



The Canadian Alzheimer's Disease and Dementia Partnership

A collective vision for a national dementia
strategy for Canada



The CADDP will enable active collaboration from coast to coast to coast and bring tangible and measureable benefits to Canadians living with this fatal disease.

THE CANADIAN ALZHEIMER'S DISEASE AND DEMENTIA PARTNERSHIP (CADDP)

Dementia has a devastating impact on hundreds of thousands of Canadians; it also has immense social and economic impacts. Despite meaningful advances in our understanding of the disease, dementia continues to have vast implications for individuals, women, families, communities and the Canadian health-care system.

Given the significant challenges ahead, no single organization can tackle dementia alone. At a meeting in October 2014, Canada's federal, provincial and territorial Ministers of Health committed to a national dementia strategy. This strategy should be built on the collective vision, expertise and firsthand experience of dementia leaders, researchers, experts, practitioners, caregivers and those living with the disease from across the country.

To implement a national dementia strategy for Canada, the Alzheimer Society has proposed the creation of the Canadian Alzheimer's Disease and Dementia Partnership (CADDP). Developing a national pan-Canadian dementia strategy for Canada requires a supportive, collaborative partnership between governments and stakeholders across all jurisdictions. The CADDP will bring together governments, industry, health providers, national health stakeholders, NGOs, community groups, researchers, caregivers and persons with dementia to reduce the burden of dementia through improvements to research capacity and coordinated, system-level change. The CADDP will enable active collaboration from across the country and bring tangible and measureable benefits to Canadians living with this fatal disease. It is anticipated that the Canadian Consortium on Neurodegeneration in Aging (CCNA), a major pan-Canadian research initiative, will inform and support an evidence-based research stream as one of the three strategic objectives of CADDP.

The Alzheimer Society of Canada is looking to partner with the federal government on funding for the Partnership. We are requesting an investment of \$30 million in funding per year over five years, for a total of \$150 million.

MANDATE

1. **Lead:** Demonstrate sustainable progress by focusing on large-scale, evidence-informed, multi-jurisdictional actions
2. **Involve:** Provide opportunities for people impacted by dementia to be involved with the development and implementation of the national dementia strategy
3. **Catalyze:** Leverage existing resources and generate new investments to accelerate the adoption of innovative research, programs and services
4. **Knowledge exchange:** Synthesize and facilitate the exchange of new knowledge and information and precipitate new research questions
5. **Convene:** Bring together stakeholders to spark and sustain strategic and coordinated action

STRATEGIC OBJECTIVES

The mandate of the CADDP will be achieved through the following objectives:

1. RESEARCH:
 - Accelerate investment in all areas of dementia research, including bio-medical; clinical; social; health services and policy.
 - Develop evidence-based practice standards of care in chronic disease prevention and management.
2. PREVENTION:
 - Provide a surveillance system to inform health policy and service planning, foster evidence-based strategies for prevention and management and support research.
 - Promote broader public awareness of Alzheimer's disease and other dementias and combat stigma.
3. LIVING WELL WITH DEMENTIA:
 - Recognize and support the important role played by informal caregivers by providing access to financial benefits through the tax system.
 - Promote an emphasis on prevention, early detection and early intervention.
 - Ensure that persons with dementia and First Nations, Inuit and Metis are involved in all aspects of the Partnership.

1. RESEARCH

Priority: To accelerate investment in all areas of dementia research, including bio-medical; clinical; social; health services and policy.

Cost: \$40 million over five years.

Key Initiatives	Measurable Targets	The Benefit for Canadians
Work with research community, private and non-profit sectors (including the Alzheimer Society of Canada) to substantially increase research investments and support Canada's promise to fund research towards a cure by 2025, as articulated in the 2013 G8 Dementia Summit declarations.	Investment in dementia research funded by CIHR through the CCNA and SPOR etc. is doubled by 2019.	Co-ordinating dementia research investments nationally and internationally will maximize research efforts toward finding a cure and improving quality of life for persons with dementia.
Work with the Canadian Consortium on Neurodegeneration in Aging (CCNA) researchers to bring research and evidence into the development of standards of treatment and care (national standards).	National standards for treatment and care are implemented in all provinces by 2019.	All Canadians will have access to the same standard of care, regardless of where they live in Canada.

Priority: Develop evidence-based practice standards of care in chronic disease prevention and management.

Cost: \$10 million over five years.

Key Initiatives	Measurable Targets	The Benefit for Canadians
Convene an inter-governmental working group to develop best-care practice standards related to chronic disease prevention & management and identify improvements to access and timeliness of care for use in all provinces.	Standards for 'best practices' in dementia treatment and care will be published and shared with health professionals and community care providers by 2018 and implemented in all provinces by 2019.	All Canadians will have access to the same standard of care and support no matter where they live in Canada.

2. PREVENTION

Priority: Provide a surveillance system to inform health policy and service planning, foster evidence-based strategies for prevention and management and support research.

Cost: \$30 million over five years.

Key Initiatives	Measurable Targets	The Benefit for Canadians
Develop and adopt targets for dementia screening programs.	Meet a target of at least 75% uptake in screening for the identified 'at-risk' groups by 2019; increase to 90% by 2021. All provincial governments will include screening as a component of their provincial dementia strategy by 2019.	Early interventions will support the ability of Canadians to plan for their future, including providing for social, health and end-of-life care. Family physicians will be better able to screen and detect dementia earlier in the disease process.

Priority: To promote broader public awareness of Alzheimer’s disease and other dementias and combat stigma.

Cost: \$25 million over five years.

Key Initiatives	Measurable Targets	The Benefit for Canadians
<p>Support the ‘Dementia Friends’ initiative and build support for this program through partnerships with industry, business and community partners in partnership with the Alzheimer Society of Canada and PHAC.</p>	<p>Certify the federal government target of 1 million Dementia Friends by July 1, 2017.</p>	<p>Businesses and employers will have tools to educate their employees on the best practices for serving customers with dementia.</p> <p>Canadians will be better informed about the disease and about what they can do to support someone in their community or workplace that has dementia.</p> <p>Canadians with dementia will experience reduced stigma because of this increased awareness.</p>
<p>Develop a comprehensive public awareness campaign designed to raise awareness of the disease and the importance of an early diagnosis, in partnership with the Heart and Stroke Foundation, the Canadian Diabetes Association, YMCA Canada and the Alzheimer Society of Canada.</p>	<p>Launch a public platform that unites & leverages resources from the Partnership with regard to: awareness, early detection & stigma reduction by 2016.</p> <p>Issue a yearly report on public awareness efforts and evaluate the impacts of:</p> <ul style="list-style-type: none"> • Reducing stigma associated with disease: determine baseline and reduce by 50% in first 18 months. • Increased awareness of early diagnosis: 75% uptake in screening for the identified “at-risk” groups by 2019, increase to 90% by 2021. 	<p>Canadians will have a better understanding of ways to prevent and reduce the risk of dementia, heart disease and diabetes.</p> <p>Canadians will have a better understanding of the Alzheimer Society’s “Ten Warning Signs of Alzheimer’s Disease and Dementia” and the importance of an early diagnosis.</p> <p>Canadians will be better equipped to seek out an earlier diagnosis.</p> <p>Canadians will have better access to evidence-based information, tools and resources.</p>

3. LIVING WELL WITH DEMENTIA

Priority: To recognize and support the important role played by informal caregivers by providing access to financial benefits through the tax system.

Cost: \$20 million over five years.

Key Initiatives	Measurable Targets	The Benefit for Canadians
Work with federal and provincial governments and employers to improve caregiver leave benefits for employees.	Federal employee caregiver leave benefits are improved by 2016 by providing monthly benefits to low-income caregivers. Standard caregiver leave benefits are available in all provinces by 2017.	Caregivers who must leave paid employment or curtail self-employed work in order to provide care can access job protection provisions and income support.

Priority: To strengthen the dementia workforce and promote an emphasis on prevention, early detection and early intervention.

Cost: \$5 million over five years.

Key Initiatives	Measurable Targets	The Benefit for Canadians
Develop continuing medical education (CME) programs for physicians to ensure use of best practices in dementia prevention, diagnosis, treatment & care. Make dementia training (e.g. U-FIRST) part of requirements for Personal Support Worker (PSW certification)	Dementia-specific training will be included in all CME programs by 2020. U-FIRST or dementia training completed by 50% of PSW's by 2018 and 90% by 2020	Physicians and professional care providers will be able to detect symptoms at an early stage and to make an earlier diagnosis. Personal Support Workers will be better prepared to support persons with dementia and have better skills to promote a person-centred approach to their care
Develop curriculum (for training colleges, universities, medical accreditation organizations and health professional groups) on dementia prevention, diagnosis, treatment & care for physicians and allied health professionals.	Health care professional licensing body requirements will include standards for dementia diagnosis, treatment & care by 2020. Evidence-based specialized curriculum on dementia is available in all health care professional programs by 2020.	Students will have access to better training opportunities in a multidisciplinary workforce that includes health professionals and care providers across the continuum of care. Canadians will experience person-centered dementia care that is respectful and responsive to their needs.

Key Initiatives	Measurable Targets	The Benefit for Canadians
Support the implementation of a standardized First Link ® in all provinces and ensure that the program has appropriate and equitable financial support across jurisdictions.	First Link ® will be funded and available in all provinces by 2017. 80% of family physicians will have the requisite knowledge to connect their newly diagnosed patients with existing community support systems, including the Alzheimer Society, by 2018.	Early detection will enable Canadians to access care, treatment & services earlier in the disease process, find the necessary supports to remain in their homes longer with less dependency on the long-term/acute care systems and to plan for their future.
Develop a go-to hub for evidence-based best and next practice information, tools and virtual collaboration for practitioners, clinicians, allied health professionals, caregivers & personal support workers.	CADDP will launch an electronic inventory by 2017.	Health professionals will have access to resources, dementia-specific education materials and training opportunities.

Priority: Ensure that persons with dementia as well as First Nations, Inuit and Metis are involved in all aspects of the Partnership.

Cost: \$20 million over five years.

Key Initiatives	Measurable Targets	The Benefit for Canadians
Work with people with dementia and their caregivers to ensure that they are included, engaged and inform all aspects of the Partnership's work.	All CADDP advisory mechanisms will include the patient/public voice to inform the Partnership's work in implementing the national dementia strategy.	The voice of persons with dementia and their families is embedded and reflected throughout the Partnership.
Work with First Nations and Inuit Health at Health Canada to establish liaison with First Nations, Inuit and Métis communities to develop programs that will better support the needs of indigenous communities.	A First Nations, Inuit and Métis dementia control action plan is developed by 2020, in collaboration with First Nations, Inuit and Métis stakeholders.	First Nations, Inuit and Métis will have access to early diagnosis tools and caregiver support programs that respect cultural sensitivities.

