan Ahead for Wandering

In the event someone wanders and becomes lost, it is important to act quickly. Be aware, have a plan and know who to call for assistance:

- Let friends and neighbors know of the person's memory loss so they can be aware (and alert someone) if they see the person alone.
- Keep an updated photo and a list of places where the person may wander, including past jobs, restaurants, and other favorite places.



### Plan Ahead for Wandering

- Sew or write his or her name and your phone number onto clothes
- Contact your police department to find out if they will allow you
  to register your loved one and provide a photo and other
  important information to assist in finding them if they wander.

### Plan Ahead for Wandering

#### **Wearable Tracking Devices**

- Apple Air Tag A small device that can be attached to items such as clothing or bags. Compatible with Apple devices.
- Tile A similar small device that can be attached to items such as clothing or bags.
   Compatible with Android and Apple devices. Tap "Notify When Found" so the Tile Network every phone running the Tile app— can help locate your loved one.
- GPS Shoe Inserts Similar to an orthotic that slides into any size shoe. It contains
  a tiny GPS tracking element centered into the pad. It runs on a rechargeable
  battery that lasts 2-3 days. The pads last up to 30 months depending on normal
  wear and use.



### Plan Ahead for Wandering

- **Project Lifesaver** A small device worn as a wristband that can be located using radio frequency technology used by some law enforcement.
- AngelSense Watch- A GPS tracker in the form of a wristwatch with a speakerphone that allows you to speak with the person wearing the watch, anytime. Compatible with Android and Apple devices.
- Theora Care- Smart watch enables GPS tracking and the capability to accept incoming calls from specific phone numbers.



Wally Skalij / Los Angeles Times



### Plan Ahead for Wandering

#### **Low-Technology Options**

- MedicAlert®
  - A 24-hour nationwide emergency response service for individuals with Alzheimer's disease or a related dementia who are at risk for wandering or having a medical emergency. Visit www.medicalert.org
- ID Bracelet
- Clothing Labels
  - Use printed cloth labels or a permanent marker to write the persons name and the caregivers phone number on clothing.



### When Wandering Happens



"Grandpa is Missing"/ Alzheimer's Los Angeles

In the event someone wanders and becomes lost, it is important to act quickly. Be aware, have a plan and know who to call for assistance.

Wanderers who get lost can be difficult to find because they often behave unpredictably. They may not call for help or respond to searcher's calls.

If your loved one does wander, call 911 immediately.





@AlzheimersLA #AlzheimersLA

### Health Care Perspectives



### Dr. Wynnelena Canlas Canio

Kaiser Permanente, Mental Health Field Rep (Vice Chair)



# Take Me Home

### Chloe Ferem

Crime Prevention Specialist Rancho San Diego Station San Diego Sheriff's Office

August 1st, 2024

## What is Take Me Home

- A voluntary registry intended to serve people with special needs and or medical conditions that could increase their safety in public.
- Members of this group may not be able to identify themselves or provide information to first responders about their immediate needs.
- The information provided is easily accessible to law enforcement in cases of emergency.





# Recommend for anyone who:

- Has limited communication skills and ...
  - Unable to provide their name and address
  - Has unique behavior or mannerisms
  - Tendency to wander
  - May not initially be identified as disabled
  - Become easily agitated or confused when stressed
  - Is unresponsive to strangers





# Who can this help?

Alzheimer's Disease

**Autism** 

**Brain** Injury

**Dementia** 

Down Syndrome

...many more





# Information provided to TMH program

- Photo (Updated annually) (no hat, sunglasses, or face mask in photo)
- Emergency Contact
- Special Considerations
  - Combative
  - Disrobes
  - Prefers nudity
  - Fear of dogs
  - Light sensitive
  - Noise sensitive
- Vehicle Information

**Paranoid** 

Repeats phrases

Run tendency

Stranger unresponsive

Touch sensitive

Water Attracted





# Current registration process

 Online self-registration on the San Diego Sheriff's Department website.

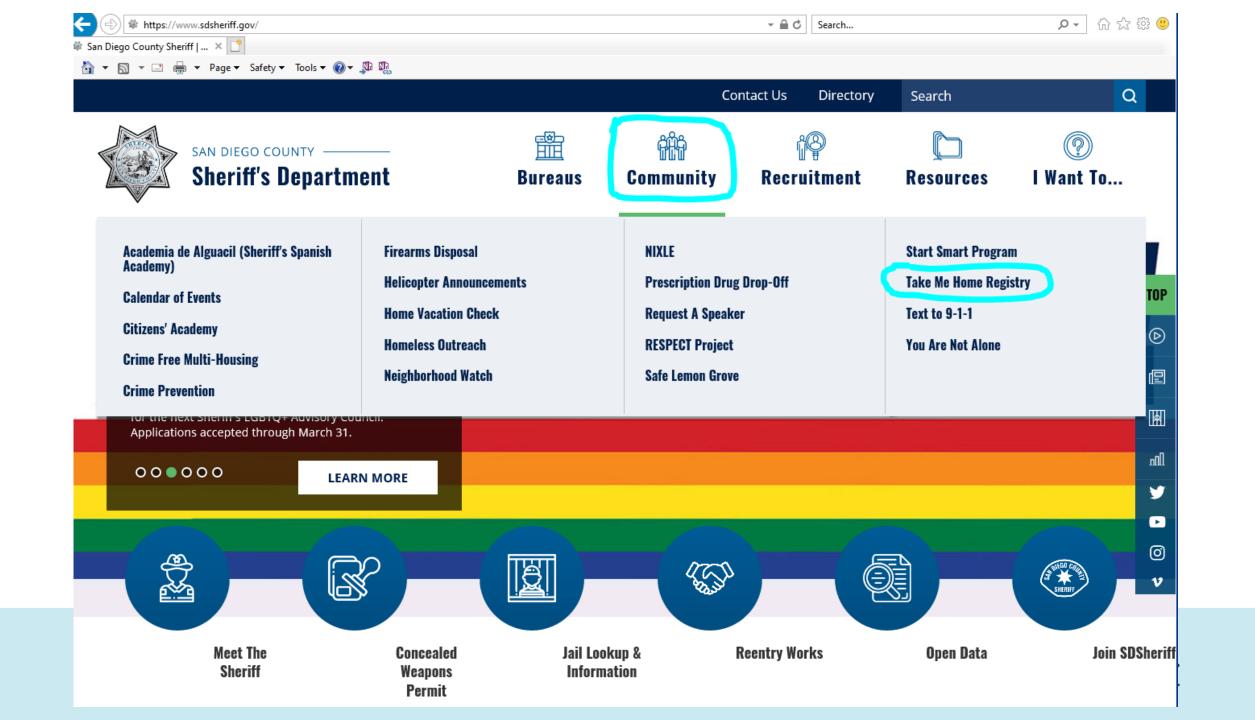
www.sdsheriff.gov/takemehome

 Enroll through a Sheriff's Crime Prevention Specialist at any Sheriff's patrol station.

Information reviewed by Crime Prevention Specialist







# Assisting Clients with Registration

- Assist client with filling out 4-page paper application (please, please, please write legibly.)
- Include a photo (similar to a passport photo)
- Attach the application and photo to an email and send to me

#### Chloe.Ferem@sdsheriff.org

 I will email you back with confirmation and an enrollment number once complete





Registration Date

#### Registration Form

		•
Person being registered		
Diagnosis: (check all that apply)		
□ ADHD	☐ Alzheimer's/Dementia	□ Autism / Aspersers
□ Blind / Low Vision	□ Brain Injury	☐ Cerebral Palsy
<ul> <li>□ Deaf / Low Hearing</li> <li>□ Epilepsy/Seizures</li> </ul>	☐ Diabetic ☐ Intellectual Disability	□ Down Syndrome     □ Mental Illness
Other Brain Illness	Other Developmental Disability	Other Mental Disability
□ Physical Disability	□ Other	
Last Name: Suffix:		
Preferred name to call the registrant: Home Phone: ( )		
Home address:	City:	State: Zip:
Race: Gender: Dale Date of Birth: Height Weight Weight		
Hair color: Built		
Complexion:	Facial hair:	Glasses: Yes No
Home Type: (select one)		
<ul> <li>Adult Residential</li> </ul>	<ul> <li>Assisted living</li> </ul>	□ Elder Residential
□ Foster Family	Group Home	□ Independent
<ul> <li>□ Intermediate Care</li> <li>□ Skilled Nursing</li> </ul>	☐ Lives with family/Relative ☐ State Development Center	☐ Lives with roommate(s)
Wander Tendency: ☐ Yes ☐ No		
Communication Method: (check all that apply)		
☐ Language other than E		
□ Non-verbal		nmunications System
□ Sign Language ASL		
□ Verbal		
Medication Endanger: ☐ Yes ☐ No Spoken languages:		
Commonly worn items:		
Medical or psychological issues:		
Approach suggestions:		
Noted behaviors:		





## Application Questions...

- Home Type- Living situation (ex. Lives alone, lives with family and relatives, lives with roommates, group home, skilled nursing facility, assisted living, elder residential facility)
- Medication Endangered- Does this person rely on regularly scheduled medication to survive (ex. Insulin for Diabetes)
- Name to Call Me- The applicant's nickname





## Application Questions Continued...

- Vehicle Type- Ex. 2 door sedan, 4 door sedan, SUV, van, truck, coup, hatchback
- Closest Law Enforcement Agency- What law enforcement agency covers where the applicant lives.
- Communication Method- Ex. Verbal, Nonverbal, speech difficulty, sign language ASL, hearing difficulty, language other than English, assisted communication device, non communicative





#### Benefits of Take Me Home

- Safeguard those who need extra care
- Speedy return home of lost / at risk clients
- Speedy return of Law Enforcement personnel to other tasks
- Patrol Deputies can become familiar with profiles of enrolled individuals on their beat.
- Regional access (all agency access in San Diego County)





#### **Brian Herritt**

- Palomar College Police Officer (retired)
- Father of a child with Autism "Little Brian"
- Responded to these types of incidents while working
- He has received police assistance as a family and caregiver for his child



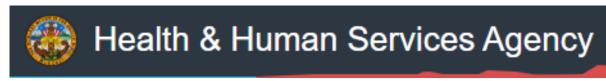


# Partnerships

More "boots on the ground"

Federal Grant benefits



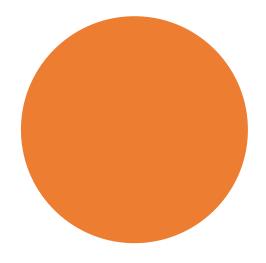


**Adult Protective Services (APS)** 

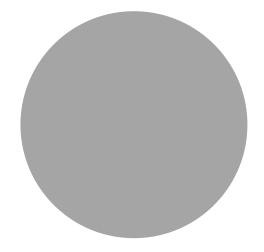




# Questions?



SIGN UP ONLINE FOR TAKE ME HOME AT WWW.SDSHERIFF.GOV/TAKEMEHOME



CHLOE FEREM
OFFICE: 619-660-7011
CHLOE.FEREM@SDSHERIFF.ORG





#### Recommendations



## **Catherine Blakemore**

Committee Chair Family Member Representative



# Questions and Committee Discussion



# Finalizing Master Plan for Aging (MPA) Initiative Recommendations

#### Our Work So Far



- 1. March: Committee leaders reviewed existing plans (MPA, Alzheimer's), pulled together potential initiative ideas from prior discussions, & categorized potential recommendations (March)
- 2. April: Members completed two polls

Poll #1 – Identified 4 priority categories

Poll #2 – Identified 10 priority initiatives

- 3. May: Full committee discussion Narrowed down to top 4 priority initiatives
- **4. Today:** Select third priority (from 2 options) and approve three to be submitted for consideration

#### Recommendation #1



Increase options to provide care to individuals with dementia through strategies such as:

- Developing and launching a Long-Term Services and Supports (LTSS) benefit,
- Establishing a voluntary savings account,
- Setting aside a percentage of Assisted Living Waiver (ALW) program slots for people with a cognitive impairment, and/or
- Increasing the number of slots in the ALW program.

#### Recommendation #2



Secure funding to expand access to dementia capable, personcentered adult day services (ADS) provided by adult day health care centers and adult day programs, with an enhanced rate for participants with mid to late-stage dementia.

## Recommendation #3 (two options)



3a. Secure continued funding to expand access to use of community health workers (CHWs) to provide dementia care management through the state's aging services network.

#### OR

3b. Incorporate family caregivers and persons with dementia, as well as the family caregiving experience into planning in local communities to increase the availability of culturally appropriate services for caregivers.

#### Discussion Points on Two Options



# 3a. Expand CHWs to provide dementia care management

- Program could have more potential.
- State can directly impact the program.
- Funding for CHWs exists in Medi-Cal and Medicare.
- Can impact culturally appropriate services for persons with dementia & caregivers.
- Can influence health care delivery systems.
- Fits better with current fiscal situation.
- Fits with GUIDE model pilot, which launched in July.

# 3b. Local planning efforts incorporate family caregivers and people with dementia

- Demands action of local communities
- Concerns about:
  - How to fund
  - How to implement and/or measure in a way that is meaningful and impactful

Group Recommends
Option 3a.



# Questions/Discussion



## Vote on Recommendations

#### Members



- Barbra McLendon
- Carlos Olivas III
- Catherine Blakemore
- Celine Regalia
- Claire Day
- Dr. Dolores Gallagher
   Thompson
- Julie Souliere

- Ken Graffeo
- Myra Garcia
- Sally Bergman
- Dr. Sarah Tomaszewski
   Farias
- Todd Shetter
- Dr. William Mobley
- Dr. Wynnelena Canlas
   Canio

#### Developing the MPA Initiatives



MPA
Stakeholder
Committee
Recommendatio
ns Submitted &
Shared at the
Day of Action

MPA
Stakeholder
Committee
Recommendatio
ns Distributed to
State MPA
Partners

Work with State
MPA Partners to
Draft MPA
Initiatives

Share draft MPA
Initiatives with
Agency and
Administration
Leaders

Finalize and Release MPA Initiatives

#### BREAK



#### **BREAK**

The meeting will resume at 12:40 p.m.

## California Department of Aging Update



#### **Susan DeMarois**

Director
California Department of Aging (CDA)

## California Department of Public Health Update



#### **Lisa Gonzales**

Communications & Prevention Lead, Alzheimer's Disease Section, California Department of Public Health

#### **Cynthia Foltz**

Clinical Lead, Alzheimer's Disease Section, California Department of Public Health

#### Jarmin C. Yeh, PhD, MPH, MSSW

Associate Professor, Institute for Health & Aging, University of California, San Francisco

## Alzheimer's Disease Program Update

Cynthia Foltz & Lisa Gonzales, MPH

California Department of Public Health Chronic Disease Control Branch Alzheimer's Disease Program



# Alzheimer's Disease Public Awareness Media Campaign – TAKE MALZHEIMER'S (February-June 2024)

- Paid Media: TV, Radio, Digital/Social, Out of Home, & Print
- Owned Media: Campaign Website <u>TakeonAlz.com</u>
- Earned Media: 3 Ethnic media briefings, 5 Byline articles, & 64 Media interviews
- Community Outreach: 3 Regional community/media events & several local tabling events
- Final Deliverables under development:
  - Tracking Study Survey Results and Wrap Up Evaluation Report











# California Healthy Brain Initiative Successes

#### **Educate the Public**

- 269 educational workshops/sessions/events conducted on brain health, risk factors for dementia, benefits of early detection and diagnosis, and caregiver support resources to 11,950 community members.
- **785** educational media advertisements have been placed.

#### **Strengthen Partnerships and Policies**

• **162** community partners have been engaged.

#### **Build a Diverse and Skilled Workforce**

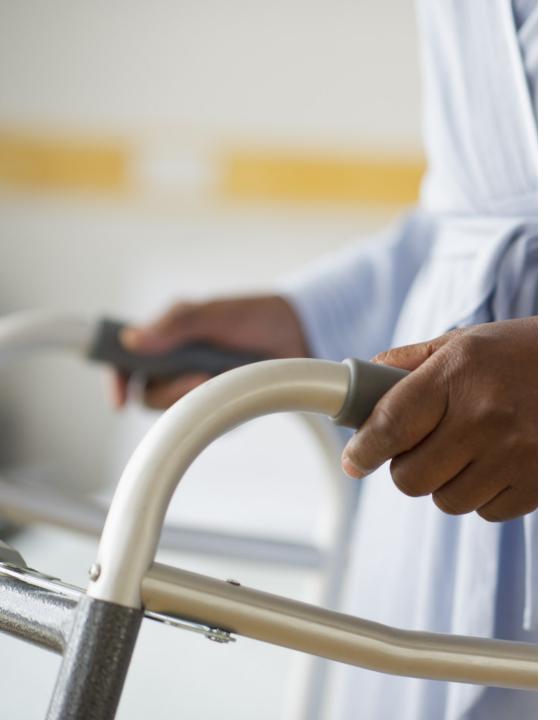
74 professional education training sessions delivered to 2,451
 ADRD professionals and healthcare providers.

#### Measure, Evaluate, and Utilize Data

 ADRD surveillance and HBI program data collected regularly to inform community activities/services.







## Caregiver Training Program

- Focusing on unpaid family caregivers
- No cost, online, multi-lingual
- Partnerships with UCSF-Fresno and UCI
- \$3.4 million until June 30, 2025
- 28 Caregiving Training Modules have been developed
  - In progress of being expert reviewed and piloted within local communities
  - Translated into English and Spanish
  - Final videos and module guides expected to be available by January 2025

# California Research Projects

Research Project Updates

Seven 2024 research grants have launched and run through June 30, 2028

Launched a Series of Research Symposia hosted quarterly:

June 21, 2024 hosted 1st Virtual Research Symposium

Presentation: 2019 ADP-Funded Research Project "Advances in Deep Neuropathological Phenotyping of Alzheimer Disease: Past, Present, and Future"

Presenter: Dr. Britany N. Dugger, PhD Associate Professor, UC Davis School of Medicine, Department of Pathology and Laboratory Medicine

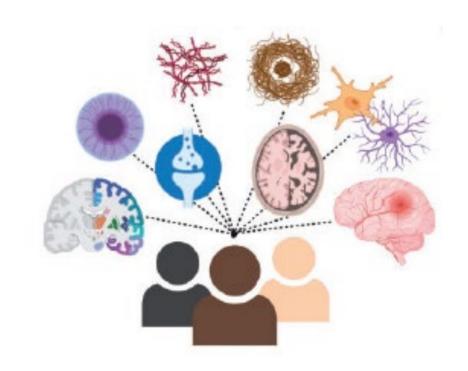
The next Symposium will be on October 18, 2024

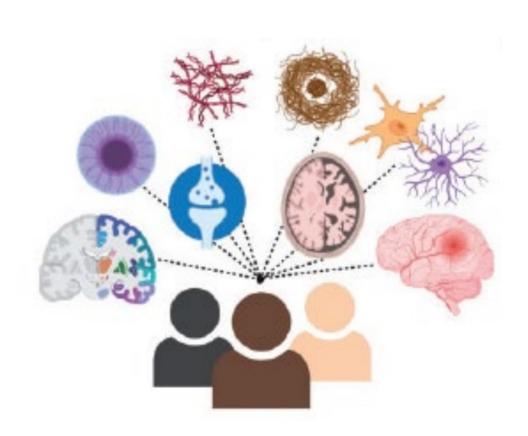
Presentation: "Alzheimer's Disease Neuroimaging Initiative"

Presenters include:

Michael Weiner, MD, Professor of Radiology at UCSF

Rachel Nosheny, PhD, Associate Professor in Residence at UCSF





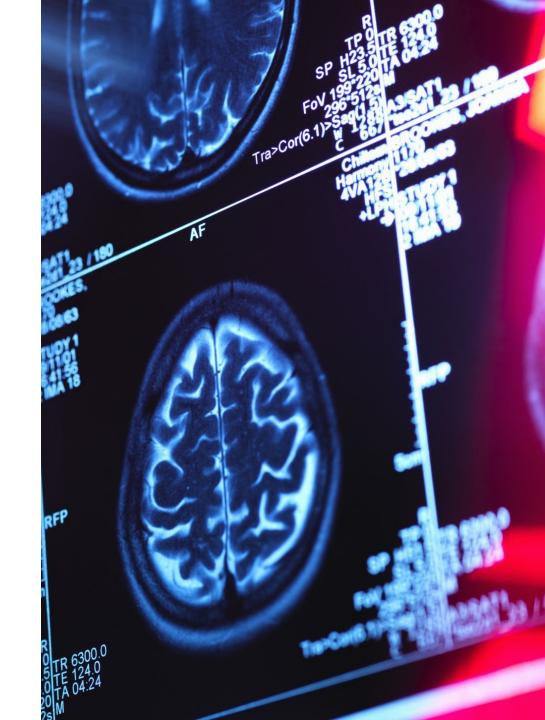
# California Research Projects

Update on Alzheimer's Disease and Related Dementias Facts and Figures in California Report by:

Jarmin C. Yeh, Ph.D Institute for Health and Aging, University of California, San Francisco, CA

## **Questions?**

Alzheimer's Disease Program, CDCB, CDPH <u>AlzheimersD@cdph.ca.gov</u>





Updating Report –
Alzheimer's Disease and Related
Dementias Facts and Figures in
California: Current Status and Future
Projections

Jarmin Yeh, UCSF Institute for Health & Aging ADRD Advisory Council, August 2024



### Report history



2009

2026





### **Timeline**



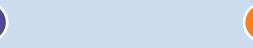
August 2024:

ADRD AC reviews draft report outline & provides input

November-March 2025:

Finalize draft report content;

Prepare for postproduction







August 2025:

ADRD AC reviews draft report content & provides input

March-June 2026:

Final report complete;

Prepare for dissemination





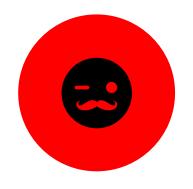


#### **Draft outline**

- Executive Summary
- Section I: Alzheimer's disease and related dementias in California
- Section II: Living arrangements for people living with Alzheimer's disease
- Section III: Caregiving for people with Alzheimer's disease and related dementias
- Section IV. Costs of caring for people with Alzheimer's disease and related dementias
- Section V. Geriatric and dementia workforce and efforts to bolster care
- Section VI. State Alzheimer's disease and related dementia initiatives
- Appendices (A-L)
- Figures (1-21)
- Tables (1-9)



#### **FEEDBACK WELCOME**







INSTITUTE FOR HEALTH & AGING, BOX 0646
490 ILLINOIS STREET,

FLOOR 12

SAN FRANCISCO, CA 94118



JARMIN.YEH@UCS F.EDU



415-502-7097

#### Legislative Update



#### **Barbra McLendon**

Public Policy Director, Alzheimer's Los Angeles

#### **Jason Gabhart**

Government Affairs Director, Alzheimer's Association





# 2024 State Legislative Session Update

### **State Budget**



- Protected funding for:
  - Older Californians Act nutrition programs
  - Adult Protective Services expansion and training
  - Medi-Cal and IHSS access for undocumented individuals
  - Rate increase for Community-based Adult Services
  - Additional funding for the LTC Ombudsman Program



## Alzheimer's Related State Legislation Still Moving:



• AB 2541(Bains)- Peace Officer Training- Directs the Commission on Peace Officers Standards and Training (POST) to develop guidelines to improve response when someone wanders.

## Caregiver Legislation Still Moving:



- AB 518 (Wicks)

   Expands relationships eligible for paid family leave to include a "designated person".
- SB 1090(Durazo)

   Early Application for Paid Family Leave and Disability Insurance Benefits
- AB 2123(Papan)- Allow workers to access PFL without having to use vacation time first



## Caregiver Legislation Still Moving:



- AB 2075 (Reyes)- Resident Access Protection Act- Ensures inperson, onsite access to visitors or a health care and social services provider during a public health emergency in which visitation rights of residents are curtailed by a state or local order.
- AB 2549(Gallagher)- Hospital visitation Ensuring family caregiver access during public health emergencies.



## **State Legislation Still Moving:**



- AB 1911(Reyes)- Residential Care Facilities: Expedited Complaints
- AB 1993(Kalra)- RCFEs- Maximum number of residents from 6 to 8.
- SB 1406(Allen)- RCFEs- Resident rights to refuse services, notification timeframes for fee increases
- SB 53(Portantino)- Would require safe storage of firearms for all gun owners



## Caregiver Legislation No Longer Moving:



- Caregiver legislation
  - AB 2002 (Sanchez)- Blue Envelope program
  - AB 3079(Ting)- IHSS Program: Undocumented related provider-Would allow undocumented people to be IHSS caregivers for family members



## **State Legislation No Longer Moving:**



- SB 875 (Glazer)- Referral agency bill
- AB 3207(Patterson)- Creates a support hotline for seniors who are victims of online scams
- AB 2356(Wallis)- Increasing monthly maintenance amounts for people in nursing facilities to cover personal expenses from \$30 to \$50



## State Legislation No Longer Moving:



- AB 2428 (Calderon)- Medi-Cal Community Based Adult Services
  - Require Medi-Cal Managed Care Plans to reimburse CBAS providers at a rate equal to or greater than the amount paid by the Medi-Cal fee-for-services delivery system (\$76.27/day)



## Alzheimer's Association State Legislative Update

**Jason Gabhart, Director of Government Affairs** 

ALZHEIMER'S \( \frac{1}{2} \) ASSOCIATION°

# AB 2680 Alzheimer's Disease & Related Disorders Advisory Committee

- Expands Committee Membership
  - Including first responders, primary care physicians
- Revises the phrase "Alzheimer's disease" to "Alzheimer's condition or related disorders"
- Removes one-year term limit for the two committee members living with Alzheimer's or related dementias

## SB 639 Medical Professionals Continuing Education

 Adds "the special care needs of patients with dementia" to the continuing education of certain MDs and DOs

 Requires physician assistants and nurse practitioners that have a patient population of which over 25% are 65 or over to complete least 20% of their continuing education in a course in the field of gerontology, the special care needs of patients with dementia, or the care of older patients.

# AB 2689 Alzheimer's Disease and Related Dementia Research Voluntary Tax Contribution Fund

- Extends the voluntary fund to 2032
- For the previous six years, the fund has raised more than a half million dollars annually to provide research dollars to California scientists.
- Recent grant awardees include UCLA, UCSF, USC, for their work on reducing disparities in diagnoses in California's diverse population.

## Alzheimer's and Brain Awareness Month Resolution (ACR 204, Soria)

 Assemblymember Esmerelda Soria (D-Jackson) introduced our annual resolution recognizing June 2024 as Alzheimer's Disease and Brain Awareness Month.

#### **Public Comment**



Time is reserved on the meeting agenda for public comment.

- In-Person Comments: Raise your hand or let Michelle know you want to make a public comment.
- **Verbal Comments**: "Raise your hand" in the Reactions feature of Zoom or press \*9 on your phone dial pad to enter the line for a verbal comment. The moderator will unmute your line and announce your name or the last 4 digits of your phone number.
- Written Comments: You may submit comments throughout the meeting using the Zoom Q&A or email <a href="mailto:Engage@aging.ca.gov">Engage@aging.ca.gov</a>.

**Note**: Public commentors will each have up to 2 minutes.



## Finalize Recommendations and Items for Secretary Ghaly

Catherine Blakemore, Committee Chair



## Closing Comments, Upcoming Meeting Dates and Next Steps

Catherine Blakemore, Committee Chair

#### 2024 Meeting Schedule



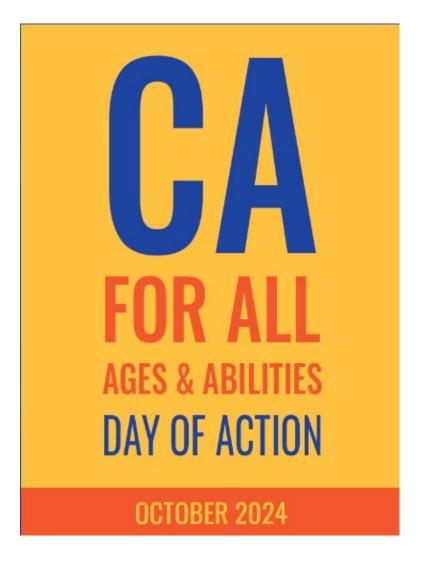
- October 8 CA for All Ages & Abilities (MPA) -Sacramento
- November 7

Committee meetings held in-person in Sacramento with Zoom option



### CA for ALL Ages & Abilities: MPA Day of Action





Date: Tuesday, October 8, 2024

**Location:** SAFE Credit Union Convention Center

Sacramento, CA

Time: Full-day, specific time: TBD

Registration: Still Open

Website: <a href="https://www.caforall.org/">https://www.caforall.org/</a>

Thank you to the MPA's philanthropic partners for supporting this event.











#### Thank You!



## Visit the <u>CalHHS Alzheimer's</u> <u>Disease & Related Disorders</u> <u>Advisory Committee webpage</u> for:

- More information about the Committee
- Upcoming meeting dates
- Presentations, recordings, and transcripts of past meetings