

Program Evaluation of Multidisciplinary Dementia Group

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BACKGROUND

- Aging Well is a multidisciplinary dementia group developed in 2014 by the Erkkila Endowment.
- Group sessions were led by behavioral health consultants, neuropsychologists, and speech, physical, and occupational therapists.
- The four-course format is provided to dementia-caregiver dyads, focusing on coping skills for memory loss, safety, lifestyle changes, and changes to behavior and personality.
- The group was developed to address two needs:
 1. The considerable burden on caregivers of patients with dementia (PWD) (Cheng, Au, Thompson, & Gallagher-Thompson, 2019).
 2. The strain on healthcare systems by patients with dementia (PWD; LaMantia, Stump, Messina, Miller, & Callahan, 2016).

OBJECTIVE

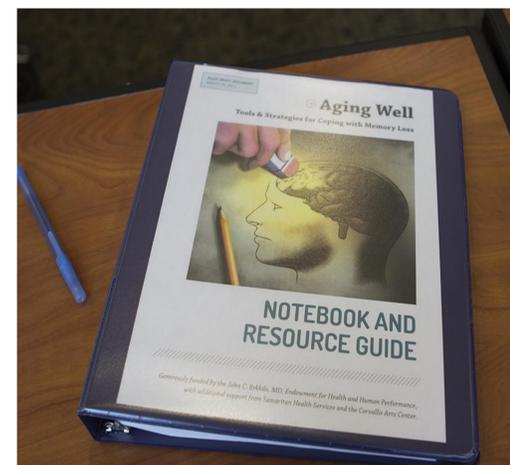
Conduct a program evaluation of the Aging Well multidisciplinary dementia group and provide feedback to stakeholders for improved future delivery.

METHODS

- Caregivers of PWD who participated in Aging Well or were on the waitlist were surveyed to explore the following since group participation or waitlist entry:
 - Caregivers' perceptions of the group
 - Changes in the patient's behavior or mood
 - Attitude toward Samaritan Health Services
 - Caregiver stress severity
- Electronic medical record data was mined to compare:
 - Emergency Department/Urgent care visits
 - Visits with their primary care provider

RESULTS

- Response rate = 6/8 (75%) for the waitlist and 8/14 (57%) for group participants.
- Fourteen caregivers of PWD responded (5 female, mean age 79 years [SD=8.5], 100% white, non-Hispanic/Latino).
- PWD group participants were not more likely to --
 - Utilize urgent health care (ED/UC [OR = 2.0, (95% CI = 0.2, 17.9), p=0.55])
 - Have office visits [$t(12) = -0.02, p=0.99$]
 - Have problematic behaviors (based on qualitative analysis)
 - Have more stressed caregivers ($t(11) = 0.09, p=0.93$)
- Group participants experienced more positive perceptions of their relationship with the PWD and Samaritan.
- All group participants would recommend the group, and many appreciated the concrete tools and social support.
- Participants expressed mixed reactions for the arts component. Some participants reported they did not anticipate liking the arts component but found it useful, while others felt the crafts were too simplistic.



CONCLUSIONS

- Group participation was not associated with decreased caregiver stress, fewer problematic behaviors, or usage of health care services.
- This study's quantitative analyses were limited due to a small sample size, leading to low statistical power which increased the chance of a type II error.
- The neurodegenerative nature of dementia and low dose of intervention may have also limited the potential for finding an effect on the chosen outcome measures.
- Qualitative review indicated that caregivers who participated in the group had better relationship quality with the PWD, despite similar levels of overall stress.
- Caregivers who participated in the group also reported a better perception of Samaritan Health Services.
- Caregiver group participants reported overall willingness to recommend the group to close friends.

FUTURE IMPLICATIONS

- The group might benefit from continuing to focus on concrete tools/strategies.
- Consideration for how to increase the likelihood that group attendance will result in usage of specialty services. For example, providers might participate, explain their services, and offer to facilitate referrals (as opposed to referral responsibility going to patient).

REFERENCES

- Cheng, S. T., Au, A., Losada, A., Thompson, L. W., & Gallagher-Thompson, D. (2019). Psychological interventions for dementia caregivers: What we have achieved, what we have learned. *Current Psychiatry Reports, 21*(7), 59.
- LaMantia, M. A., Stump, T. E., Messina, F. C., Miller, D. K., & Callahan, C. M. (2016). Emergency department use among older adults with dementia. *Alzheimer disease and associated disorders, 30*(1), 35.