Dementia Behaviour Management Advisory Services (DBMAS)

Supporting workers • Advice • Information • Referral

Helping Australians with dementia, and their carers
Brightening the dementia journey: across the trajectory of the illness

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Objectives:

Introduce
- Nurse Led Memory Clinic
- Tasmanian DBMAS/OPMHS model
  - An integrated service supporting people with dementia and their families from diagnosis through the trajectory of their illness
Illuminating the path

- Knowledge is power
  Sir Francis Bacon, English author & philosopher 1561 – 1626

- … Understanding is empowerment
Unique aspects of our service

- Assessment and diagnosis support
- Access to old age psychiatry and geriatric services
  - Nurse-Led Memory Clinic (NLMC)
  - Older Persons Mental Health Service (OPMHS)
- Dementia Behaviour and Management Advice Service Tasmania (DBMAS)
- An integrated model with access to
  - OPCTS
  - Roy Fagan Centre (RFC)
  - Older Persons Unit - Royal Hobart Hospital
  - RFC Day Centre
Tasmania’s demographics

Proportion of persons aged 85 years and over, by SA2s in Tasmania — 2011

Source: ABS, Census of Population and Housing (2011)
SA2s shaded grey are those with zero or minimal population

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Total Number of Persons with Dementia in Tasmania
NLMC – 67% self referred clients
NLMC – client feedback

• …a very valuable service especially to clients that may have difficulty obtaining an early assessment of their condition.

• … provided a supportive environment and gave a strong reassurance throughout the assessment process. She was respectful but able to candidly share information …

• a very valuable bridge for the aging solitary mentally declining … areas as broad as goal setting, …and many other areas difficult to negotiate for the aged, all directly or indirectly affecting health
IMNPACT

Innovative Models Nurse Practitioner Aged Care Trial

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DBMAS

- State Wide Service with Behaviour Consultants in the South, North West and North
- DBMAS Services are available to those who have a diagnosis of dementia and exhibiting Behavioural and Psychological Symptoms of Dementia [BPSD]
Seven-tiered model of management of behavioural and psychological symptoms of dementia (BPSD)

Tier 7: Dementia with extreme BPSD (e.g., physical violence)  
Prevalence: Rare†  
Management: In intensive specialist care unit

Tier 6: Dementia with very severe BPSD  
(e.g., physical aggression, severe depression, suicidal tendencies)  
Prevalence: <1%‡  
Management: In psychogeriatric or neurobehavioural units

Tier 5: Dementia with severe BPSD  
(e.g., severe depression, psychosis, screaming, severe agitation)  
Prevalence: 10%‡  
Management: In dementia-specific nursing homes, or by case management under a specialist team

Tier 4: Dementia with moderate BPSD  
(e.g., major depression, verbal aggression, psychosis, sexual disinhibition, wandering)  
Prevalence: 20%‡  
Management: By specialist consultation in primary care

Tier 3: Dementia with mild BPSD  
(e.g., night-time disturbance, wandering, mild depression, apathy, repetitive questioning, shadowing)  
Prevalence: 30%‡  
Management: By primary care workers

Tier 2: Dementia with no BPSD  
Prevalence: 40%‡  
Management: By selected prevention, through preventive or delaying interventions (not widely researched)

Tier 1: No dementia  
Management: Universal prevention, although specific strategies to prevent dementia remain unproven

*Prevalence is expressed as estimated percentage of people with dementia who currently fall into this category.  
† Estimate based on clinical observations. ‡ Estimate based on Lyketsos et al.
DBMAS

- Management of BPSD
- Assessment and Diagnosis
- Support with Care Planning
- Short Term Case Management
- Brokerage Funding for short term interventions
- Liaison and referral to other services
- Access to Old Age Psychiatry and Geriatric Service
Service Outcomes - 2012

- 364 referrals to DBMAS, Statewide
- 220 received from RACF
- 32 received from Community Aged Care Package Providers

- Identified BPSD on Referral
- 108 Physical Aggression
- 40 Agitation
Service Outcomes - 2012

- Identified BPSD on Referral continued
- 32 Wandering
- 29 Verbal Aggression
- 23 Anxiety
- 23 Delirium
Feedback

- Huon eldercare frequently utilises the services and expertise of DBMAS when we have residents diagnosed with Dementia who present with challenging behaviours. The support we receive includes the following:
  - Timely response to referrals usually within 24 hours.
  - Site visitation and assessments as required.
  - Respectful to the resident.
  - Professional assessment and management advice for both the GPs and clinical team.
  - Management strategies suggested that provide real and practical advice that makes a difference to both the resident, staff and other residents.
  - Assistance with transfers to other speciality units if required.
  - Case management support to include families if required.
  - Friendly, approachable and excellent customer service.
  - The DBMAS team provide an outstanding service that we rely on and know when we ask, we receive prompt attention, great advice and ongoing assistance with management strategies.
- Huon Elder Care – Cate Vanderkwast, Clinical Nurse Manager
Feedback

• DBMAS has been a real support for our staff, GPs, residents and everyone involved in the care of our dementia residents. DBMAS has a strong input in the formulation, evaluation and review of our treatment plans with a strong focus on minimal pharmaceutical interventions and quality of life for our residents. DBMAS supports a strong link between everyone involved and offers the comfort and reassurance of an expert with a warm and understanding approach. [Marc Van Impe, Snug Village]
2013 and beyond

- DBMAS Tasmania has received ongoing funding for 2013 – 2016
- DBMAS will now provide a service for Acute Care and Primary Care
- Continue to provide a Service for the Community and RACF
References:

- Gaugler, J., Krichbaum, K. and J. Wyman 2009 Predictors of Nursing Home Admissions for Persons with dementia. Medical Care. 47, p 191-198
- Behaviour Management A guide to Good Practice, Managing Behavioural and Psychological Symptoms of Dementia. DCRC, DBMAS, DOHA
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