Implementing effective occupational therapy in dementia;
the needs and strategies for occupational therapists.

MCE Thijssen, J Zajec, CME Döpp, MJL Graff
HAN University of Applied Science Nijmegen
Radboud University Nijmegen Medical Center
Nijmegen Center for Evidence Based Practice
IQ Scientific Institute for Quality of Healthcare Nijmegen
Content presentation

- Motive and summary about implementation and strategies
- The needs of occupational therapists
- Supporting strategies towards the occupational therapists
- Conclusion
• Effectiveness and cost-effectiveness of community occupational therapy in dementia (COTiD) is found (1,2)
• OT interventions are described in a guideline for community occupational therapy (COTiD) in dementia.
• Several barriers were found for implementing this effective occupational therapy interventions.(3)
The needs of occupational therapists.

Examples:

• “I lose overview of the possible OT interventions of COTiD.”

• “I don’t have enough skills and routine in applying these OT interventions in dementia”

• “I don’t receive referrals from medical practitioners for elderly with dementia and their caregivers”
Aim presentation

Intention:

1. To give an overview of the supporting strategies for the occupational therapists using the COTiD guideline.

2. To explain the contents of the supporting strategies for the occupational therapists.
Supporting strategies towards occupational therapists

A. Implementation training, followed by seminars in region.
A two day course in which the methodology and content of implementation is explained.

B. Web based systeem and forum:
A digital system with the structure of the COTiD guideline explained. A part of the system is set aside for an open discussion on the forum.

C. Coaching on the job
Peer supervision in which peers provide critical and supportive feedback on a mutual basis to improve professional skills of the occupational therapists.
A: Implementation training, followed by seminars in region.

Examples of content:

- Mutually consultation.
- Simulated training in COTiD
- Using web based system.

Emphasis on using and applying COTiD with the elderly and caregivers
A: Implementation training, followed by seminars in region.

**Seminars in region:**

- **Part 1:** Interdisciplinary meeting for mutual benefit.
- **Part 2:** Intervision about network and collaboration in the region.

Emphasis on network and collaboration with other (medical) practitioners.
B: Web based systeem and forum

Content of the web based system.

• Structure of the COTiD guideline.
• Appendix with explanations about COTiD
• Questions to stimulate reflection on action.
• Possibility to deliver a report on the COTiD interventions
Stappen van de richtlijn voor: 1_11_1

1. Diagnostiek
   - dinsdag 29 september 2009 10:10  Compleet

2. Opstellen van doelen
   - vrijdag 2 oktober 2009 14:21  Compleet

3. Behandeling en evaluatie
   - vrijdag 2 oktober 2009 14:23  Openstaand
Stappen van de richtlijn » Diagnostiek » Probleemdefinitie

Probleemdefinitie

1. De probleemdefinitie vormt het uitgangspunt en luidt als volgt
   (*Onderstaande gegevens worden gekopieerd naar de behandellrapportage)

De geformuleerde probleemdefinitie omvat een interpretatie met betrekking tot:

2. Motivatie
   - Ja
   - Nee

3. Prioriteiten
   - Ja
   - Nee

Eventuele toelichting:
Examples of the forum.

“How can I explain the benefits of COTiD to elderly with dementia?”

“What to do? a caregiver is worried about safety but the elder person with dementia doesn’t recognize the problem”

“Can we exchange presentations about COTiD for medical practioners?”
B: Web based systeem and forum
C: Coaching on the Job

Content of the coaching on the job.

• Motivational interviewing about implementation
• Case analyses
• Critical and supportive feedback.
• Progression of collaboration and referrals

First aid at uncertainty
C: Coaching on the job

Examples of the coaching on the job.

“I don’t have enough time to implement COTID”

“I am not sure about the interventions towards the caregiver.”

“Did I do enough?”
Conclusion

• An overview of the supporting strategies for the occupational therapists using the COTiD guideline is given.
  
  – Implementation training, followed by seminars in region
  – Web based system and forum
  – Coaching on the job
Thank you for your attention!

For more information about the strategies towards occupational therapists.

Please contact: marjolein.thijssen@han.nl
• Supporting strategies towards occupational therapists are combined with other strategies, for example:
  – Strategies towards medical practitioners (examples: information about COTiD through website and newsletter)

• During a cluster randomised trial, an experimental group of occupational therapists will receive supporting strategies to implement the occupational therapy guideline for dementia;
  – Implementation and evaluation of a Community Occupational Therapy program for clients with dementia and their primary caregivers: a cluster randomized controlled trial
Clusters assessed for eligibility (n = 45 clusters (institutes) randomised

Excluded (n =)

Not meeting inclusion criteria (n = institutes)
Refused to participate (n = institutes)

Allocation

Allocated to combined strategy (n = 15 institutes and ≥ 120 patients)
Received combined strategy (n = .. institutes and n= .. patients treated by OT)
Did not receive combined strategy (n = institutes)

Follow-up at 6 months (n = institutes and n= patients)
Lost before follow-up (n =)

Follow-up at 12 months (n = institutes and n= patients)
Lost before follow-up (n = institutes and n= patients)

Analyzed in ITT analyses (n = institutes n= patients)
Excluded from analyses (n = ) without baseline

Allocated to usual educational strategy (n = 30 institutes and ≥ 60 patients)
Received usual strategy (n = .. institutes and n= .. patients treated by OT)
Did not receive usual strategy (n = institutes)

Follow-up at 6 months (n = institutes and n= patients)
Lost before follow-up (n =)

Follow-up at 12 months (n = .. institutes and n= .. patients)
Lost before follow-up (n = institutes and n= patients)

Analyzed in ITT analyses (n = institutes, n= patients)
Excluded from analyses (n = ) without baseline

Döpp CME & Graff MJL (2009). RESEARCH PROTOCOL: Implementation and evaluation of a Community Occupational Therapy program for clients with dementia and their primary caregivers: a cluster randomized controlled trial
For more information about the Implementation and evaluation of a Community Occupational Therapy program for clients with dementia and their primary caregivers: a cluster randomized controlled trial:

please contact: c.dopp@iq.umcn.nl.

For more information about the strategies towards occupational therapists and combination:

Please contact: marjolein.thijssen@han.nl
References.


3: Facilitating and impeding factors for implementing an effective occupational therapy guideline for older persons with dementia and their informal caregivers. Leven van 't, N, Graff MJL et al. in press.

4: Döpp CME & Graff MJL (2009). RESEARCH PROTOCOL: Implementation and evaluation of a Community Occupational Therapy program for clients with dementia and their primary caregivers: a cluster randomized controlled trial