



# Agents of Change

Creating National Quality Collaboratives to improve dementia care

## Newsletter #2

### Welcome

Issue 2, May 2018

Welcome to the latest newsletter for the *Agents of Change* project. We have made major progress on the project since our last edition, including recruiting a group of enthusiastic and inspiring clinicians to our Quality Improvement Collaboratives. I was so pleased at the response to our call for participants; clearly many clinicians are keen to improve their practice and learn from each other to deliver better dementia care. There is so much potential in our group and I am excited to see the changes that we can make together.

- Dr Kate Laver, project lead

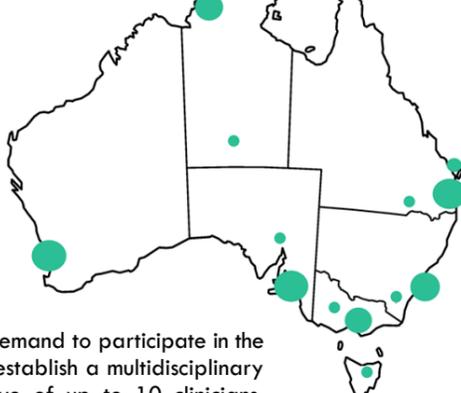
### Progress update

**Recruitment:** We are delighted to have recruited 30 dedicated and experienced health professionals to our Quality Improvement Collaboratives. They come from a range of backgrounds: occupational therapy, physiotherapy, nursing, social work, health management, and medicine.

We have a great national spread too (see right): 7 clinicians from South Australia, 6 from New South Wales, 5 from Queensland, 4 from Victoria, 3 from the Northern Territory, 2 from the ACT, 2 from Western Australia, and 1 from Tasmania.

We are now in the process of obtaining site-specific governance approval for each site. This process is complete for 13 clinicians, who will now begin their project orientation and preparation. The remaining 17 clinicians will follow as their governance approvals are complete.

**Second wave collaborative:** The overwhelming demand to participate in the *Agents of Change* project has also allowed us to establish a multidisciplinary 'second wave' Quality Improvement Collaborative of up to 10 clinicians. Activities for this Collaborative will begin later than the initial Collaborative but will otherwise function similarly, with regular expert advice and collaboration. We will keep you updated as we progress with establishing this Collaborative.



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### Meet the team - Dr Kate Laver



In each edition of our newsletters, we will introduce you to a new member of the *Agents of Change* team. Let's start with Dr Kate Laver:

"I'm the lead investigator for the *Agents of Change* project and am based in Adelaide. I'm an occupational therapist with experience mostly in aged care and rehabilitation and I have worked in acute, inpatient and home and centre based services as well as for a private practice in Southern Adelaide.

Since completing my PhD in 2012 I have been fortunate to work on some great research projects funded by the NHMRC Partnership Centre for Cognitive Decline and the NHMRC National Institute for Dementia Research. This includes coordination of the NHMRC approved Clinical Practice Guidelines for Dementia; a clinical trial testing the benefits of a telehealth program for people with dementia and their carers, and; training and supporting health professionals to deliver a particular intervention ("COPE") in clinical practice with people with dementia and their carers.

I feel really passionate about conducting research that is clinically relevant and that aims to improve health outcomes. This may be through testing new interventions, looking at the best way to deliver existing interventions and translating interventions known to be effective into clinical practice (as we are doing with this project)."

### Welcome Lenore

Since our last edition, Lenore de la Perrelle has joined the *Agents of Change* project as a PhD Candidate. Lenore is a social worker with many years of experience in aged care management and education, including at ACH Group and Alzheimer's Australia. Lenore has joined the project to explore the mechanisms of using Quality Improvement Collaboratives to improve dementia care, and the impact of active collaboration with people with dementia and their supporters in design, conduct, and reporting of research projects. She is a highly experienced and respected leader in aged and dementia care in Australia and we are thrilled to have her on board. Welcome Lenore!



### Project progress

	Nov 2017	Mar 2018	Jun 2018	Aug 2018	Jan 2019	Mar 2019	Dec 2019
Ethics approval	×						
Implementation clinician recruitment		×					
Data collection begins			●				
Start up meeting				●			
Training					●		
Implementation of plans						●	
Results dissemination							●

● = Expected, × = Completed

### What is a Quality Improvement Collaborative?

A Quality Improvement Collaborative is an innovative strategy to translate research knowledge into clinical practice. Collaboratives bring together health professionals from multiple sites to facilitate learning about and sharing of methods to improve care. They generally include five elements:

- Specific topic focus
- Participants from multiple sites
- Expert guidance
- Structured activities to promote collaborative learning
- Tracking progress against measurable aims

They are based on the knowledge that **"Assessing one's own progress and benchmarking with other professionals facilitates faster and wider implementation of quality improvement practices"** (Shaw et al, 2012).

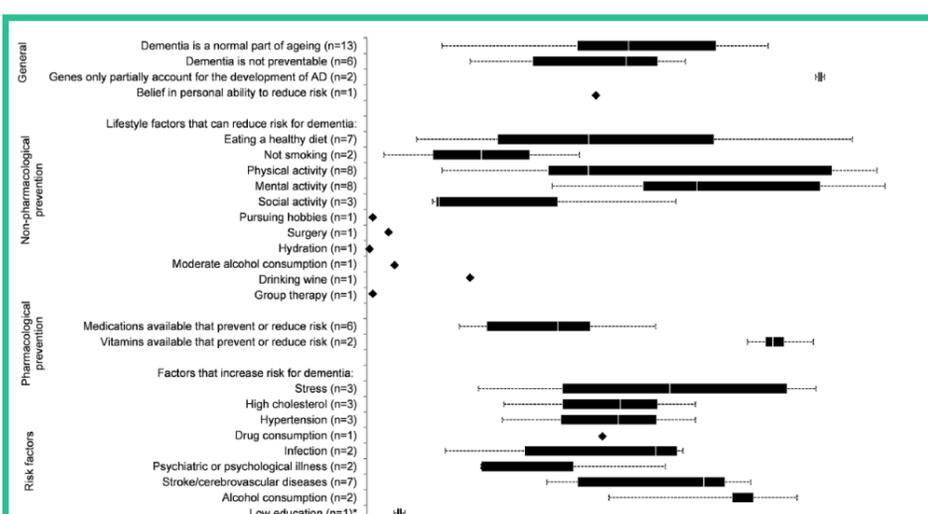
Health professionals are considered the experts in their own service setting, and are supported to create their own quality improvement plan. Quality Improvement Collaboratives have been successfully used to increase rates of breast feeding (Lee et al., 2012), reduce central line associated bloodstream infection (Bundy et al., 2014), decrease post-stroke length of stay (Schouten et al., 2010), and improve organ donation rates (Shafer et al., 2006). This is the first time a Quality Improvement Collaborative will be used to improve dementia care.

### Latest research from the team

#### What does the general public understand about dementia?

The *Agents of Change* project team recently published a research paper entitled 'What does the general public understand about prevention and treatment of dementia? A systematic review of population-based surveys'

In this systematic review, we collated all studies that have assessed knowledge about the potential for dementia risk reduction and treatment published in the past five years. We found that knowledge remains poor overall, but may be improving over time. About half of the general public still appear to believe that dementia is a normal part of ageing and is not preventable (see below).



General public understanding of prevention of dementia, from Cations et al (2018)

Although public understanding that dementia is not a curable condition appears to be improving, belief that drug and non-drug treatments exist to help maintain functioning and quality of life was still low. This suggests that public health messaging about dementia is still not making enough impact; we suggest strategies for future campaigns in our article. You can read it [HERE](#).

### Contact

**For any questions or comments about *Agents of Change*, contact Monica Cations on (08) 7221 8338 or at [monica.cations@sa.gov.au](mailto:monica.cations@sa.gov.au)**

To remove your name from our mailing list, please [click here](#).

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