

**Philip Sloane, M.D., M.P.H.**

University of North Carolina at Chapel Hill  
Chapel Hill, North Carolina

## **Interim Progress Report**    Improving Medical Care of Assisted Living Residents with Dementia

2004 Pioneer Award for Alzheimer's Research—\$1,000,000 over five years  
*Sponsored by The Judy Fund*

**Period Covered by This Report**    March 1, 2008 through February 28, 2009

**Location of Research**    University of North Carolina at Chapel Hill

**Background**    Philip Sloane, M.D., M.P.H. initially proposed to develop practical ways to improve the medical care of individuals with dementia in assisted living facilities. The strategy proposed by Dr. Sloane and colleagues involved training retired physicians to disseminate and implement improved medical care in these facilities. However, during the first two years of their project, the researchers discovered that this approach was not feasible, largely because of the complexity of medical care required by individuals with dementia. After reaching this conclusion, Dr. Sloane chose to expand the scope of his proposal and embark on a comprehensive plan to identify and study innovative strategies for improving medical care for persons with Alzheimer's disease and related disorders.

**Goal of Study—Specific Aims**    Dr. Sloane refocused the goals of the study toward two overarching goals. The first goal was to use the Pioneer award to support pilot studies of innovative approaches for improving the care of individuals with Alzheimer's. The approaches the researchers have chosen to study have the potential to yield large improvements in care, but they are also considered high-risk projects, in the sense that they may not be successful. Because of the high-risk nature of these approaches, it is difficult for researchers to obtain funding to study them. But the Pioneer award has provided Dr. Sloane and colleagues the unique opportunity to pursue these potentially groundbreaking approaches.

The second goal of their research is related to the first. Funding of pilot studies by the Pioneer award will be used to attract additional sources of funding to expand pilot studies, or to extend successful research concepts to the next phase of study. In this regard, the Pioneer award will serve as seed

---

funding for research into several innovative programs aimed at improving the care of individuals with Alzheimer's disease and related disorders.

## **Research Outcomes and Significance**

Dr. Sloane's team is in various phases of several pilot studies. The team has completed data collection for two pilot studies and data analysis of one of these studies. One study is aimed at identifying ways to prevent falls in assisted living facilities, and data collection is complete. The second study is aimed at identifying the causes of medication errors in assisted living facilities. This study found that certain medications are particularly susceptible to medication errors; susceptible medications were those requiring very tight control of dosing and time of administration. The researchers recommended that educational and quality improvement efforts target the personnel administering these medications.

Dr. Sloane and colleagues have begun a third pilot study, which is designed to compare different models of medical care at assisted living facilities in seven states. Through this study, the researchers plan to examine the value of nurse practitioners, physician assistants, electronic medical records and physicians dedicated to long-term care in the administration of medical care in these facilities.

Another pilot study was conducted to examine the possible role of acupuncture for relieving pain in patients undergoing rehabilitation after hip fracture. This study found some preliminary evidence that acupuncture may have some benefits without causing excessive side effects. This preliminary data was used to support a grant submission to the National Institutes of Health for a larger study.

Because of his earlier work on developing a physician volunteer program for long-term care facilities, Dr. Sloane has been asked to participate in a large-scale volunteer program. He will work with the program's researchers to identify strategies for improving rates of participation by retired physicians. Dr. Sloane has also used funding from the Pioneer award to collaborate on studies of dementia care in a large network of care facilities, and to develop funding sources for a statewide program to provide training and support for dementia caregivers in North Carolina.

## **Future Work**

Dr. Sloane and colleagues plan to continue collecting and analyzing data from their pilot studies, and participating as researchers and advisors for their many projects related to improving medical care for individuals with dementia. They also plan to implement a new program intended to provide education materials about best medical practices to caregivers and facilities treating individuals with Alzheimer's disease and related conditions.

---

## Publications

Sloane PD, Zimmerman S, Williams CS, Hanson LC. Dying with dementia in long-term care. *Gerontologist*. 2008 Dec;48(6):741-51.

Kaufert DI, Williams CS, Braaten AJ, Gill K, Zimmerman S, Sloane PD. Cognitive screening for dementia and mild cognitive impairment in assisted living: comparison of 3 tests. *J Am Med Dir Assoc*. 2008 Oct;9(8):586-93.

Sloane PD, Cohen LW, Konrad TR, Williams CS, Schumacher JG, Zimmerman S. Physician interest in volunteer service during retirement. *Ann Intern Med*. 2008 Sep 2;149(5):317-22.

Sloane PD, Ivey J, Helton M, Barrick AL, Cerna A. Nutritional issues in long-term care. *J Am Med Dir Assoc*. 2008 Sep;9(7):476-85.

Williams SW, Williams CS, Zimmerman S, Munn J, Dobbs D, Sloane PD. Emotional and physical health of informal caregivers of residents at the end of life: the role of social support. *J Gerontol B Psychol Sci Soc Sci*. 2008 May;63(3):S171-83.

Giuliani CA, Gruber-Baldini AL, Park NS, Schrodt LA, Rokoske F, Sloane PD, Zimmerman S. Physical performance characteristics of assisted living residents and risk for adverse health outcomes. *Gerontologist*. 2008 Apr;48(2):203-12.

Caprio AJ, Hanson LC, Munn JC, Williams CS, Dobbs D, Sloane PD, Zimmerman S. Pain, dyspnea, and the quality of dying in long-term care. *J Am Geriatr Soc*. 2008 Apr;56(4):683-8.

Zimmerman S, Sloane PD. Identifying characteristics of residential care facilities relevant to the placement process of seniors. *J Am Med Dir Assoc*. 2008 Feb;9(2):73-4.

## Budget

With every peer-reviewed research grant awarded by the Alzheimer's Association, all indirect costs are capped at 10 percent (rent for laboratory/office space is expected to be covered by indirect costs paid to the institution). The Association expects and enforces that 90 percent of the grant goes directly to funding the research itself. No more than 10 percent of the grant can be directed to administrative costs.

Approved by William H. Thies, Ph.D., Chief Medical and Scientific Officer, as a confidential communication to the Judy Fund. Alzheimer's Association grant PIO-04-1004 research progress report.