The Alzheimer's Disease Supportive Services Program (ADSSP) was established under Section 398 of the Public Health Service Act (P.L. 78-410; 42 U.S.C. 280c-3). It was amended by the Home Health Care and Alzheimer's Disease Amendments of 1990 (PL 101-557) and by the Health Professions Education Partnerships Act of 1998 (PL 105-392). The ADSSP is administered by the Administration on Aging within the U.S. Department of Health and Human Services. The ADSSP program helps states extend supports and services to persons with dementia and their family caregivers, with a focus on underserved populations.

The PHS Act requires AoA to "provide for an evaluation of each demonstration project for which a grant is made." The PHS Act further states that "not later than 6 months after the completion of such evaluations, submit a report to the Congress describing the findings made as a result of the evaluations." In compliance with the PHS Act, AoA developed a new State data collection protocol that will require future ADSSP state grantees (those funded starting in FY 2011) to transmit semi-annual data information to AoA. The Alzheimer's Disease Supportive Services Program (ADSSP) was established under Section 398 of the Public Health Service Act (P.L. 78-410; 42 U.S.C. 280c-3). It was amended by the Home Health Care and Alzheimer's Disease Amendments of 1990 (PL 101-557) and by the Health Professions Education Partnerships Act of 1998 (PL 105-392). The ADSSP is administered by the Administration on Aging within the U.S. Department of Health and Human Services. The ADSSP program helps states extend supports and services to persons with dementia and their family caregivers, with a focus on underserved populations.

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In December 2009, AoA initiated a review of the current ADSSP-Data Reporting Tool (ADSSP-DRT) to ensure the acceptability of these items for evaluating the program and minimizing burden for respondents.

First, a review of the currently approved ADSSP-DRT and supporting documents was solicited from a group of experts in the fields of Alzheimer's disease and long-term care who were familiar with the history and goals of the ADSSP. Several suggestions for the improvement of the existing ADSSP-DRT were provided, reviewed by AoA, and incorporated into the tool and supporting documents.

Feedback on the current and revised tool and supporting documents was then solicited, by e-mail, from all current ADSSP grant project directors (N = 47); two e-mails soliciting feedback were sent over the course of three (3) weeks. Seven (7) grantees responded in written form and/or by telephone. AoA then reviewed this input and, again, modifications were made to fine tune the tool and supporting documents.

The result of this input is the revised ADSSP-DRT and supporting documents. As with the current ADSSP-DRT, AoA will work with ADSSP grantees to ensure easy access to a reporting system and offer regular training in using the tool to ensure minimal burden

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