Success factors for co-ordinated care for people with dementia

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Introduction

Evidence from the World Health Organisation suggests that without co-ordination of care, people with dementia and carers often experience poorer outcomes and inappropriate admission to hospital or care institutions[1]. Care co-ordination as a concept is poorly defined. Our work aimed to gain a better understanding of what effective care co-ordination for people living with dementia is and identify what the critical success factors are.

Midlothian health and social care partnership (HSCP) has a dedicated, co-located, multi-disciplinary and multi-agency dementia team, supporting people with dementia from diagnosis to end of life. Midlothian was identified as an exemplar site for dementia support by an independent evaluation[2].

Method

We considered the following evidence in our analysis.

- A review of the previous literature on care co-ordination.
- A case study evaluation to understand success factors of care co-ordination for people with dementia in Midlothian HSCP in Scotland. This included:
  - analysis of healthcare resource use and associated costs, and
  - a qualitative inquiry (focus groups and interviews with staff, and analysis of user feedback).
- The development of a care co-ordination self-assessment for services and organisations.

Results

Our literature review and case study identified a number of factors which contribute to effective care co-ordination:

- strong evidence of **positive leadership** behaviours
- effective use of **quality improvement methodology**
- high levels of **dementia knowledge and skills** by staff
- robust **communication mechanisms**
- effective **multi-agency working,** and
- a **partnership approach** between people with dementia, carers and the team.

Analysis of healthcare costs in Midlothian HSCP demonstrated the impact of this model.

- The overall **resource costs for people with dementia in Midlothian are significantly lower** than in adjacent HSCPs (£7,498 compared to £8,747 per annum).
- The **acute bed day rate for people with dementia following unplanned admission was significantly lower** in Midlothian compared to adjacent HSCPs (8.7 per person compared to 12.2 person).
- **People with dementia in Midlothian are significantly less likely to die in hospital** compared to those in adjacent HSCPs (36.1% compared to 49.8%).
- A **higher proportion of people with dementia are diagnosed and identified in Midlothian**, compared to adjacent HSCPs (84% compared to 75%).

From our work, we identified twelve critical success factors for high quality care co-ordination for people with dementia. Our twelve factors are introduced in our film (figure 1) and are also shown in our diagram below (figure 2).

Figure 1: Our film introduces the twelve critical success factors for high quality care co-ordination for people with dementia. Click on the image to view the film.

Conclusion

There is growing evidence that effective, integrated care co-ordination can lead to more positive outcomes for people with dementia and their families. Evidence also suggests it can reduce overall health and social care costs.

Our findings are important as a basis for service planning and improvement. This work is especially relevant for this care group for whom prevalence is projected to increase significantly over the next 20 years.

A self assessment of the twelve critical success factors has been developed for organisations and services and is now being used to inform improvement work.

For more information, read our full report on care co-ordination in the community for people with dementia in Midlothian. More information on care co-ordination for people in dementia can be found on our Focus on Dementia webpages.

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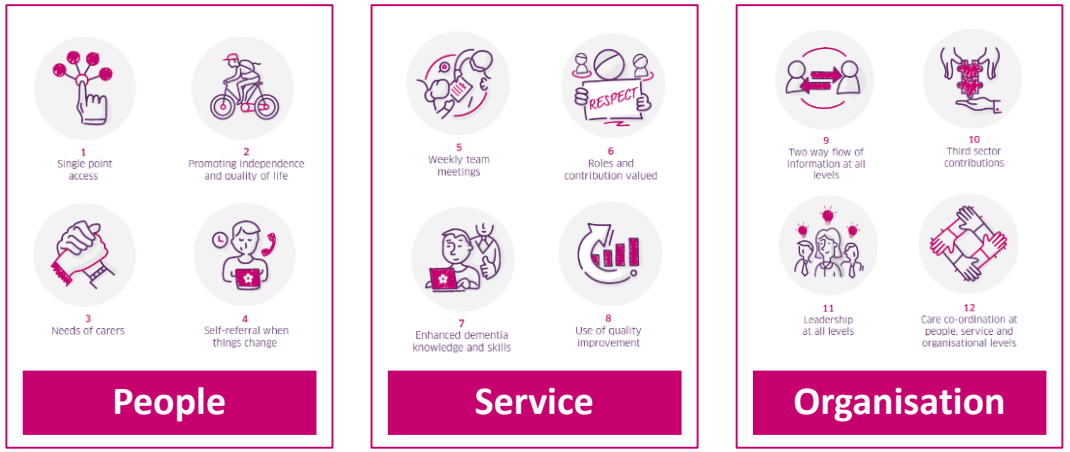

Figure 2: Our twelve critical success factors for dementia care co-ordination.

References

1. World Health Organisation. Continuity and coordination of care: a practice brief to support implementation of the WHO Framework on integrated people-centred health services. 2018 [cited 2020 Sep 01]; Available from: https://apps.who.int/iris/bitstream/handle/10665/274628/9789241514033-eng.pdf?ua=1.
2. Blake Stevenson Ltd. Evaluation of the effectiveness of the 8 Pillars model of home-based support: Final report. 2016 [cited 2020 Sep 01]; Available from: https://ihub.scot/media/6283/evaluation-effectiveness-8-pillars.pdf.