

Interdem meeting notes 21st February 2014
University of Helsinki

Attendees

- Merja Suominen – University of Helsinki, nutritionist interested in dementia Satu Jyväkorpi - University of Helsinki, nutritionist interested in dementia
- Seija Pekkala –University of Helsinki, Speech therapist, language interaction with people with dementia
- Taija Puranen University of Helsinki Phd student nutritionist interested in dementia
- Päivi Raino - University of Helsinki, social linguist, sign language; deaf people and dementia
- Gail Mountain – University of Sheffield, UK, health services researcher, occupational therapist, self-management for dementia
- Maud Graff -, Radboud university, Netherlands, senior researcher, occupational therapist development, evaluation and implementation of psychosocial interventions
- Iva Holmerova –Charles University in Prague and Centre of Gerontology, physician specialising in dementia, quality of care organisation especially in long-term care
- Lenka Lhotska – Prague Technical University, engineer -electronic engineering, measurements through sensors, software, cognitive games and other computer solutions
- Olga Stephankova - Prague Technical University, mathematics ,computer scientistapplications in support of care, handheld devices- support to stay at home
- Kathy Murphy –Galway University Ireland, psychosocial interventions, nursing, impact of reminiscence in long stay, impact upon carers, resilience
- Marjolein Gysels - University of Amsterdam, anthropologist in medical setting, palliative care, applied research .
- Dympna Casey – Galway University, Ireland, health promotion, structured education interventions for trial - sensory devices for older people -how can ICT promote social resilience
- Ulla Eloniemi-Sulkava – University of Helsinki, nurse-clinical and health scientist working with Steve Iliffe on care coordination project, interested in community care, quality of life intervention and implementation of evidence-based practices

Several attendees were new to Interdem

The main agenda item for the meeting was new proposals with a consideration but not exclusive focus upon Horizon 2020. There was discussion about the current Horizon 2020 call and the extent to which technology is the main driver (or not). Also it was identified that proposals must have SME engagement but large companies are excluded. The proposal is critical as reviewers pay most attention to this. Also whether you can apply for PH25 without having submitted to PH26

The JPND has now closed for 2014, but there was also discussion about this funding stream for the future.

Four proposals from the group were presented and discussed. Ideas circulated previous to the meeting were also raised. There was expressed interest in the outline circulated by Franka Meiland on exergaming.

Merja Suominen described her work into nutrition which will form the basis for future proposal building. The problem is that one third of people with dementia lose weight with consequent impact upon health and quality of life

Ideas for a new proposal are based on a previous study which looked at nutritional intake in dementia wards in 2004 and a more recent RCT which looked at the impact of tailored nutrition guidance for people with dementia living at home and their spouses.

Participants (initially 99 reducing to 78) completed the 12 month study. Many of them were at risk of malnutrition. The primary outcome was weight assessment at 12 months with other outcomes including health related quality of life and nutrient assessment

Tailored nutritional guidance was provided- home visits, group meetings, nutritional supplements and drinks. Results found statistical difference between the intervention and control groups – health related quality of life, energy etc. Caregiver results found a gender difference. Conclusions are that tailored nutritional guidance is beneficial.

Another study has involved providing nutritional intervention via teleconferencing. It is part of a project to create a tele-rehabilitation model for older people in Finland –and is one element of that model which also includes support for remote exercise and support during the discharge process from hospital where 6 months follow up is provided through ICT. This study involved 42 participants with some being cognitively impaired and 22 with nutritional needs. Assessment of nutritional needs was conducted before and after intervention which was nutritional guidance. Those at the meeting all affirmed the value of this work. Relevant contacts in other countries were provided; the NANA project in the UK (Arlene Astell) and the Bon Appetit National project re serving food in Prague.

Maud Graff presented the Community Occupational Therapy in Dementia (COTiD) across Europe proposal with support of m health.

The intervention is based on self management of health and disease and involves the person with dementia living at home and their care giver identifying goals of importance to them and being supported in goal achievement through 10 sessions of occupational therapy. The work is being taken forward in the UK and in the Netherlands. The significant body of published work that underpins the current proposal was described and the challenges of translation into different cultures and contexts. The intervention is already translated into French German Italian and Spanish. However a pragmatic trial in Germany which did not model the intervention to the German context failed to show positive results. Also work on country wide implementation in the Netherlands has demonstrated the effort and time needed for success.

An EU wide proposal was submitted to the JPND last year and was commended but did not receive funding. To make it fit with Horizon 2020, the idea is to introduce memory aids within the

intervention and use m health to support implementation and specifically communication between professionals – a web based coaching system communication forum. Self management support may be provided through an APP.

The proposal cannot be submitted to AAL and resubmission to JPND would exclude some countries that wish to participate.

There was discussion about the fit between this proposal and requirements for Horizon 2020 – does it meet the call PHC26 or PHC27 on self management and e health in 2014 or 2015 best? It was agreed that Maud and others interested would check this out with the EU offices at their respective universities. Kathy also offered to check this out with the EU office at Galway.

Gail Mountain briefly described the technology for self management in dementia proposal which was submitted to a UK funding stream last year and narrowly missed being supported. The original proposal involved Dutch partners.

Through brief discussion, Gail decided that the current Horizon 2020 call probably was not suitable for this proposal and that it would be prudent to wait for a call which might be a better fit. In the meantime Gail will circulate a brief description of the proposal to members to gauge interest for the future.

Iva Holmerova described an idea involving early detection and quantification of change of behaviour through computer detection which might also include coaching. This would involve developing a computer spy programme for early detection of MCI. Clusters of activities will be defined-activities, mood and cognition

The target group for this would be the future old. However, is this what people want?

Focus groups would be held to determine requirements. The proposed project would be proof of concept – is this possible? If the user agrees, results can be made available to them together with feedback and advice regarding what is preventable and reversible –what they can do. It is realised that there are significant ethical implications and how long will it be necessary to follow up to detect change

Plans are in place for either the Horizon 2020 call on early risk detection in 2015

Deliverables will include Spy software, individualised self assessment in different tasks (complex and digital activities of daily living), training programmes for different tasks, software support of different tasks