

Early Dementia Detection Initiative - CHR Mini-Cog Screening

IHS COMMUNITY HEALTH REPRESENTATIVE (CHR) & ALZHEIMER'S
PROGRAM PARTNERSHIP



The IHS Mini-Cog Pilot Team



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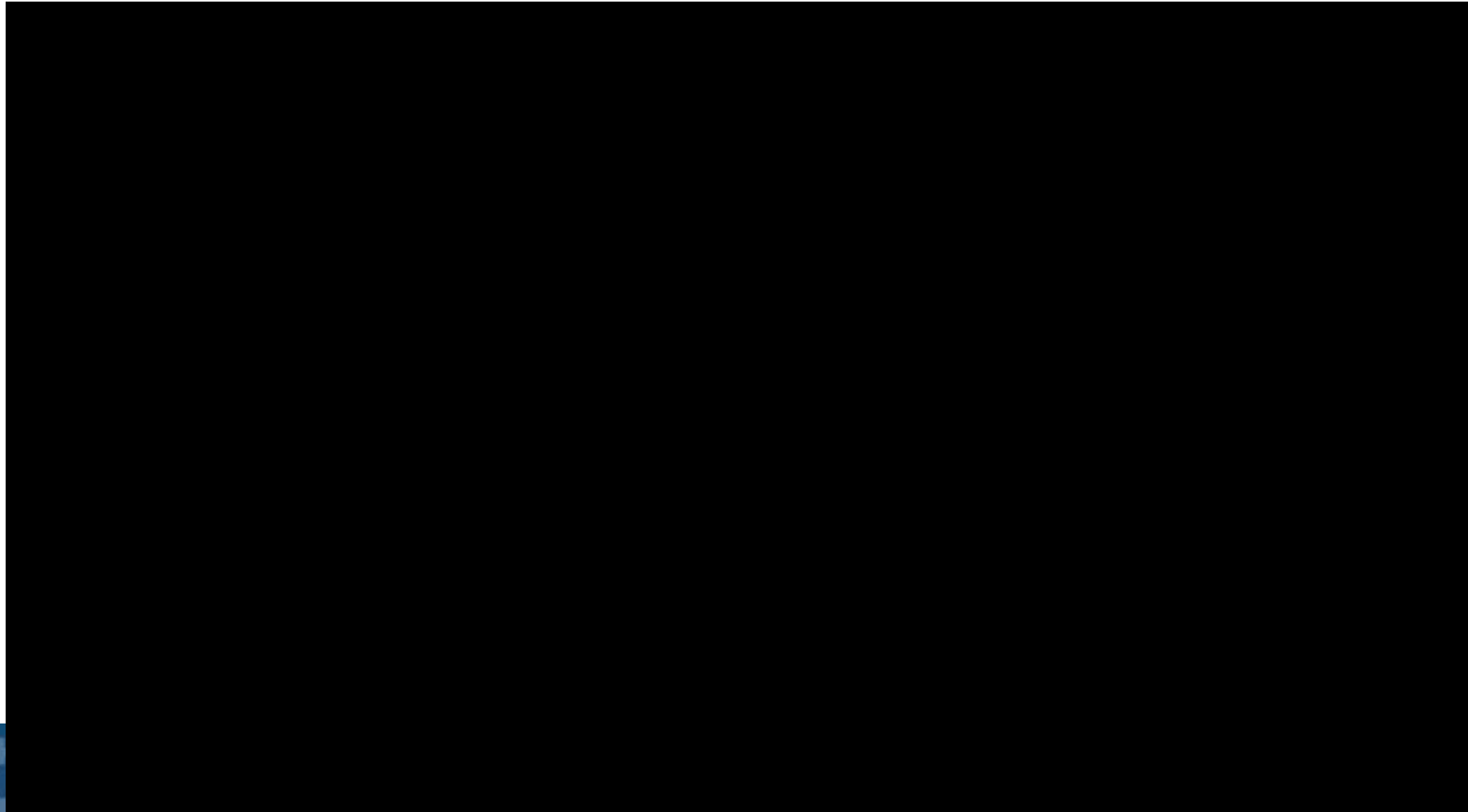


Objectives

- Provide a demonstration of the Mini-Cog cognitive impairment screening tool
- Discuss what the Mini-cog is and when to use it
- Share research on how dementia impacts American Indian and Alaska Native communities
- Identify 10 signs that can be red flags for cognitive impairment
- Share relevant findings from the first year of the Mini-Cog pilot that apply to your work as a CHR
- Identify an opportunity for your CHR program to get involved in the next pilot



The Mini-Cog – 3 min Screener



The Mini-Cog® is a fast and simple screening test to help detect dementia in its early stages.

In just 3 minutes, Mini-Cog® can help doctors and other professional care providers identify possible cognitive impairment in older patients.

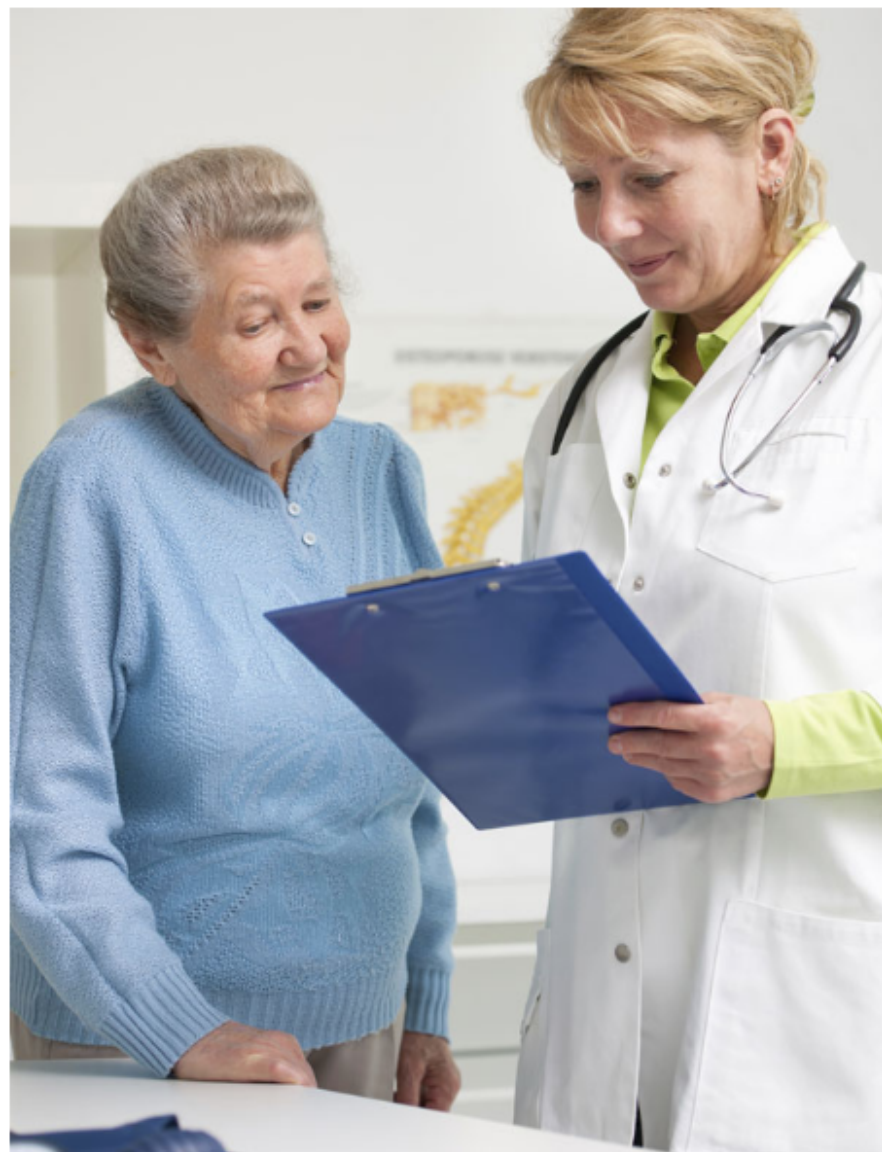
This gives people who are starting to show signs of cognitive impairment a better chance for early diagnosis and care. This could make a big difference in their health and quality of life now and later on.

Mini-Cog® is simple to use and can help determine when more in-depth cognitive evaluation is needed.

It's easy to include in regular wellness exams, primary care visits, other health care settings, and anywhere older adults go to find needed services, such as senior centers and community organizations.

Learning to give the Mini-Cog® takes less than 10 minutes—no special medical knowledge needed.

[LEARN MORE](#)



Dementia among American Indian and Alaska Native Populations

- A 2024 NIH study found that **54% of older American Indians** have cognitive impairment, including 10% with dementia.
- A study based on Medicare data estimated the prevalence of Alzheimer's disease or related **dementias at 10.5 percent** among American Indian and Alaska Native populations.
- Recent IHS research finds that 14% of American Indian and Alaska Native IHS patients had **early-onset dementia (between the ages of 45 and 64)**. This is higher than the global average of 9%.
- 1 in 6 American Indian and Alaska Native **adults aged 45 and older reports experiencing subjective cognitive decline**, which can be a precursor to dementia.

Suchy-Dacey AM, et al. Epidemiology and prevalence of dementia and Alzheimer's disease in American Indians: Data from the Strong Heart Study. *Alzheimer's & Dementia*. 2024. doi: 10.1002/alz.13849

Apostolou, A., Kennedy, J. L., Person, M. K., Jackson, E. M. J., Finke, B., McGuire, L. C., & Matthews, K. A. (2024). Alzheimer's disease and related dementia diagnoses among American Indian and Alaska Native adults aged ≥45 years, Indian Health Service System, 2016-2020. *Journal of the American Geriatrics Society*, 72(9), 2834-2841. <https://doi.org/10.1111/jgs.19058>

Department of Health and Human Services Indian Health Service announces investment to address Alzheimer's Disease in Indian Country on World Alzheimer's Day . September 21, 2022. <https://www.ihs.gov/newsroom/pressreleases/2022-press-releases/indian-health-service-announces-investment-to-address-alzheimers-disease-in-indian-country-on-world-alzheimers-day>

It starts with detection

Triggers for Screening (red flags)

10 Warning Signs
Worsening of chronic conditions
Poor oral or other hygiene
Poor understanding of medications
Difficulty with adherence to plan
Vagueness in history



Risk Factors

Age
Diabetes
Kidney disease
Heart disease/ HTN
Stroke
Hearing loss
Head injury
More!



Simple Screen
(Mini-Cog)

Detection – 10 Signs

We think about *cognitive impairment* when we see...

1. Memory loss that affects daily life
2. Trouble planning or solving problems
3. Get confused about time, date, or where you are
4. Daily tasks are getting harder, e.g., driving
5. Trouble with how your eyesight and thinking work together gets worse
6. New trouble talking or writing
7. Lose and cannot find things
8. Notice changes in mood or personality
9. Act different and more poor choices
10. Pull away from friends and family because it is harder to keep up

Source: International Association for Indigenous Aging. Retrieved from <https://iasquared.org/resources/10-signs-of-thinking-or-memory-changes-that-might-be-dementia/>



10
SIGNS

OF THINKING OR MEMORY CHANGES
THAT MIGHT BE DEMENTIA

As we get older, we may slow down a bit.

This is a normal part of aging. Changes in memory or thinking that make it harder to get through the day, are not a normal part of aging. **These may be early signs of dementia.**

Because American Indian and Alaska Native people have a high risk of dementia, it is important to know the warning signs.



Do you have any of these 10 signs? If so, talk to your doctor.

- 01 **Memory loss that affects your daily life.** You may:
 - Forget events or important dates
 - Repeat yourself
 - Rely more often on lists or sticky notes to remember
- 02 **Trouble planning or solving problems.** You may have a harder time:
 - Paying bills
 - Cooking recipes you have used for years
- 03 **Get confused about the time, date, or where you are.**
- 04 **Daily tasks are getting harder, including:**
 - Driving
 - Making a grocery list or going shopping
- 05 **Trouble with how your eyesight and thinking work together that gets worse.** This includes:
 - Tripping, falls, or problems with your balance
 - Spilling or dropping things more
- 06 **New trouble talking or writing.** You may have a harder time finding the words you want to say. For example, you may say "that thing on your wrist that tells time" instead of "watch."
- 07 **Lose and cannot find things.** For example, you:
 - Can't find the coffee pot that you use every day
 - Might put your car keys in the freezer
- 08 **Notice changes in mood or personality,** such as being:
 - Easily mad or sad in everyday situations
 - More fearful (scared) or suspicious (not trusting)
- 09 **Act different and make poor choices.** You may:
 - Spend money you do not have or be a scam victim
 - Stop washing up regularly or pay less attention to how you look
 - Forget to take care of your pet
- 10 **Pull away from friends and family because it is harder to keep up.** You may not want to do things you used to enjoy, like sporting events, church, music, or sex.



American Indian and Alaska Native people have a high risk of dementia.



Big changes in memory or thinking that make it hard to get through the day are not a normal part of aging.



People with one or more of these 10 signs should talk to their doctor to find the cause. It is not always dementia.



Early dementia diagnosis gives you a chance to get care and plan your future.



AMERICAN INDIAN
and ALASKA NATIVE
RESOURCE CENTER FOR BRAIN HEALTH

To learn more, visit:

www.AIANBrainHealth.org
www.cdc.gov/aging

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Benefits of early and timely detection

- Rule out other / treatable causes of cognitive impairment symptoms
- Start lifestyle and other changes early when they will have the most benefit
- Plan for future healthcare and financial decisions
- Get info and education earlier before a crisis or care needs are greatest
- Connection to community and support services before a crisis happens
- Consider medications and other treatments, which almost all work better the earlier dementia is detected



The Pilot – Year 1

- Pilot Aims
 - **Primary:**
 - Explore the feasibility of CHRs using the Mini-Cog© brief cognitive screening in community settings, including referral to clinical setting
 - **Secondary:**
 - raise awareness of dementia
 - establish peer-to-peer learning networks
 - examine data collection and EHR documentation approaches
- 6 CHR programs & 6 months



Important Evaluation Questions

- Can CHRs implement cognitive screening using the Mini-Cog©?
- What barriers and facilitators exist to screening at the local level?
- Should the pilot continue beyond year one?



Can CHRs implement cognitive screening using the Mini-Cog®?



Facilitators and Challenges at the Local Level

- CHRs who were confident in their ability to implement other screenings.
- "Just doing it."
- Existing local knowledge of the screening tool.
- Using pre-scheduled local events, e.g., health fair and senior center, with large groups of attendees.
- Embedding the process into routine workflows increases likelihood of sustainability

Facilitators and Challenges at the Local Level

- Staff confidence is biggest barrier to getting started.
- Local leadership and clinic were not always aware the CHR program was participating.
- Some clinics asked if CHR dementia screening is appropriate role.
- Majority of sites started with limited to no experience working with patients with dementia.
- Sites reach saturation (running out of people to screen) if they rely on events.
- Need to better understand and explore warm handoffs.
- Explore use of RPMS to help the process.
- No close-out on the referral process or the information-sharing loop between the CHR and clinic.

Should the pilot continue beyond year one?



Come Join Our Second Pilot!

- [CHR Mini-Cog Screening Pilot](#)
- Up to 10 CHR programs
- Receive funding and training to use the Mini-Cog® screening tool.
- Participating CHRs will also be equipped to provide education and connect patients to resources.
- Runs January 1 – June 30, 2025
- Apply by Nov. 18 - [click here for the application](#)



Bring early dementia screening to American Indian and Alaska Native communities with **up to \$10,000 in funding, training and support!**

IHS Community Health Representative Program





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**For more about Alzheimer's disease and other dementias
and the IHS Alzheimer's Grants Program, visit:**
<https://www.ihs.gov/alzheimers>

