

Multidimensional Care Needs Are Associated With Distinct Utilization Patterns in Home-Based Dementia Care

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In a large real-world sample of adults receiving home-based dementia care, a lay-friendly cognitive, physical, and emotional/behavioral needs framework differentiated distinct care utilization patterns. Sustained care engagement was more strongly associated with cognitive and emotional/behavioral complexity than with physical needs alone, supporting the use of non-diagnostic tools for anticipatory care planning and workforce alignment.

INTRODUCTION	METHODS	RESULTS	CONCLUSIONS	REFERENCES
- Home-based dementia care is often coordinated by non-clinically licensed care managers who help identify needs, guide care plans, match caregivers, and support families. - Existing dementia frameworks often rely on diagnoses or formal assessments that may not be available or practical in real-world home care. This study examined whether a lay-friendly cognitive, physical, and emotional/behavioral needs framework could differentiate care utilization patterns.	- Retrospective analysis of 6,779 adults receiving home-based care across the United States and Canada from Jun to December 2025. - Care managers used a structured, non-diagnostic framework to profile observable care needs across three domains: cognitive, physical, and emotional/behavioral. - Utilization was examined by weekly care hours and length of engagement to assess associations between need profiles and care patterns.	- Four utilization archetypes emerged: short-duration/low-intensity, short-duration/high-intensity, long-duration/low-intensity, and long-duration/high-intensity care. - Longer-duration cases, especially high-intensity cases, were more likely to show elevated needs across multiple domains. - Higher cognitive needs were present in approximately 55–65% of longer-duration cases versus 30–40% of shorter-duration cases. - Emotional/behavioral needs were present in approximately 50–60% of longer-duration cases versus 25–35% of shorter-duration cases. Short-duration, high-intensity care was more commonly associated with isolated physical needs.	- Sustained home-based dementia care was more strongly associated with cognitive and emotional/behavioral complexity than with physical needs alone. - A lay-friendly, multidimensional framework used by non-clinically trained care managers meaningfully differentiated utilization patterns. - Accessible, non-diagnostic tools may support anticipatory care planning, caregiver matching, workforce alignment, and continuity of support.	Huang, H. L., Shyu, Y. I. L., Chen, M. C., Huang, C. C., Kuo, H. C., Chen, S. T., & Hsu, W. C. (2015). Family caregivers' role implementation at different stages of dementia. <i>Clinical interventions in aging</i>, 135-146. Reuben, D. B., Kremen, S., & Maust, D. T. (2024). Dementia prevention and treatment: a narrative review. <i>JAMA Internal Medicine</i>, 184(5), 563-572. CONTACT shadi@thekey.com www.thekey.com  ALZHEIMER'S ASSOCIATION AAIC>26