

Poster abstract

Dementia-oriented case management for home-dwelling people with dementia and their family caregivers

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Abstract

Purpose: To describe the activities and time spent by casemanagers for home-dwelling people with dementia and their family caregivers in a western region of the Netherlands.

Theory: People with dementia and their family caregivers go through several transitions in disease, care and social roles. Integrated care for this group is important. In the Dutch *Guideline for Integrated Dementia Care* (2008), the casemanager is put forward as the vital link in the health-care supply chain for demented people and their families.

Methods: During six months, six casemanagers registered the frequency and content of their contacts with a total of 40 home-dwelling elderly and their families.

Results and conclusions: On average, casemanagers had contact with their clients once every five weeks, mostly with the family caregiver alone (by phone) or with the client-caregiver dyad (home visit). The mean contact time was about 50 minutes. The most frequent interventions offered by the casemanager are: monitoring (keeping track), listening, and giving moral support, practical advice and information about services and procedures. Casemanagers spend most of their working time linking health care services with the client-caregiver's needs. They spend about 5–6 hours per month at non-client related activities, including education/studying, participation in dementia support groups and networking.

Discussion: Case management includes monitoring, counselling and linking of care to stimulate tailor-made care that meets the needs of the client-caregiver dyad. A caseload of around 50 clients per FTE casemanager seems reasonable.

Keywords

family caregivers, dementia care, transition, institutionalisation
