

## **Agents of Change: Making the evidence accessible to disrupt the status quo in dementia care**

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### **Background**

The quality of dementia care in Australia is dependent on the clinician involved and the extent to which they apply best available evidence in their practice. Programs focused on promoting independence are effective and favored by consumer advocacy groups, but are not routinely implemented.

### **Objectives**

The objective of this translational project was to assess the efficacy of Quality Improvement Collaboratives (QICs) to improve adherence to recommendations from the Clinical Practice Guidelines for Dementia in Australia.

### **Method**

The project enacted multiple strategies to promote accessibility. Clinicians from across Australia were invited to join the three QICs to build their capacity in leading quality improvement projects within dementia care. Clinicians participated in a training program and were supported to enact a quality improvement plan unique to their service context using plan-do-study-act cycles. Regular meetings with their peers facilitated benchmarking and problem-solving. Consumer involvement was embedded in the study design, conduct, and reporting, in addition to clinical and industry expertise. Outcomes and feasibility were assessed with inbuilt process evaluation and regular triangulated reporting of practice from clinicians and the people with dementia with whom they were working.

### **Results**

The 30 participating clinicians included physicians, nurses, occupational therapists, social workers, physiotherapists, and dieticians, and were leaders within their service. Organisational mapping indicated bureaucratic barriers to best practice including restrictive policies and a lack of consumer and clinician consultation in decision making. The QICs has facilitated development of strategies generated by the clinician and therefore more likely to be appropriate to their context.