

ACO in Action

Early Dementia Detection: One Care Manager's Mission

Barbara Steele is a MaineHealth ACO nurse care manager who noticed a problem. Working at Southern Maine Health Care's family medicine and internal medicine practices in Sanford, she was receiving numerous referrals for elderly patients coming in with undiagnosed moderate and severe dementia. She met families struggling to care for grandparents who had become unsafe at home. And she knew that dementia patients were entering long term care facilities well after their disease state warranted it. In short, dementia patients were being diagnosed too late. Providers were missing opportunities to identify dementia early on, when tools for coping were available and plans could be made for managing the progression of the disease.

"We were behind the ball in trying to help these patients," says Barbara, "so I went to each provider and asked what our process was for detecting memory loss and following up with it."

Barbara discovered that in most cases, providers were only addressing memory loss if a patient mentioned it as a concern. "There was no path to early detection," she says.

Research indicates that undiagnosed dementia is common in primary care nationwide. [A literature review](#) published in 2009 looked at eight studies of dementia diagnosis sensitivity and all showed low rates, particularly among mild cases of dementia. "Early symptoms of dementia, such as memory impairment, may not be apparent during a routine office visit unless they are directly assessed," write the article's authors. "Hence, it is not surprising that many studies reveal delayed and/or undocumented diagnosis of dementia among primary care providers."

Understanding that universal screening of eligible older patients may be the key to improved early detection, Barbara and behavioral health clinician Leah Hurlburt reached out to MaineHealth to learn about existing early detection protocols. Staff from Elder Care Services – including Dr. Heidi Wierman and Michelle Nevers – introduced them to a number of resources, including the results of a 2015 Maine-based dementia screening pilot and screening recommendations published in the [State Plan for Alzheimer's Disease and Related Dementias in Maine](#).

Inspired by what they read and heard, Barbara and Leah sought support for developing a workflow and protocols for regular dementia screening at their practices. They got buy-in from providers willing to participate and the green light from Southern Maine Health Care leadership.

After several months of development during the early part of 2017, and with support from Elder Care Services, Barbara and her partners established screening eligibility criteria, screening questions and a preliminary workflow.

"We decided to make it very simple," says Barbara. "When a patient 65 years or older comes in for a Medicare Annual Wellness Visit, we screen them for memory loss using the screening question, 'have you noticed any changes in your memory recently' and the quick Mini-Cog assessment tool. Based on the results, the provider will make a decision whether or not to bring them back for further testing using the Montreal Cognitive Assessment."

Four providers have agreed to pilot test the screening workflow. “We were very careful to make sure the workflow fit into their daily schedule. They’ve taken it on and helped fine-tune the process,” says Barbara. “Our best advocates are the providers. They really are the pioneers of moving this forward.”

The proposed dementia screening workflow will be presented to Southern Maine Health Care leadership later this month for recommended next steps. Data collection for the workflow process measures will begin with chart reviews conducted by MaineHealth ACO care management staff.

“Barbara’s dedication to seeing this process through is truly inspiring,” says Cindy Tack, the ACO’s senior director of clinical initiatives. “She identified a need, asked questions, researched best practice, engaged colleagues, proposed a solution, designed workflow and remains committed to making this work for our patients, families and care teams.”