Identifying best practices in care trajectories of communitydwelling persons with dementia. A comparison of care trajectories, quality indicators and costs extracted from routine care registrations and health insurance data

https://neurodegenerationresearch.eu/survey/identifying-best-practices-in-care-trajectories-of-communitydwelling-persons-with-dementia-a-comparison-of-care-trajectories-quality-indicators-and-costs-extracted-from-routine-care-registrations-an/

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Country

Netherlands

Title of project or programme

Identifying best practices in care trajectories of communitydwelling persons with dementia. A comparison of care trajectories, quality indicators and costs extracted from routine care registrations and health insurance data

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ZonMw

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01/12/2014

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3.0

The project/programme is most relevant to:

Alzheimer's disease & other dementias

Keywords
Research Abstract

AIM: To identify and characterize best practices in care trajectories of community-dwelling persons with dementia and their family carers from the first symptoms of dementia until admission in a long term care facility or death, by linking, extracting and processing relevant data from routine care registrations of GPs, local dementia care networks and health care insurers.

To reach this aim, the following objectives will be addressed:
1. Describe the (variation in) care trajectories of persons with dementia from first symptoms to admission in a long term care facility or death, in terms of quality indicators (QIs) from the Dutch National Dementia Care Standard and health care costs per region.
2. Define best (and worst), practices in care trajectories based on the QI scores, costs and cost-QI ratio of the dementia care networks.
3. Develop feedback report formats to provide local dementia care networks and other stakeholders (health care insurers, GPs, policy makers) with information about the quality and costs of care for persons with dementia in specific regions.
4. Produce a roadmap with tips & tricks for linking and extracting routinely collected data of GPs, local dementia care networks and health care insurers for future usage by the workgroup preparing the National Dementia Register in the context of the Deltaplan for Dementia).

METHOD: Both quantitative as well as qualitative methods are used to address the research questions. Care trajectories of persons with a dementia diagnosis are described by connecting and evaluating routinely collected quantitative data from GPs, local dementia care networks and health insurers. Quality Indicators (QIs) and costs of care are compared across ten dementia care networks. Best practices are defined by ranking the local dementia care networks from poor to superior, based on their QI scores per domain, the QI summary score expressing the overall level of quality of care, and the Cost-QI ratio. Qualitative methods involve a Delphi procedure with an expert panel to specify the QIs from the Dementia Care Standard at the start of the project. At the end of the project, focus group discussions with stakeholders are organized to validate and interpret best practices, develop feedback report formats for benchmarking and to promote the adoption of the methodology to identify best practices.

Lay Summary
Further information available at:

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Alzheimer's disease & other dementias

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