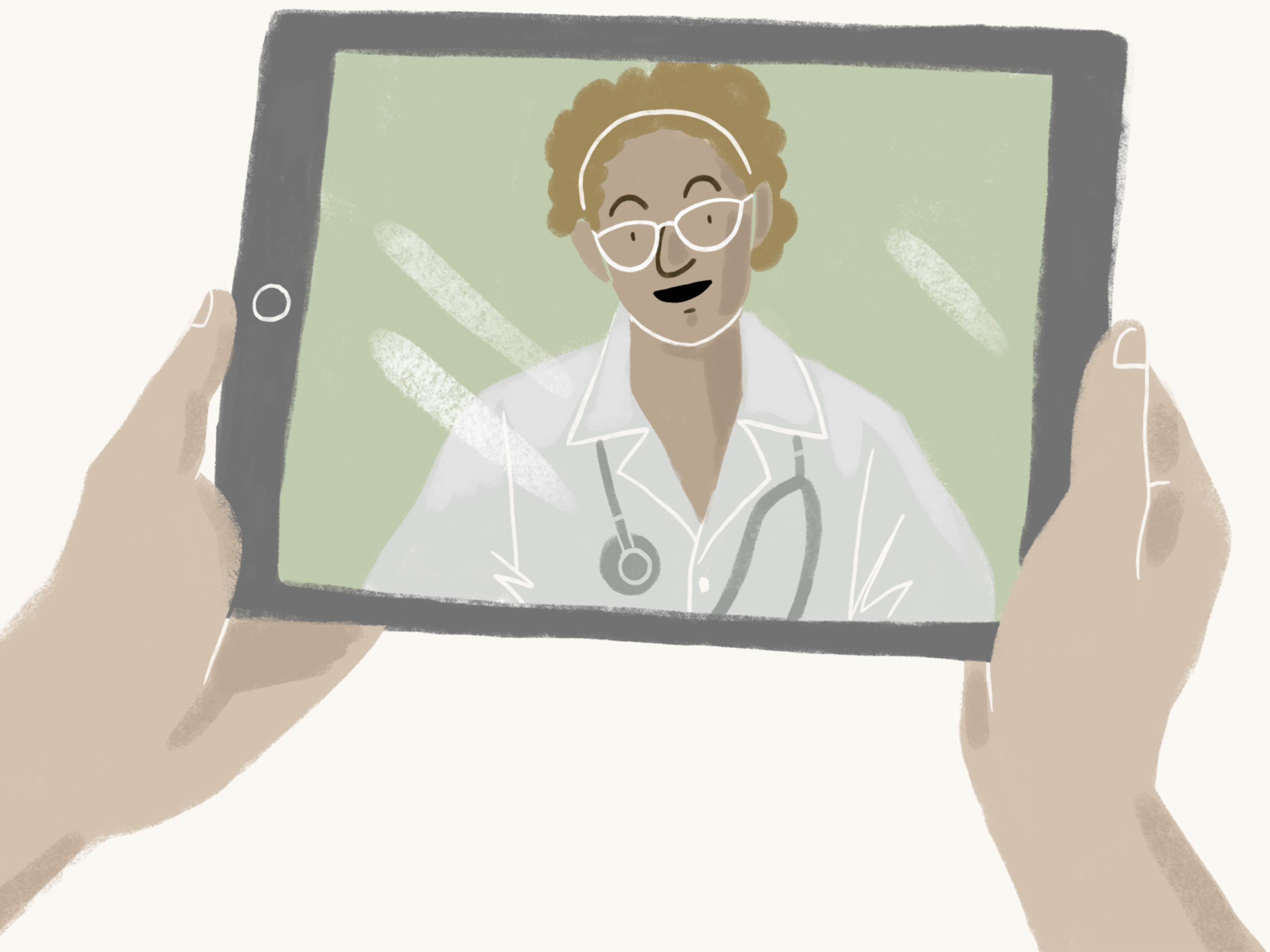


The impact of virtual dementia care on patients in assisted living



Background

Today, **over 6 million people** in the US suffer from dementia — projections show that number is expected to double by 2050.

Beyond cognitive impairment, the associated behavioral health conditions broaden the scope of disease management significantly. Primary care providers and family caregivers alike do not have the requisite tools or resources to manage behavioral conditions in patients with dementia.

Objective

We aimed to assess the impact of virtual dementia care and family caregiver support for a population of patients with cognitive impairment/behavioral health needs residing in assisted living facilities.

1/3

seniors dies with dementia

145%

increase in dementia deaths
over the past decade



Methods overview

This was an ad hoc analysis of the impact of virtual dementia care and tailored support for the patients’ family caregivers. Patients were identified using ICD-10 codes and referred by their primary care providers. Outcomes were analyzed by comparing baseline to six-months post engagement with the program. Four main domains were measured — medications, falls incidence, ER/IP utilization and caregiver satisfaction.

Methods detail

To measure the reduction in high risk medications, our team calculated the anticholinergic burden (ACB) score by reviewing the number of anticholinergic medications a patient is on; a score of 3+ is associated with increased cognitive impairment and mortality.

To measure caregiver satisfaction, we analyzed the reduction in caregiver burden and calculated a net promoter score.

Reduction in caregiver burden was measured using the Zarit Burden Interview (a questionnaire that is administered to caregivers to assess the burden of caregiving); 12 is the highest score, indicating high levels of burden.

To measure utilization (ER/IP and falls), our team reviewed EHR data and used caregiver self-reported data as a confirmatory step.



Results

In a cohort of 120 patients, the program drove statistically significant improvements in care quality and clinical outcomes on a targeted set of measures established in clinical trials for dementia. Findings below:

53%

reduction in
ER/IP utilization

80%

decrease in
falls incidence

73%

reduction in
high risk medications

45%

reduction in
caregiver burden

88

Net Promoter Score

Conclusion

This study demonstrates the effectiveness of our virtual-first, team based approach to dementia care.

The program dramatically improved care quality and clinical outcomes for patients while reducing caregiver burden (a leading driver of excess cost and utilization for this complex population).





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