



## Weill Cornell Medicine Geriatrics & Palliative Medicine

### **The Role of Public Health in Enhancing Support for ADRD Care Partners** **Findings from “*The 2021 Conference on Engaging Family and Other Unpaid Caregivers of Persons with Dementia in Health Care Delivery*”**

October 1, 2021

Weill Cornell Medicine

#### **CARE PARTNERS OF PERSONS WITH DEMENTIA**

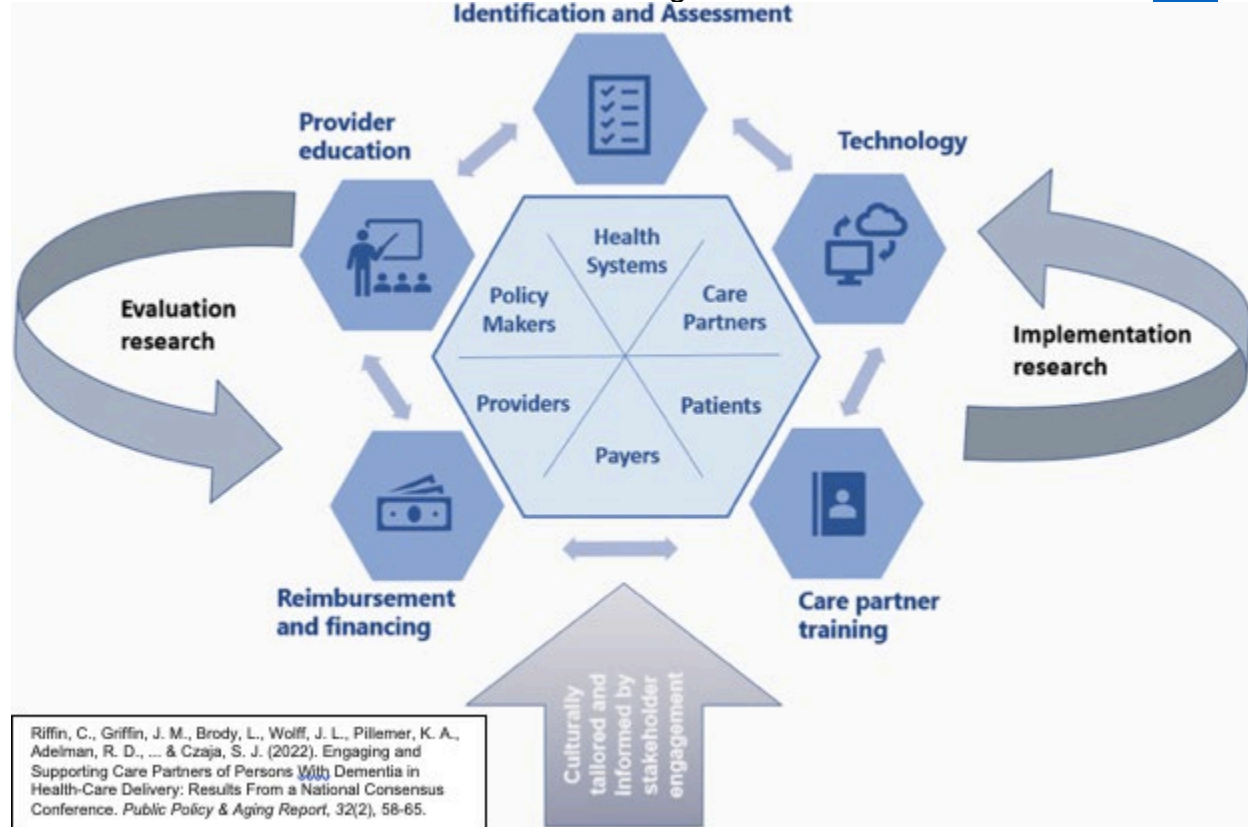
Decades of research has established an extensive knowledge base on the negative implications of care partner burnout and its widespread effects on care partners, patients, and care delivery systems at large. Interdisciplinary experts across the research-practice-public policy continuum agree that efforts to systematically engage and support care partners, with particular emphasis on health equity and inclusion of minority and underrepresented groups, are imperative in enhancing the provision high-quality, family-centered care to individuals with ADRD.

#### **THE CONSENSUS CONFERENCE**

With funding from the National Institute on Aging, our interdisciplinary team of researchers, clinicians, and policy representatives hosted the 2021 Conference on Engaging Family and Other Unpaid Caregivers of Persons with Dementia in Healthcare Delivery on October 1, 2021, at Weill Cornell Medicine in New York City. The goal of the conference was to establish a policy- and practice-aligned research agenda for enhancing ADRD care partner engagement and support across healthcare settings. Members of the conference steering committee and attendees represented five stakeholder groups: care partners of persons with ADRD, public health experts, healthcare providers, researchers, payers, and individuals from non-profit organizations. In total, 65 thought leaders attended the hybrid event: 23 convened in person and 42 attended virtually.

The conference consisted of panel presentations and consensus activities aimed at identifying key recommendations for advancing the field. The resulting recommendations centered on five priority areas: (1) Identification and assessment of ADRD care partners in care delivery settings, (2) Reimbursement and financing for ADRD caregiver assessment and support, (3) Caregiver training and support across the care continuum, (4) Healthcare provider education on family-centered care, and (5) Technology innovations that support ADRD caregivers. To support future work in each of the five priority areas, conference participants highlighted the importance of

leveraging lessons from implementation science and models of equity and inclusion. More details about the conference and resulting recommendations can be found [here](#).



## NEXT STEPS

Public health initiatives are needed to establish a national infrastructure focused on supporting and engaging care partners in healthcare delivery. Specific efforts, such as leveraging technology and enhancing provider education, must engage models of inclusion and equity throughout the research, clinical, and policy making processes to better support care partners in their role, improve the quality-of-care delivery provided to ADRD patients, and promote lasting policy and practice change. Public health organizations are a particularly vital component in the research-practice-policy partnership pipeline that will be necessary to build as we move toward achieving measurable, sustained progress in implementing actionable change to better support ADRD care partners.

For further information about the conference and the recommendations that followed, please see our [publication in the Public Policy and Aging Report](#).