

Implementation of a “Living Lab” as an academic-practice partnership to improve dementia care

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Objective

Bridging the gap between clinical practice and research in health care is a challenging task. Partnerships between care practice and research may facilitate the collaboration and implementation of evidence-based interventions [1]. The Living Lab in Ageing and Long-Term Care, an academic-practice partnership developed at Maastricht University 25 years ago [2], is currently being adapted and implemented in German dementia care. A scoping review and a qualitative study were conducted to learn from experiences of international academic-practice partnerships and to identify preconditions and requirements for the adaptation and implementation of a German “Living Lab Dementia”.

Methods

Qualitative study

We conducted focus groups and individual interviews to explore the perspectives of stakeholders on linking care practice and research in the „Living Lab Dementia“.

- Participants: People with dementia, informal carers, health and nursing care professionals, researchers
- Data collection: Online focus groups or individual interviews with semi-structured interview guides
- Data analysis: Thematic framework analysis

Scoping Review

We conducted a scoping review in accordance with guidance for conducting scoping reviews by the JBI Manual for Evidence Synthesis and PRISMA Extension for Scoping Reviews.

- Registration: Open Science Framework [3]
- Aim: To provide an overview on approaches to enhance the mutual exchange between research and professional nursing practice
- Search: MEDLINE, CINAHL, Cochrane Library
- Data synthesis: Narrative description, TIDieR checklist

Results

Qualitative study

Key results:

- 10 online focus groups and 5 individual online interviews
- 35 participants representing care practice, research, and people with dementia
- Communication and management of expectations are crucial to successful collaboration
- Researchers should be able to adapt to care practice’s needs and take the lead in shaping the collaboration

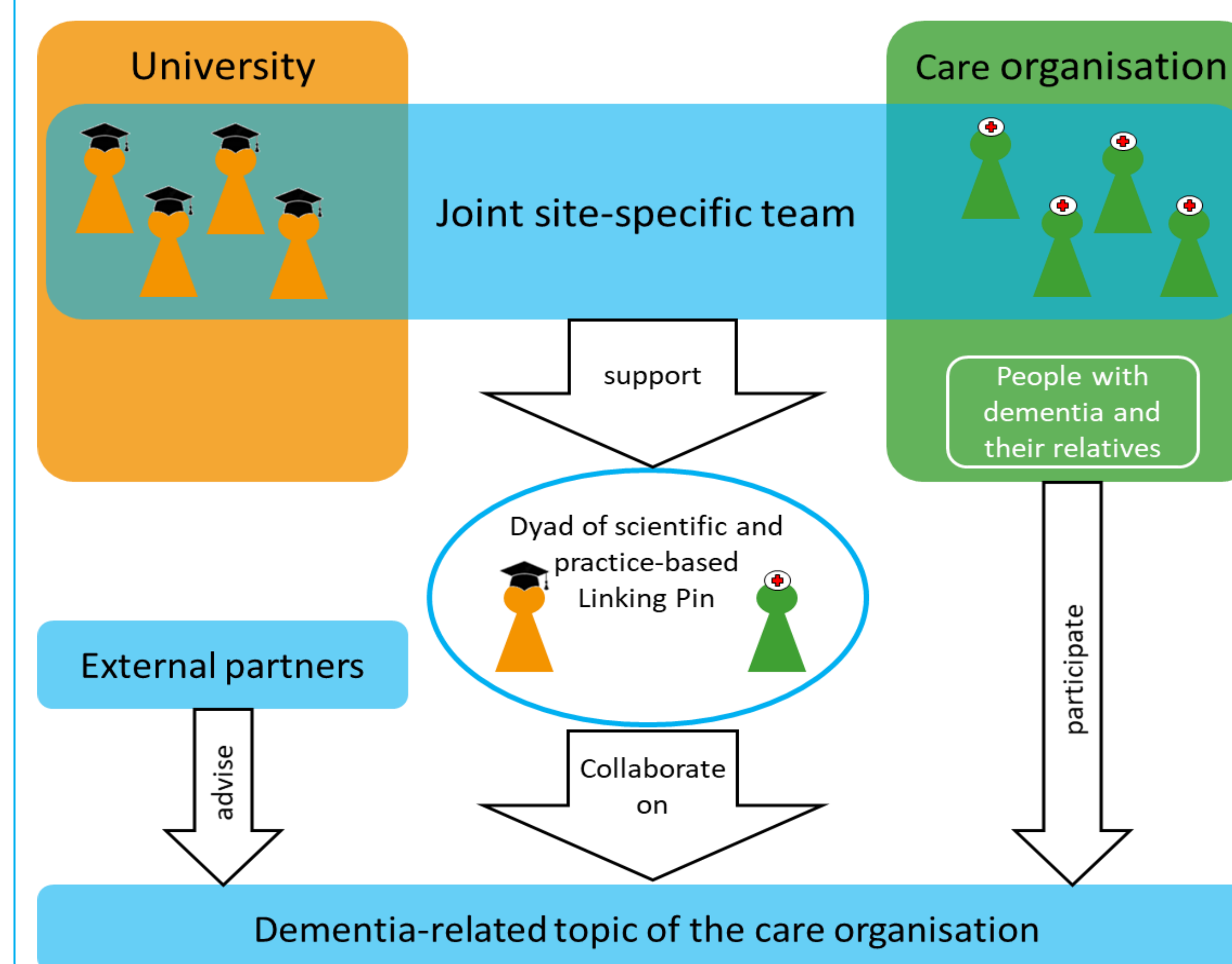
Scoping Review (preliminary)

- In total: 17 approaches included
- Country: United States of America (8), Canada (4), the Netherlands (2), United Kingdom (2), Sweden (1)
- Setting: Acute care (8), home care (5), long-term care (3), community care (3), intensive care (1)
- Key roles: Linking Pins, Translation fellows, Representatives as liaison, External and internal facilitators, Clinical-academic nurse, Professor in residence

International collaboration

- The “Living Lab in Ageing and Long-Term Care” by Maastricht University is a model for academic-practice partnerships in a variety of countries all over the world, including Europe, the United States, China and Australia.
- The adaptation and implementation of the German “Living Lab Dementia” is accompanied by a regular exchange between Maastricht University and other partners.
- The exchange relates to role models for the Linking Pins, shared responsibilities between practice and research partners, expectation management or sustainability aspects.

Living Lab Dementia



Working group

- In the course of implementing the “Living Lab Dementia”, the German Alzheimer Society founded the first nationwide dementia working group. People with a diagnosis of dementia and interest in dementia research are involved.
- The working group develops recommendations to involve the perspectives of people with dementia in Living Lab activities to improve dementia care within the participating care organisations.
- The working group will be open to support other dementia related research activities in Germany.

Conclusion

Results from the scoping review and the qualitative study informed the concept of the “Living Lab Dementia”, which is currently under investigation in collaboration with institutional and community care services in three regions in Germany. Each practice partner identified a dementia-related topic. The experience of this 18 months implementation phase will be used to consolidate and sustain the “Living Lab Dementia”. This could help to improve participation of clinical dementia care in dementia-related health and social research activities.

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