The Key Factors Influencing the Effectiveness of Care Management for Persons Living with Dementia:
A Narrative Synthesis Systematic Review

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- Care Management (case management) has blossomed in the past decades possibly because:
  - Aging of the aged;
  - Increasing number of persons with complex comorbidity;
  - Increasing prevalence of persons with dementia.

- Also...
  - Variety of needs of pwd and caregivers not met (limited range of available services);
  - Increasing public expenses;
  - High burden for caregivers caring for persons with dementia.
  - Lack of education and awareness. Caregivers often delay use of community resources
  - Care management is simply nice to have.
Background (cont.)

Care management. A potential solution
But... is it effective?
• RCTs with evidences suggesting the effectiveness (or otherwise the ineffectiveness) of specific care management programmes.
  • Reduce caregiver’s burden;
  • Increasing QoL of pwds and caregivers;
  • Promote utilisation of community resources;
  • Delaying institutionalisation;
  • Reducing chance of unplanned hospital admission;
  • Reducing cost, etc.

• Numerous systematic review attempt to compare different programmes.
  • But many CM programmes for pwd exists. Wide variety of care management practices creates challenges for meta-analysis.
  • Arguably, Narrative synthesis approach to systematic review seems more suitable for such macro, complex intervention with highly heterogeneous protocols across studies.
AIM:

• Primary: To adopt a textual, narrative synthesis approach to systematically identify factors that contribute to each reviewed CM programme’s success

• Secondary: To attempt explaining the possible reasons behind some CM programme’s insignificant effects.
METHOD:

- Search limited to RCT;
- Published 1996 or after;
- Without other chronic comorbidity
- Databases:
  - PsycINFO; Pubmed; Science Direct; Web of Science; Cochrane; Embase
- Definition of care management: “a collaborative process of assessment, planning, facilitation, care coordination, evaluation and advocacy for options and services, education and support, to meet an individual’s and family’s comprehensive health needs” (CMSA)
• Adopted the methodological framework on systematic narrative-synthesis suggested by Popay et al. (2006)

• Four key elements:
  - Theory development;
  - Developing a preliminary synthesis;
  - Exploring the relationship and findings within and between studies;
  - Assessment of the robustness of the synthesis.
In general...

• Selected studies have covered intervention from various location:
  - Canada [n = 1]; Finland [n = 2]; Germany [n= 1]; Hong Kong [n= 3]; India [n= 1]; Netherland [n= 1]; US [n = 8]

• 16/17 studies with at least 1 positive outcomes brought about by care management.

• 13/17 studies suggest at least 1 insignificant effect of care management.

Theory Development (identification of themes, Thematic analysis):

• Individual factors

• Programme factors
Much research on the effectiveness of community-based interventions to ease caregiving burdens and delay NH placement with mixed results. ... many of these studies either did not specify the stage of the pwd, or involved subjects who were in the moderate to severe stages of Pwd” [Chu et al. (2000)]
What makes one CM programme’s more successful than the other?

Delaying institutionalization for Severe pwd:
• Shot term effectiveness [Eloniemi-S U, et al. 2009]; vs
• Long term effectiveness [Mittleman, et al. 2006]

Delaying institutionalization for Severe pwd:
• [Chu et al. (2000)] 18m; vs
• [Samus Q.M. et al. 2013] 24m
**THEORY DEVELOPMENT & PRELIMINARY SYNTHESIS**
- Programme factors:

- **Profession of Care Managers:**
  - SW [Chu, et al. (2000)]; [Samus, 2013]
  - Clinicians* [Mittleman, et al. 2006]
    *(master/doctoral in SW, Gerontology, psychiatry

- **Intensity of CM intervention:**
  - Intervention frequency of “once a week over 4 month”[Lam et al.] to up to “few times a day” in some studies.
  - Number of tasks involved...

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<td>Frequency</td>
<td>16.7 hrs/m(avg.)</td>
<td>once/m to few times/day</td>
<td>min. once a week + Tele counselling</td>
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*The University of Hong Kong*
Other explorable factors:

- **Individual Factors:**
  - Education level of Caregivers
  - Presence of “problem threatening the continuity of ageing in place” (e.g. Unexpected fall, additional comorbidities, deterioration of CG’s own health, etc.).

- **Programme factors:**
  - Care manager’s qualification, special-training, and experience
  - Where care manager is based and accountable to?
  - Whether existence, and adherence of CM protocol helps?

- **System factors:**
  - Effects of CM programmes under different subsidized mode.
  - Popularity of hiring maid for care of elderly?
  - Asian countries Vs. non-Asian countries
CONCLUSION AND DISCUSSION

• Limitations to this study:
  • Large differences to goals and outcome measurement among intervention and studies
  • Some degree of subjectiveness using the approach of Narrative Synthesis

• But, since the Narrative Synthesis approach is flexible and exploratory, the results of this paper will generate a better direction, and more precise factors for further research and confirmation.
Thank you!

Questions, comments and suggestions are welcome!!

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