Defining Quality Care: Dementia Care Practice Recommendations

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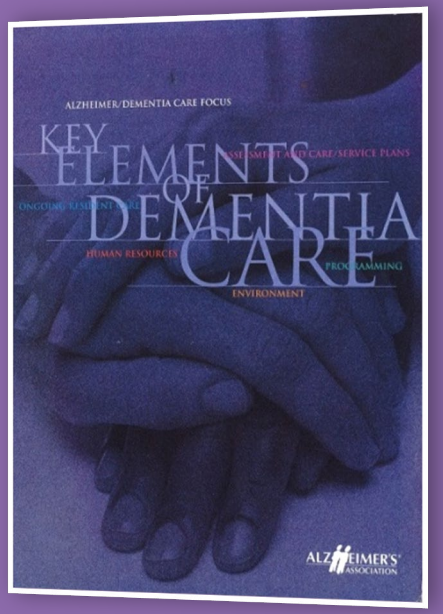
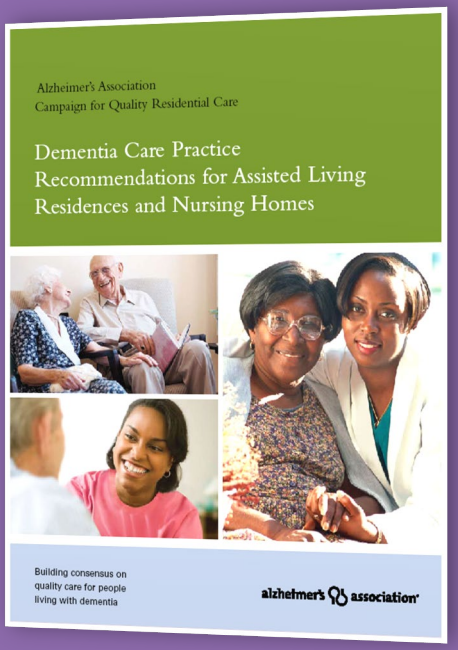
Quality Care:
History

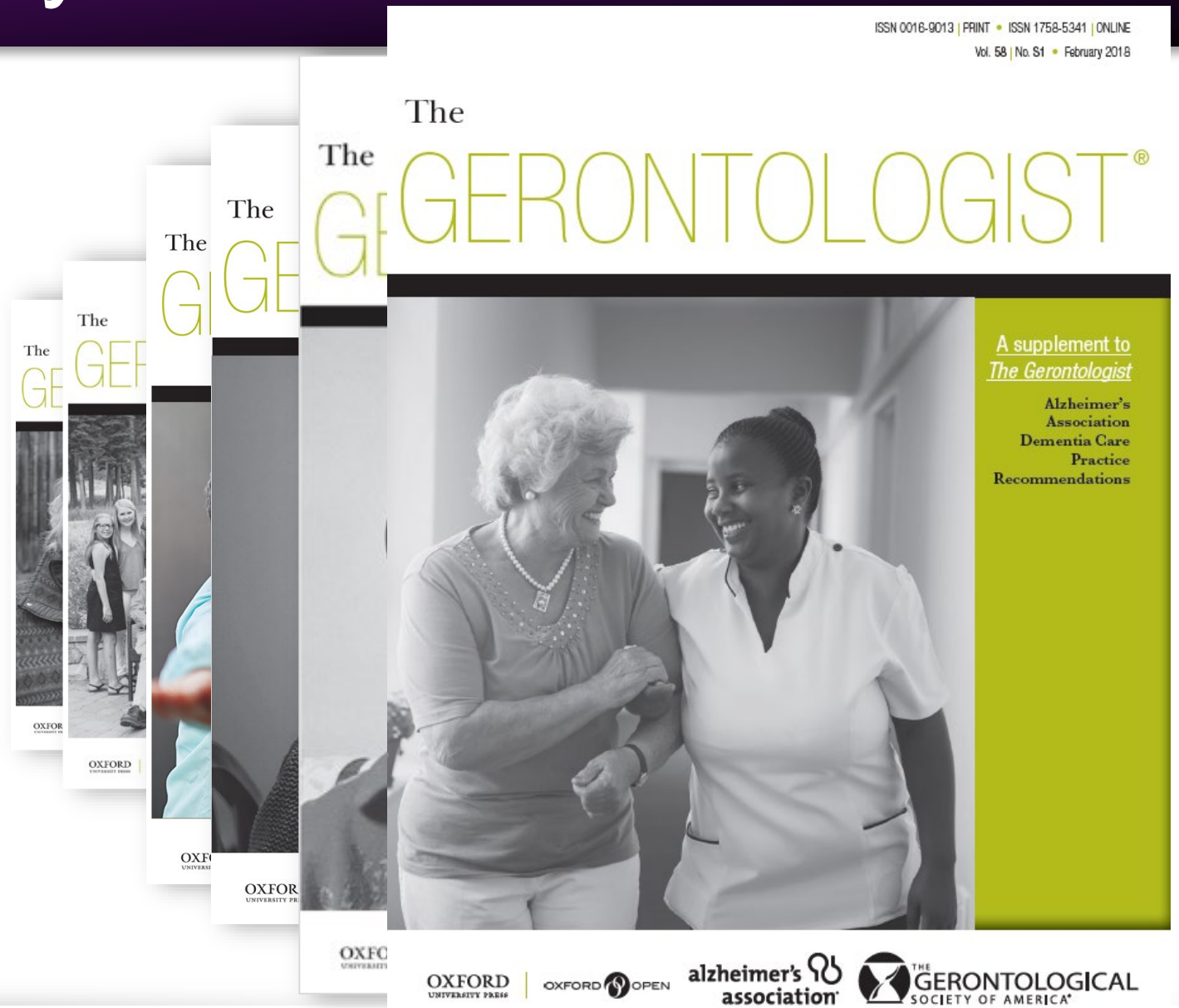
- Guidelines for Dignity
- Key Elements of Dementia Care
- Dementia Care Practice Recommendations





Quality Care: Today

- Evidence-based practices
- 56 recommendations by 27 expert authors
- Applicable to various care settings and throughout the disease continuum
- Published as a supplement to Feb 2018 issue of The Gerontologist
- Foundation for quality person-centered care



Dementia Care Practice Recommendations

PERSON CENTERED FOCUS

Recommendations

- Know the person
- Person's reality
- Meaningful engagement
- Authentic, caring relationship
- Supportive community
- Evaluation of care practices

Effects of Person-Centered Care

Individuals	Li and Porock (2014)	24 studies—15 culture change and 9 person-centered practices	Beneficial effects on psychological wellbeing. Significant effects on decreasing behavioral symptoms and psychotropic medication use
Staff	Barbosa, Sousa, Nolan, & Figueiredo (2015)	7 studies—PCC approaches, including DCM; stimulation-oriented approaches, emotion-oriented approaches; and behavioral-oriented approaches.	Reduction in stress, burnout and job dissatisfaction
Individuals and staff	Brownie and Nancarrow (2013)	9 articles—multi-component person-centered interventions	Positive influences on staff satisfaction and capacity to provide care; lower rates of boredom and feelings of helplessness and reduced levels of agitation in residents

PERSON CENTERED FOCUS

Recommendations in Action

Know the person living with dementia

- Gather knowledge of the person (past and present) in assessment
- Include the individual, family and friends
- Include knowledge of the person in care plan and re-assessment
- Share knowledge of person with all staff

PERSON CENTERED FOCUS

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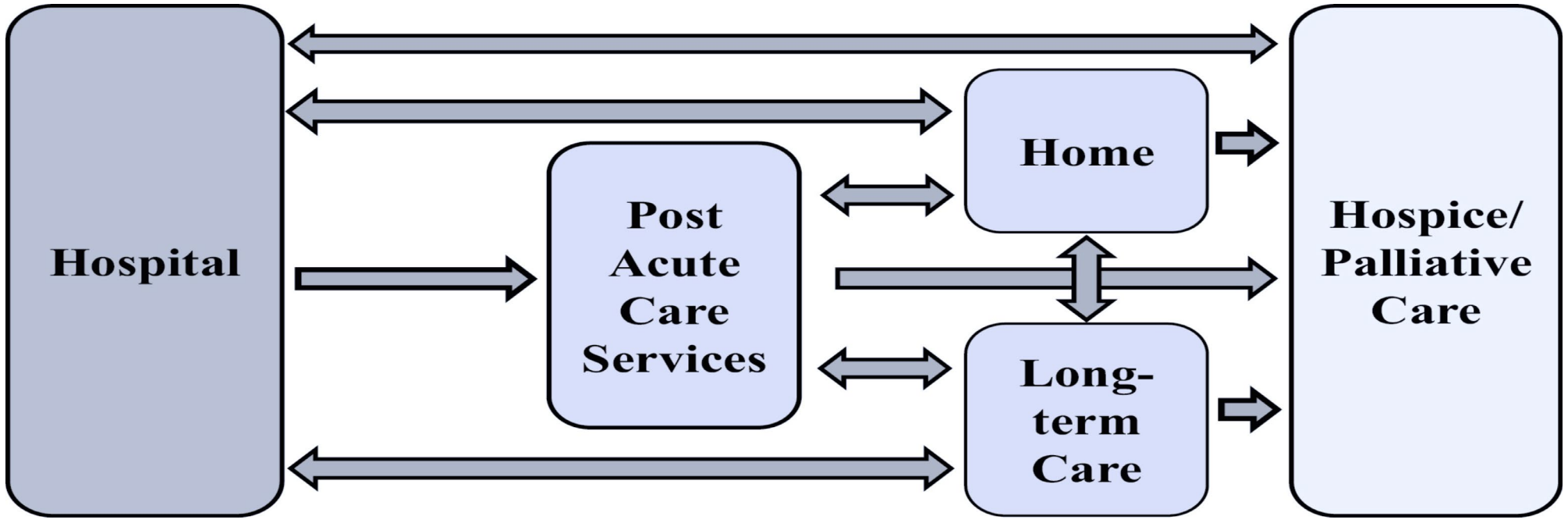
TRANSITION AND COORDINATION OF SERVICES

Recommendations

- Education about common transitions in care
- Timely communication of information between, across and within settings
- Preferences and goals of the person living with dementia
- Strong inter-professional collaborative team to assist with transitions
- Evidence-based models

Common Transitions



Psychosocial/Psychoeducational Interventions

Author	Setting	Intervention	Description	Outcomes
Mittelman et al. (2006)	Home	New York University (NYU) Model	Enhanced counseling and support intervention versus usual care	Time to was over 1.5 years longer than usual care group
Brodaty et al. (1997)	Psych hospital	Dementia Caregiver Training (DCT) Program	10 day intensive psycho-educational program for caregivers.	Time to placement was statistically significantly delayed
Hanson et al. (2017	Nursing home	Goals of Care (GOC) Intervention	OC video with structured care planning discussion versus informational video and standard care planning	Residents had half as many hospitalizations; Family members rated their overall quality of communication with staff higher at three months, and the quality of end-of-life care communication with staff higher at 9 months

Care Coordination Interventions

Author	Setting	Intervention	Description	Outcomes
Naylor et al. (2014)	Hospital to home	Transitional Care Model (TCM)	Augmented Standard Care versus Resource Nurse Care versus TCM	Time to first rehospitalization was longest for those in the TCM, and rehospitalization or death was accelerated for both other groups
Samus et al. (2014)	Home	MIND at Home	Dementia care coordination versus usual care	Significant delay in time to transition from home and remained in home 51 days longer
Bass et al. (2014)	Home	Partners in Dementia Care (PDC)	Care coordination program versus usual care	Fewer hospitalizations and fewer emergency department visits
Bellantonio et al. (2008)	Assisted living	Geriatrics Team Intervention (GTI)	Four systematic inter professional geriatric team assessments	Reductions in the risk of unanticipated transitions, including hospitalizations, ED visits and nursing home placement, as well as death

Recommendations in Action

Education and preparation about common transitions in care

- During orientation, have discussions about types of and criteria for transitions

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Questions?

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