Quality Measures for Dementia

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2017 Recommendation 10

The Advisory Council on Alzheimer's Research, Care and Services should devote one meeting to advancing the work ASPE has conducted with RTI International on defining best practices for comprehensive dementia care.

Specific topics should include:

- 1) an in-depth description of the Examining Models of Dementia Care report and appendices;
- 2) federal agency reporting of current innovative services for persons with dementia and their caregivers;
- 3) non-federal reporting from health systems and/or payers of exemplar population health solutions for dementia care; and,
- 4) Advisory Council discussion of next steps to advance consensus definitions of best practice models, including measurement targets for clinical outcomes and value-based outcomes concerning cost and the care experience.

ASPE Response

The Examining Models of Dementia Care: Final Report is published and available on the ASPE and NAPA websites. As was discussed during the April 2017 NAPA Advisory Council meeting, there are a number of different directions in which to pursue future research, and ASPE would welcome the opportunity to discuss these opportunities in greater detail with the Advisory Council at-large, or with one or more of the relevant NAPA subcommittees.

April 2018 – Session 1: Advancing Consensus on Dementia Care Elements

- Alzheimer's Association Dementia Care Practice Recommendations
 - Sam Fazio and Doug Pace, Alzheimer's Association
- Quality Care from the Perspectives of People Living with Dementia
 - Cynthia Huling Hummel, NAPA Council Member
- Care Planning and Health Information Technology: How to Aid Dementia Quality Care
 - Liz Palena Hall, ONC

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April 2018 – Session 2: Exemplar Models Informing the Need for New Outcomes Measurement

- Comprehensive Primary Care Plus (CPC+): Exemplar of governmental initiative
 - Laura Sessums, CMS/CMMI
- Age-Friendly Health Systems: Exemplar of Non-governmental initiative
 - · Amy Berman, John A. Hartford Foundation
 - Kedar Mate, Institute for Healthcare Improvement

2018 Recommendations 4 & 5

<u>Recommendation 4</u>: Determine a process for reaching consensus on national definitions of best practices for comprehensive care of AD/ADRD at all disease stages.

There should be current best practices for comprehensive care of AD/ADRD at all disease stages so that persons living with AD/ADRD, caregivers, health systems and payers have similar understanding regarding diagnosis, treatment and/or services and supports; and the Advisory Council should identify an approach for outline practices for such comprehensive care.

<u>Recommendation 5</u>: Encourage further development, evaluation and use of healthcare models for AD/ADRD that align performance measures, the experience of care by persons living with AD/ADRD and their caregivers, and payment.

Federal agencies, states and non-governmental payers of health care services should increase the use of value-based care for persons living with AD/ADRD to pay for health care services in a manner that directly links health services payments to performance on cost, quality, and resource use metrics; this alignment will better support comprehensive person-centered care leading to improved health and quality of life for persons living with AD/ADRD.

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Assessing Care of Vulnerable Elders (ACOVE) RAND Corp.

- Cognitive and Functional Screening
- Medication Review
- Laboratory Testing
- Neuroimaging
- Cholinesterase Inhibitors
- Caregiver Support and Patient Safety

- Screening for Depression
- Depression Treatment
- Driving Privileges
- Restraints (in hospital)
- Memory Loss (without previous diagnosis of dementia)

2001 RAND

https://www.rand.org/pubs/reprints/RP1130.html

Physician Quality Reporting System (PQRS)

2015 PQRS MEASURES IN DEMENTIA MEASURES GROUP:

- ▶ #47 Care Plan
- #280 Dementia: Staging of Dementia
- #281 Dementia: Cognitive Assessment
- #282 Dementia: Functional Status Assessment
- #283 Dementia: Neuropsychiatric Symptom Assessment
- #284 Dementia: Management of Neuropsychiatric Symptoms
- #285 Dementia: Screening for Depressive Symptoms
- #286 Dementia: Counseling Regarding Safety Concerns
- #287 Dementia: Counseling Regarding Risks of Driving
- #288 Dementia: Caregiver Education and Support

https://mdinteractive.com/files/uploaded/file/CMS2015group/Dementia-2015.pdf

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Dementia Capability Assessment Tool

(Note: If your organization is an ADI-SSS or ADSSP grantee or project partner, please contact Sari Shuman at sshuman@rti.org prior to completing this tool.)

Instructions

This assessment tool is designed to measure the dementia capability of the long-term services and supports in various organizations. The information resulting from this assessment will assist in measuring changes in dementia capability over time.

Any organization can complete an individual assessment of its dementia capability. Questions 1 through 5 are used to identify the responding organization and its focus areas. Questions 6 through 9 are used to measure various aspects of dementia capability. The goal of the assessment is to demonstrate dementia capability throughout the organization. Due to organizational changes over time, periodic re-evaluation of dementia capability is strongly recommended.

https://nadrc.acl.gov/node/117





Dementia overview

NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

http://pathways.nice.org.uk/pathways/dementia

NICE Pathway last updated: 27 March 2018

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.

ASPE & RTI: Examining Models of Dementia Care	ACOVE	PQRS & QPP	ACL: Dementia Capability	Alzheimer's Association: Dementia Care Practice Recommendations
Detection of possible dementia	Cognitive & Functional Screening; Memory Loss	Cognitive Assessment	Identification and Awareness of Dementia	Detection & Diagnosis
2. Diagnosis	Medication Review; Laboratory Testing; Neuroimaging	Staging of Dementia; Functional Status Assessment		
Assessment and ongoing reassessment			Measuring Functional Ability for Care Planning and	Assessment & Care Planning
4. Care planning		Care Plan	Resource Allocation	
5. Medical management	Cholinesterase Inhibitor			Medical Management
6. Information, education, and informed and supported decision making			Understanding Decision- making Capacity for Care Planning & Resource Allocation	Information, Education and Support
7. Acknowledgement and emotional support for the person with dementia			Support Resources for Persons with ADRD	
Assistance for the person with dementia with daily functioning and activities			Support Resources for Persons with ADRD	Ongoing Care for BPSD and Support for ADLs
Involvement, emotional support, and assistance for family caregivers	Caregiver Support (and Patient Safety)	Caregiver Education and Support	Caregiver Support Resources	

ASPE & RTI: Examining Models of Dementia Care	ACOVE	PQRS & QPP	ACL: Dementia Capability	Alzheimer's Association: Dementia Care Practice Recommendations
Involvement, emotional support, and assistance for family caregivers	Caregiver Support (and Patient Safety)	Caregiver Education and Support	Caregiver Support Resources	
Prevention and mitigation of behavioral and psychological symptoms of dementia	Screening for Depression; Depression Treatment	Neuropsychiatric Symptom Assessment: Management of Neuropsychiatric Symptoms; Screening for Depressive Symptoms	Understanding Decision- making Capacity for Care Planning & Resource Allocation	Ongoing Care for BPSD and Support for ADLs
11. Safety for the person with dementia	(Caregiver Support) and Patient Safety; Driving Privileges; Restraints	Counselling Regarding Safety Concerns; Counselling Regarding Risks of Driving	Safety Resources	
 Therapeutic environment, including modifications to the physical and social environment of the person with dementia 				Supportive and Therapeutic Environment
13. Care transitions				
14. Referral and coordination of care and services that match the needs of the person with dementia and family caregiver(s) and collaboration among agencies and providers			Information, Referral, and Assistance Services Capable of Meeting the Unique Needs of Persons with Dementia and Caregivers	Transition and Coordination of Services
			Options Counselling and Assistance	
			Resources for Diverse and Underserved Persons with Dementia and Caregivers	
			Self-directed Services	
			Workforce Training and Tools	Workforce
			Quality Assurance Systems	