

**Submission Id: 4894**

**Title**

*Early detection of cognitive impairment among primary care settings: A program evaluation*

**Priority 1 (Research Category)**

Practice management and organization

**Presenters**

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**Abstract**

Context: Dementia is a growing health concern in the United States. The population of people living with dementia is expected to double in future years. Specialist dementia care, which is facing high demand, will be unable to meet the increased need for diagnosis and care. More interventions at the primary care level are needed to address this gap.

Objective: To evaluate the implementation of the Cognition in Primary Care (CPC) Program, which was designed to improve early detection of dementia in primary care settings.

Study Design and Analysis: A mixed methods design was used, and outcomes are presented as summary statistics, frequencies, and averages.

Setting or Data Set: The CPC Program was implemented across 14 primary care clinics in a large US healthcare system. Data were collected through evaluation surveys and electronic health records (EHR).

Population Studied: We studied patients aged  $\geq 65$  years, who attended one of the 14 intervention clinics, and who were seen by one of the primary care providers (PCPs) that participated in the CPC training.

Intervention/Instrument: The CPC Program includes PCP training, integration of workflow tools, and access to resources.

Outcome Measures: Measures included pre-post training evaluation, use of EHR tools, number of cognitive assessments, number of mild cognitive impairment (MCI) diagnoses coded, and number of referrals for brain health specialty care.

Results: Preliminary results from two pilot clinics showed that PCPs reported increases in categories, such as knowledge, confidence, and likelihood of assessing cognitive concerns among their patients, on the evaluation survey. Average scores for each category were above 4.5 on a scale of 1 (strongly disagree) to 5 (strongly agree). The average monthly number of cognitive assessments more than

doubled in the 6 months after the intervention compared to 6 months before the intervention. The monthly average of MCI diagnoses increased by roughly 40% during the 6 months after the intervention.

Conclusions: This project demonstrates the feasibility and success of implementing a real-world model to facilitate the early detection of dementia in primary care settings. PCPs responded favorably to the provider training, and evaluation of workflows showed increased use of tools and assessments. Future work will assess the CPC model among other health systems.