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Statement of the Western and Central Washington State Chapter
Alzheimer's Association

I am pleased to submit this statement for consideration by the LTC Worker Training Workgroup on behalf of the Western and Central Washington State Chapter of the Alzheimer's Association. The Association believes that having a well trained workforce is essential for people and families who are living with Alzheimer's disease and other dementia disorders. In fact, teaching paid care givers how to intervene and redirect when behavioral issues are present is often more effective than the commonly prescribed drugs, many of which make things worse. Moreover, with competent training care staff can learn ways to care for people with dementia that will avoid trips to the ER and hospital admissions—expensive options for the system and distressing for the individual with dementia and his family.

Thus we strongly urge the Workgroup to support mandatory initial and continuing education for paid care givers that is dementia specific. Dementia is so prevalent among the elderly (13% of those over 65 and nearly half of those over 85 years of age) that any worker who has elderly clients is sure to need specialized training. Statistics recently reported at a national level meeting hosted by the Administration on Aging reveal that about 40% of home and community based clients have dementia. The number is likely to be higher in Washington because this State was in the forefront of rebalancing its LTC program. Thus, elders who would be institutionalized in other States may be receiving services in their homes under the COPES waiver.

We recommend that the State adopt a requirement for 8 hours of specialized dementia training for initial employment in the field and 8 hours of continuing education each year in dementia care. For example, the basic caregiver training may be sufficient for learning how to help a client bathe. But, if the client has dementia and resists the help, the caregiver will need to know special techniques in order to serve the client well. The behaviors that can arise when a client suffers from Alzheimer's disease often make even the most routine and simple care giving tasks much more challenging. We strongly advocate that the State provide care givers with specialized training to make their jobs easier and make life easier for people with dementia.

We defer to the advocates in the DD community concerning training needs for home care workers who serve their clients. We would note, however, that people with Down syndrome have a very high probability of developing Alzheimer's disease and typically this happens when they are in the 50's. Thus, personal care providers who work with this group should have specialized dementia training made available to them.

Nancy J. Dapper
Executive Director

the compassion to care, the leadership to conquer