

Implementation of a Memory Disorder Clinic: A Formative Evaluation

Hollis Day, MD, MS
Chief, Geriatrics BMC

Mari-Lynn Drainoni, PhD
Associate Professor, Department of Health Law Policy and
Management, BUSPH
Co-Director, Evans Center for Implementation and
Improvement Sciences

Introduction and Overview

- ◉ Provide background about need for clinic
- ◉ Examine implementation process
- ◉ Describe implementation methods of formative evaluation
- ◉ “Flagship” CIIS Project



Background: English Speaking Patients

- ◉ Assessing memory complaints time consuming and challenging beyond the MMSE
- ◉ Wait times for neuropsychological testing very long
- ◉ Not always clear what additional tests should be ordered

Suggested Referral Criteria

Condition/ Symptom Indication	Rationale	Suggested PreReferral Testing/ Preparation	Frequency of Follow-up	Referral Back to Primary Care
Adults 65 years of age and older, with memory loss Concerns about memory/cognition raised by patient, family, and/or PCP team	Diagnostic evaluation Medical and psychosocial management Determination of community/home services Reduction in caregiver stress Advisement on long term care planning including housing and guardianship issues when relevant	Mini-Cog or MMSE B12, CMP, CBC, TSH Updated medication list Encouraging family/caregiver attendance at visits	1-2 months and then as needed	Care coordinated with primary care physician/team

Background: English Speaking Patients

- ⦿ Present ideally with key-informant
- ⦿ History and physical
- ⦿ Standardized tests (norms based on age and education level)

Background: Non-English Speaking Patients

- ◉ Most neuropsychologists do not test
- ◉ Unclear how to best test for cognitive impairment in this group
- ◉ Cultural differences in understanding dementia
- ◉ BMC large non-English speaking population (particularly elderly)
- ◉ Low-literacy levels in this population as well

Memory Disorders Clinic: Initial

- ◉ History and physical
- ◉ Focus on activities of daily living/functional status
- ◉ Depending on language could do Montreal Cognitive Assessment (MOCA) or MMSE
- ◉ Tested for short-term memory, orientation, language

Memory Disorders Clinic Updated

- ◉ Still seeing English speaking patients!!
- ◉ H&P again focusing on ADLs, educational background
- ◉ Critical point: must have in-person interpreter

Standardized Testing

- ◉ Geriatric depression scale
- ◉ MOCA, MOCA-B, MMSE (depends on language and educational level), consider RUDS
- ◉ Clock draw
- ◉ Peaks and plateaus, Go/No Go
- ◉ Animal naming
- ◉ Color Trails Test

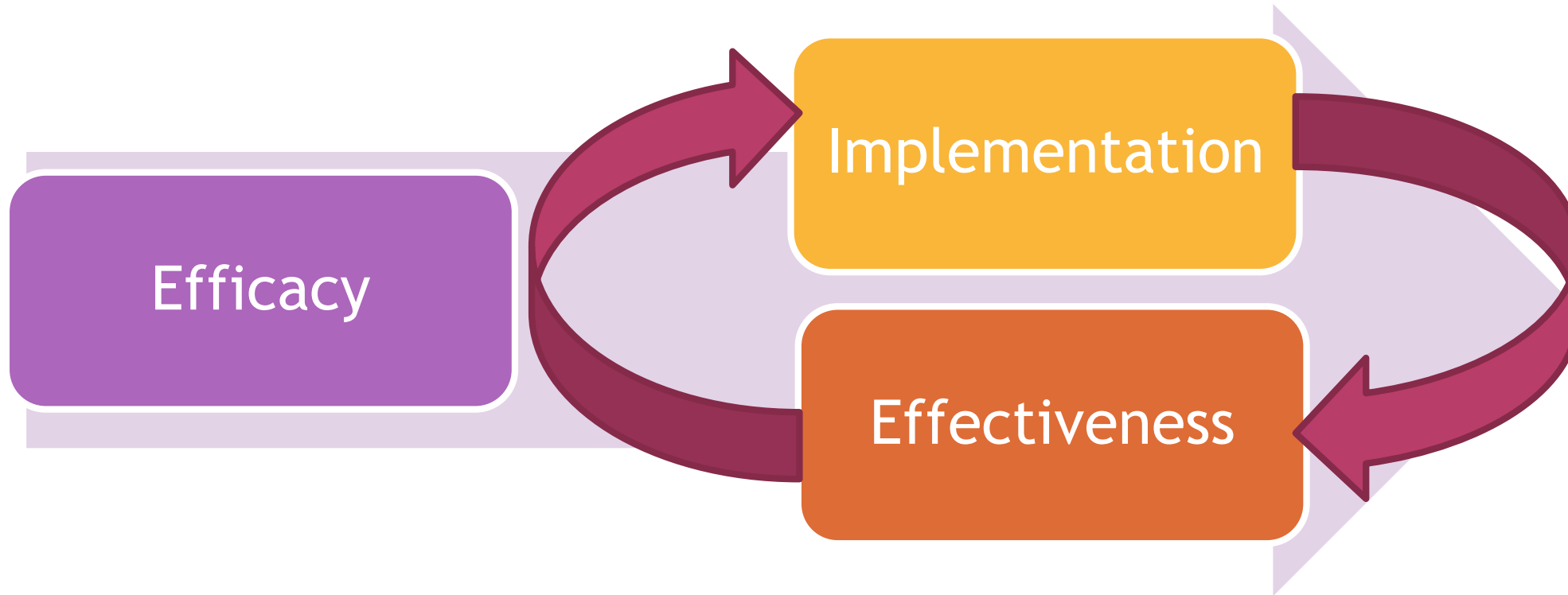
New Approach

- ◉ Utility to referring providers
- ◉ Helpfulness to families
- ◉ Appropriate referrals to neurology (also a limited resource)

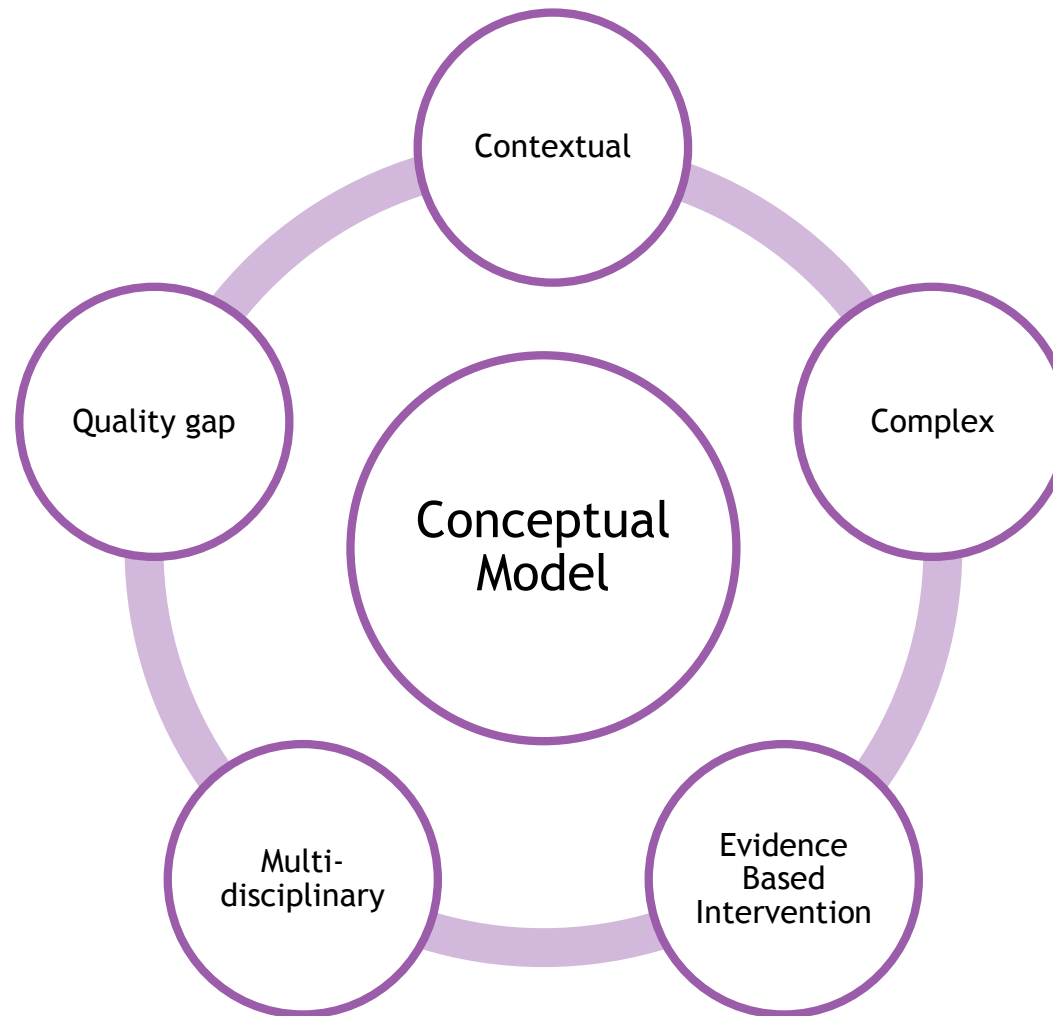
Aims and Research Questions

- ◉ **Examine the implementation process**
 - Feasibility, acceptability, satisfaction, core outcomes
- ◉ **Examine difference for English and non-English speakers**
 - Wait time, battery completion, experience and satisfaction
- ◉ **Assess patient/caregiver experience**
- ◉ **Assess referring provider satisfaction**
- ◉ **Assess clinic provider experience**

Ideal Research Continuum



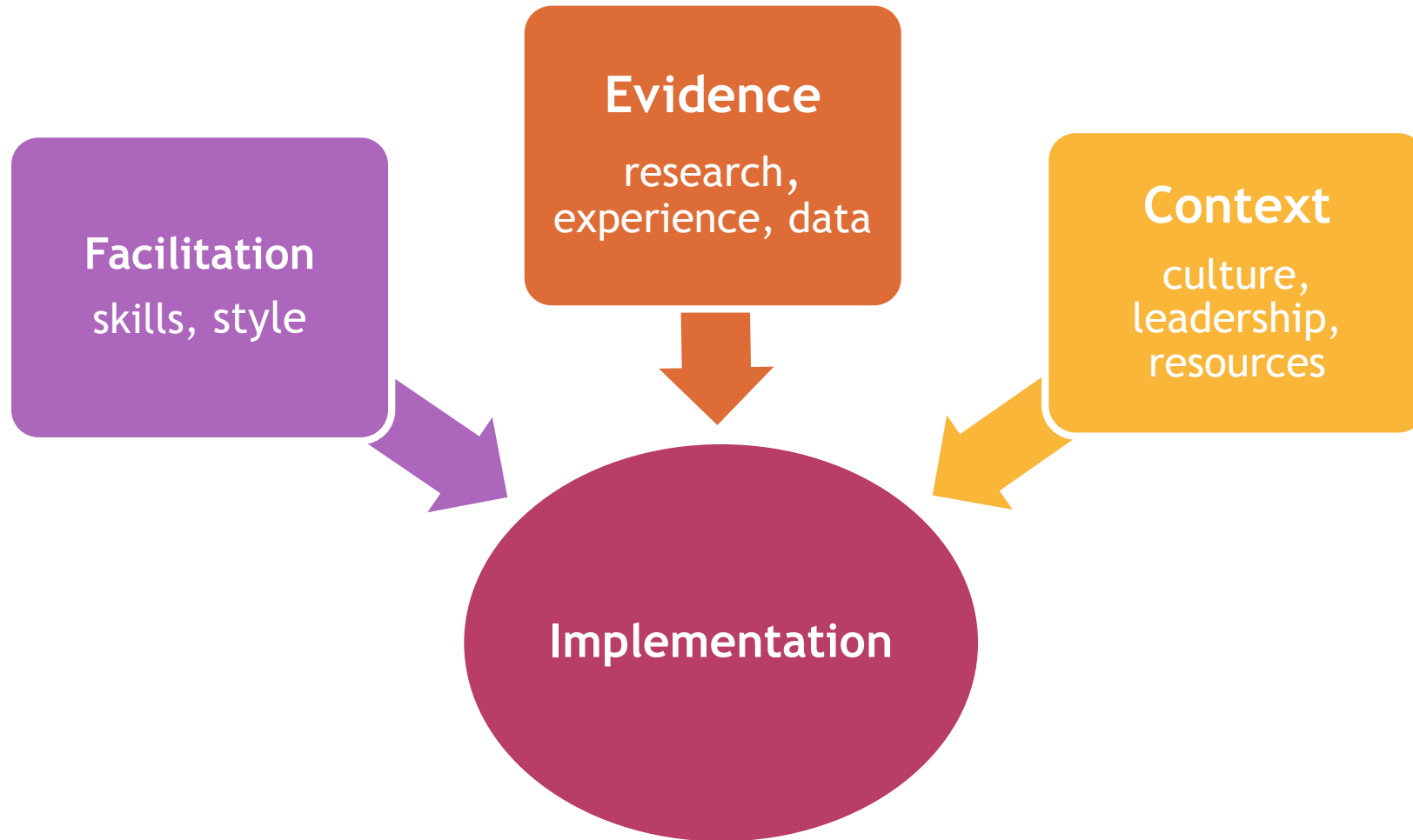
Implementation Research Features



Selecting a Model

- ◉ Why use conceptual models:
 - Systematic method to identify, understand, operationalize & evaluate implementation
 - Identifies set of variables & relationships to examine & explain the phenomena

Promoting Action on Research Implementation in Health Services (PARIHS) Model



Methods

◉ Mixed methods

Qualitative Methods	Quantitative Methods
<ul style="list-style-type: none">• Clinic provider interview• Referring provider interview• Interpreter interview	<ul style="list-style-type: none">• Caregiver experience survey• Patient experience survey• Referring provider survey• Retrospective chart review

Referring Provider Interview Guide

- ◉ How did you hear about the Memory Disorder clinic?
- ◉ What was your first impression of the clinic?
- ◉ Why did you choose to use the clinic?
- ◉ What has your experience been like?
 - Access, quality, feedback, assessment of results
- ◉ How have the results affected your care of patients?
- ◉ Would you use the clinic again? Why or why not?

EMR Data Elements

- ◉ Language spoken
- ◉ Sex
- ◉ Age
- ◉ Race/ethnicity
- ◉ Use of interpreter
- ◉ Time to appointment
- ◉ Appropriate referrals
- ◉ Battery completion time

Patient Experience Survey

Implementation Study of BMC Memory Disorder Clinic - Patient Survey

The Center for Implementation and Improvement Sciences is working to help improve the Memory Disorder clinic. We would greatly appreciate it if you could take a few minutes to complete the survey below. Your answers will not be shared and will not in any way affect your care at BMC. We value your input and are excited to learn more from your perspective.

Please indicate your level of agreement with the following statements:

1. I was able to get an appointment at the Memory Disorder Clinic as soon as I thought I needed it.
<input type="checkbox"/> Strongly Disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Agree
2. I was able to get the information I needed from the Memory Disorder Clinic.
<input type="checkbox"/> Strongly Disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Agree
3. The doctor I saw today at the Memory Disorder Clinic explained things in a way that was easy to understand.
<input type="checkbox"/> Strongly Disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Agree
4. The doctor I saw today at the Memory Disorder Clinic listened carefully to me.
<input type="checkbox"/> Strongly Disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Agree
5. The doctor I saw today at the Memory Disorder Clinic showed respect for what I had to say.
<input type="checkbox"/> Strongly Disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Agree
6. The doctor I saw today at the Memory Disorder Clinic spent enough time with me.
<input type="checkbox"/> Strongly Disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Agree
7. Clerks and receptionists at the office were helpful.
<input type="checkbox"/> Strongly Disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Agree
8. Clerks and receptionists treated me with courtesy and respect.
<input type="checkbox"/> Strongly Disagree <input type="checkbox"/> Disagree <input type="checkbox"/> Agree <input type="checkbox"/> Strongly Agree

Please flip page to answer questions on the back.

Linking Questions to the Model

◉ Evidence

- **Referring provider interview:** What do you think is the value of the Memory Disorder Clinic?
- **Referring provider survey:** I agree with the recommendations from the Memory Disorder clinic (Likert Scale)

Linking Questions to the Model

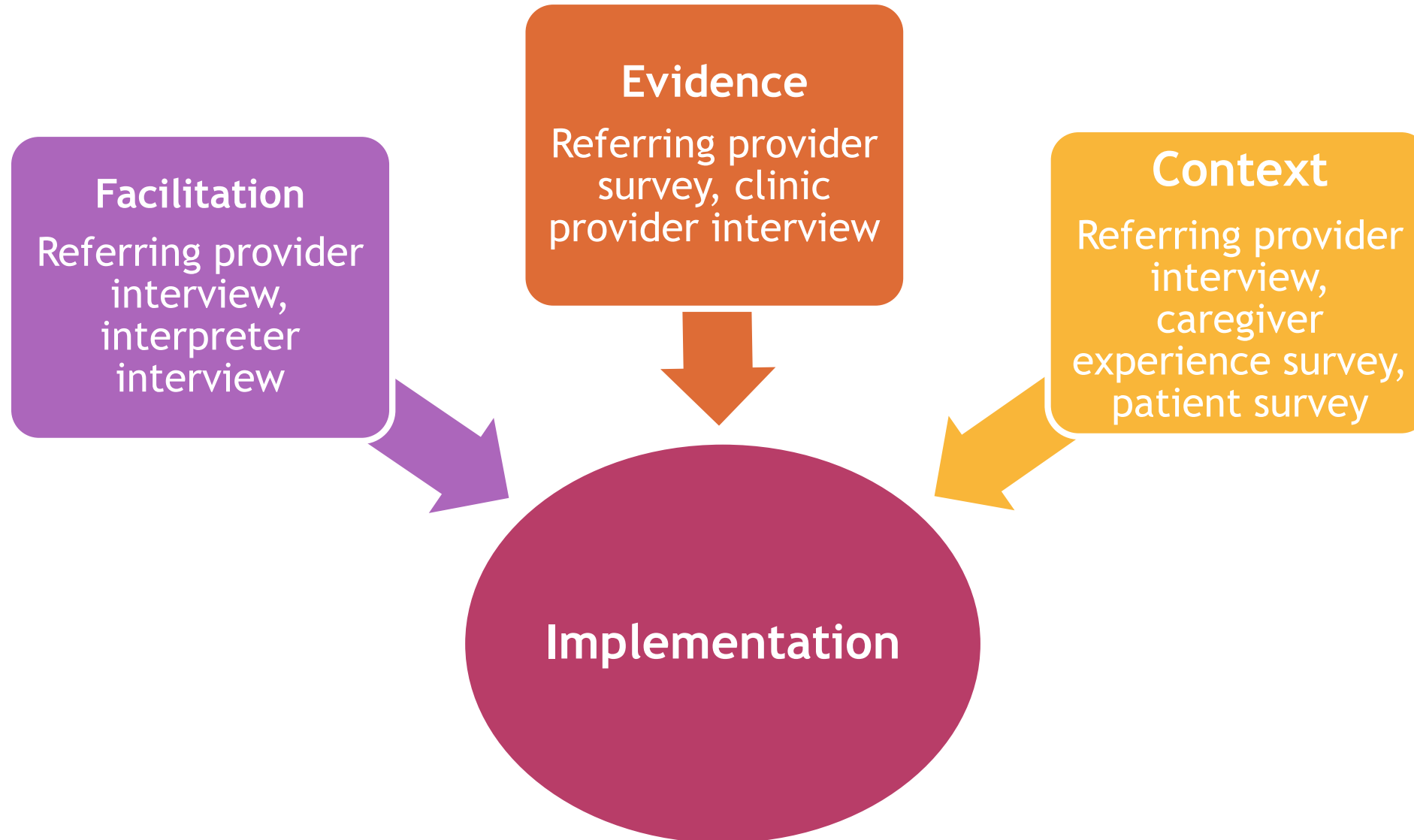
◉ Facilitation

- **Interpreter interview:** How difficult or easy was it for you to interpret in the clinic?
- **Patient survey:** Using any number from 1 to 10, where 1 is the worst health care possible and 10 is the best health care possible, what number would you use to rate your health care today
- **Referring provider interview:** Has the referral affected your service in any way? How so?

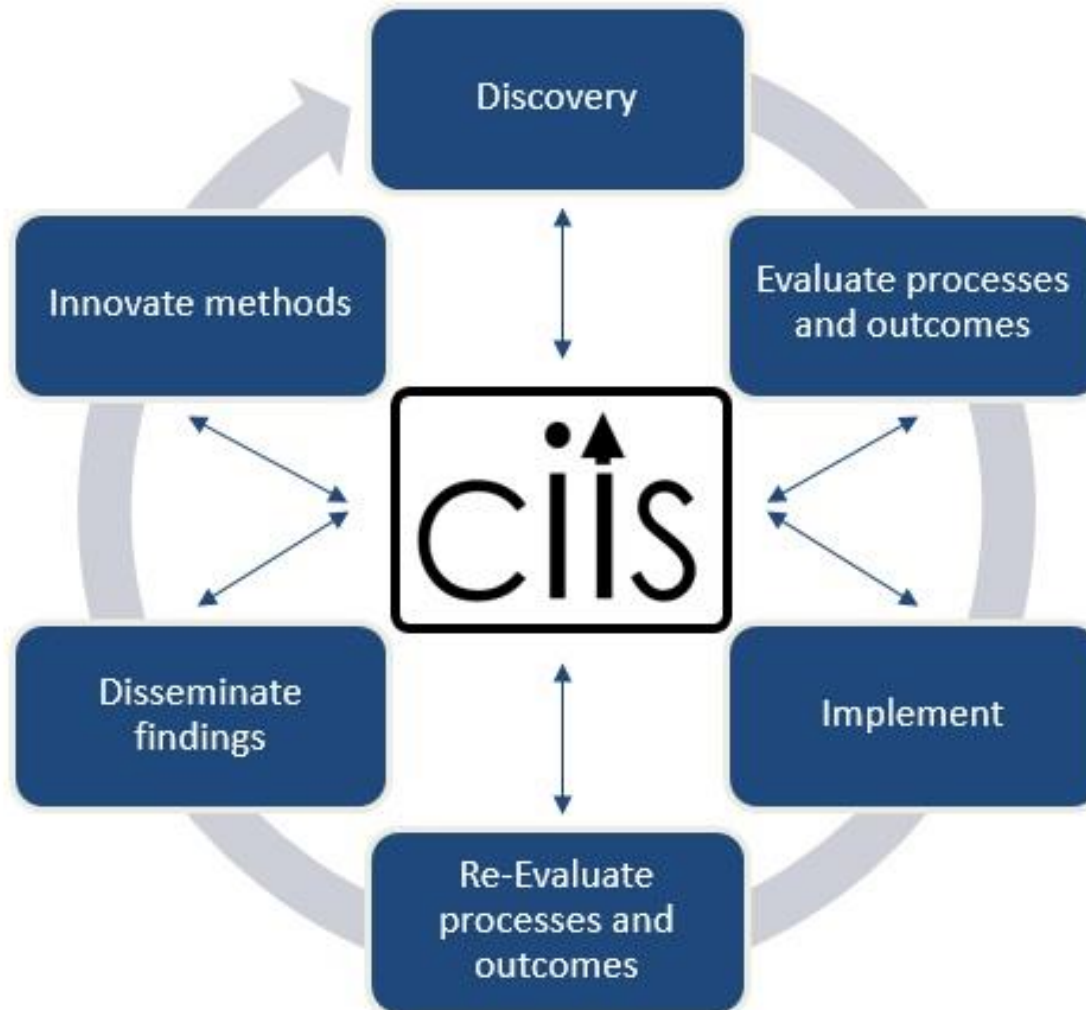
◉ Context

- **Referring provider interview:** Using any number from 0 to 10, where 0 is the worst experience possible and 10 is the best experience, what number would you use to rate your experience with the Memory Disorder Clinic?

Mapping Back to PARIHS Model



Turning the Wheels of Quality



References

Kitson A, Harvey G, McCormack B. Enabling the implementation of evidence based practice: a conceptual framework. *Qual Health Care*. 1998;7(3):149-158.

Rycroft-Malone J. The PARIHS framework - A framework for guiding the implementation of evidence-based practice. *J Nurs Care Qual*. 2004;19(4):297-304.

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Questions?

Thank you!



EXCEPTIONAL CARE. WITHOUT EXCEPTION.

