Dementia Assessment for elderly at the Grassroots Community

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Introduction
Dementia is currently affecting around one in 10 elderly in Hong Kong. The prevalence ranges more than 30% in those older than 85 years. The incidence of dementia is increasing, with more than half of them being undiagnosed especially in grassroots community.
A grassroots community-based dementia assessment & educational programme was implemented by Hong Kong Credible Care Volunteers Association HKCCVA (Nurse voluntary group) in 2017.

Objectives
1. To increase the awareness of dementia for elderly in grassroots community.
2. To empower elderly & career through community education.

Methodology
1. A grassroots community-based dementia assessment
   -Participants: 100 elderly with age?65
   -Venue: NGO elderly centre x 3 and public estates x 1
   -Date: Jan-Dec 2017
   -Assessment Instrument: Montreal Cognitive Assessment 5-Minute Protocol Hong Kong Version (HK-MoCa 5-Min Protocol)
   -Assessor: Registered Nurse with qualified training in cognitive assessment
2. Educational programme to elderly with moderate and server cognitive impairment
   -Face to Face education to elderly and career by nurse after the assessment.
   -Booklet

Result
Result & Outcome
A grassroots community-based dementia survey
Participants
No. of participants 100
Average age 78.7(65-92)
Female gender 88(88%)
Average years of education 3.6 (0 - 12)
Percentile Cutoff ≥16th (No cognitive impairment) 70 (70%) average age 77.2
Percentile Cutoff ≥16th (Mild cognitive impairment) 2 (2%) average age 87
Percentile Cutoff 16th - 7th (Mild to moderate cognitive impairment) 8 (8%) average age 77.6
Percentile Cutoff =7th (Moderate cognitive impairment) 2 (2%) average age 88
Percentile Cutoff 7th - 2nd (Moderate to severe cognitive impairment) 8 (8%) average age 81.2
Percentile Cutoff =2nd (Severe cognitive impairment) 2 (2%) age 85
Percentile Cutoff ≥2nd (Very severe cognitive impairment) 6 (6%) age 89
~ 30% elderly with mild to very severe cognitive impairment.
- More than 41.2% age > 85 elderly with moderate to very severe cognitive impairment.
Conclusion
Since very limited number of participant in this survey, regular dementia surveillance at grassroots community is suggested to identify undiagnosed dementia.
Education program is the important of dementia management where patients and career are empowered with appropriate knowledge and skills to live with the disease. Nurses voluntary groups can help provide health education in community. To facilitate health awareness, HKCCVA provides voluntary health promotion activities to service the grassroots community.