Home Based Memory Rehabilitation in Dementia – an Occupational Therapy Improvement Journey

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#OTHBMR
#AHPConnectingpeople
Seminar aims

• Brief overview of Home Based Memory Rehabilitation
• NHS Dumfries & Galloway pilot outcomes
• Improvement Journey in Partnership
• Progress to date including challenges and facilitators encountered
• Next steps
Design

• Evidence-based early intervention in dementia\(^3\)
• Developed & pilot-RCT completed by Mary McGrath, specialist occupational therapist\(^1\)
• 2013/15 Tested & HBMR resource pack created in Dumfries and Galloway, Scotland
Home-Based Memory Rehab

- Based on *cognitive rehabilitation* theory and techniques
- Key is to *compensate* for memory difficulties via:
  - Environmental Adaptation
  - Use of external memory aids
  - Use of internal memory strategies
- Delivered over 4 and up to 6 sessions
- *Structured* and *repetitive* to encourage new learned behaviours in early stages of dementia
- Embeds coping strategies as **habits** and **routines**
  - More likely to be remembered and can be relied on as/when memory difficulties progress
Home-Based Memory Rehab

1. Your priorities
2. What people have told you
3. Something you have to do
4. Coping in social situations
5. Keeping your brain healthy
6. Your bearings
Pilot outcomes

- Evidence of strategies to compensate for memory difficulties being used two years following completion of HBMR
Pilot Outcomes

• Gathering Data - Qualitative
  – Emotional Touchpoints
    • carried out with both plwd and caregiver

“I find the strategies helpful ...I am looking for something to help with the blank bits – I found these strategies helped” (plwd)

“I think it’s comforting that someone was coming in with advice, it was good to have someone that I could contact if I needed any help or had any questions.” (care giver)
Understand

[Image: Connecting People, Connecting Support]

[Diagram: The AHP approach - five key elements]

Promoting national implementation

2012
- COT Factsheet about McGrath and Passmore’s pilot study

2013
- National Scoping Project
- Developing resources
- NHS DG initial pilot and adaptation to local context

2014
- 1st National Workshop
- 2nd National Workshop
- Pilot evaluation wins Scottish national Dementia Award

2015
- NHS DG approached to share HBMR
- QMU-Alzheimer Scotland partnership

2016
- HBMR Features in Connecting People
- Connecting Support as part of Scotland’s National Dementia Strategy

2017
Promoting national implementation

Conversations, communication and leadership

- Scotland wide monthly teleconferences allowing space and voice to discuss local needs at national level

Enablers for change:

- Awareness of and response to national policy
- Increasing the role of OT in early intervention and post diagnostic support
- Linking with AHP directors for each board with lead clinicians from each area
- Local project charter (based on national exemplar and drivers) and Stakeholder analysis
Enablers for change:

• Bottom up – therapists choosing to participate
• Knowledge and skills
  – Visits and demonstrations from expert clinician
  – Webex video
  – Promoting Excellence Framework⁴ (NES) – enhanced level
  – Annual national workshops
• Access to NHS D&G team for advice and experience
• Access to online ‘always open’ peer support
• Access to academic advice
Status of HBMR provision by Scottish regions

% population >30 in areas offering HBMR

6

94

 HBMR offered
HBMR not currently offered

In discussion
Understanding & exploring challenges

• Local variation and challenges
  – Referral pathways
  – Capacity
  – Evaluation practices
  – IT variation
  – Branding, ownership
  – Direct resource costs
  – Time pressures in clinical practice
Evaluation - Prerequisites

• Logic model – Informs relevant evaluation plan
• Psychometrically sound for an early-mod dementia population
• Tools - free to use
• Useable as outcome measure
• Clinically useful and operable (not burdensome)
• Score-able in several ways (clinician, PLWD, proxy)
Cognitive rehab

Compensatory

Preserved implicit memory = ability to learn new & retain skills

Skill learning focused on meaningful occupations

Skill acquisition, retention

Cognitive function, performance

Occupational performance

Quality of life

Cognitive stimulation

Restorative

Neuroplasticity = improvement in specific cognitive functions

Effects on cognitive function generalise to occupational performance
Quality of therapeutic interaction

Enhances /inhibits HBMR process

Implementation fidelity

Mode, frequency, interval

Reach

Proportion of appropriate PLWD completing

Practical applicability of HBMR

Feasibility

Estimation of PDS

Identification of subgroups
Still learning

- IT infrastructure – across Scotland
- Quoted administration times inaccurate
- Reframe ideas about ‘difficult questions’
- Streamline to minimum valuable battery
- Translating QOL to HUI scores
- Appropriate review points
- Integrating/contributing to international standards sets - ICHOM
Embed and Sustain

- Continuing dialogue – update resources, test evaluation battery: *engagement*
- Linking and fit within health systems – timely access
- Improvement cycles & local evaluation data
- Expanding the evidence base (focus on wider outcomes)
- Royal College of Occupational Therapy report (2017)
- International linked work – **ICHOM**
- Undergraduate education
Improvement in Practice
#AHPConnectingPeople
our 6 tops tips:

1. Seek to understand

2. Power of relationships

3. Start small,
   then make it smaller,
   then make it smaller again!

“The biggest communication problem is we do not listen to understand. We listen to reply”
Covey
Improvement in Practice
#AHPConnectingPeople

our 6 tops tips:

4. The importance of measurement

5. Prepare to fail

6. Patience!

“Without data, you are just another person with an opinion”  Deming
1. Enhanced Access: Aware of what we do

BLOG: www.alzscot.org/talking_dementia

#AHPDementia #AHPconnectingPeople #OTHBMR

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AILIP Community of Practice (Dementia workstreams) hosted on NHS Knowledge Network:
“Connecting People, Connecting Support”

Transforming the allied health professionals’ contribution to supporting people living with dementia in Scotland 2017-2020
References


8. Living, not Existing: putting prevention at the heart of care for older people in Scotland (2017) Royal College of Occupational Therapy
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