

**ALZHEIMER'S DISEASE TASK FORCE
RECOMMENDATION FORM**

Please include only one recommendation on each form.

This form must be returned via e-mail to katie.mulford@iowa.gov no later than 5:00 p.m., Tuesday Nov. 27, 2007

Name Doug Cunningham

Phone (515) 309-0858

Agency, if any Iowa Respite and Crisis Care Coalition (IRCCC) **E-mail** ed@irccc.com

Address 3821 71st Street, Suite A, Urbandale, Iowa 50322

Each recommendation must fit into one of the following categories. Please check the appropriate box:

Education and training

Services and housing

Funding and reimbursement

Wellness and disease management

RECOMMENDATION:

Authorize a \$150,000 per year request, for a minimum funding period of three years to demonstrate the effectiveness of providing "Seniors-at-Home" a respite and crisis care service that strengthens families/caregivers by meeting the short term demands of rest for caregivers of seniors with Alzheimer's/Dementia and prevents the need for other more intensive services.

IN 250 WORDS OR LESS, PLEASE INCLUDE COMMENTS, JUSTIFICATION, RESOURCES OR OTHER INFORMATION TO HELP THE TASK FORCE UNDERSTAND THE IMPORTANCE OF YOUR RECOMMENDATION.

Across the state and the nation, policy leaders promote and believe that respite and prevention based programs reduce the cost of long term care and help families stay together in healthy environments. As advocates we believe that respite helps, however there is little evidence which concludes the validity of the claim that the provision of respite care reduces long-term care costs, helps families stay together and improves the quality of life for the individual needing care and of their caregivers.

To manage the health care needs of a growing number of baby boomers in the State of Iowa that struggle with Alzheimer's disease, legislators need conclusive evidence that an investment in prevention services is not only a good investment but an investment that promotes health and wellness, helps families stay together, reduces cost and reduces dependence on an already overburdened long-term care and critical care system.

"Seniors-at-Home" demonstrates the financial respite incentive necessary to maintain a person with Alzheimer's in their family home, tracks outcome measures and will make recommendations as to an appropriate investment in respite care. The funds should be used to support a proposal that determines what allocation levels are most effective. For example:

“What are the differences in health, wellness, family support, and long-term care risks of persons with Alzheimer’s and their caregivers that receive \$500 per quarter versus families that receive \$250 per month, \$500 per month and \$1,000 per month?”