

Project ECHO Dementia

INITIAL SURVEY



Thank you for participating in Project ECHO Dementia. We'd like to collect some information about your practice and background, knowledge and comfort level in managing care for patients with Alzheimer's Disease and Related Disorders (ADRD), availability of services, and goals for joining the program.

You are being asked to complete this survey as a representative for your clinic. If you do not feel that you are in the best position to complete this survey, please contact Allyson Schrier (allysons@uw.edu)

We appreciate your time!

1) Your name:

Phone:

Email:

2) Clinic name:

Clinic address:

3) Number of years your clinic has been in practice?

Fewer than 3 years

3-5 years

5-10 years

10-20 years

More than 20 years

4) Clinicians at your clinic include

Physician (MD/DO)

Nurse Practitioner

Behavioral Health / Care Coordination

Physician Assistant

Medical Assistant

Other (please specify)

5) How large do you estimate your clinic panel to be?

Fewer than 500 individuals

Between 500-1000 individuals total

Between 1000-2000 individuals total

Greater than 2000 individuals total

6) What percent of your patients are aged 65 or older?

5% or fewer

5-10%

10-20%

More than 20%

7) What services are presently available within your clinic for patients with dementia and their families?

8) Which are the greatest challenges staff face when caring for patients with dementia?

Sharing the diagnosis with patient and family

Lack of compensated time to spend with them

Linking to available resources

Discussing driving

Assisting with behavioral challenges including resistance to care

Helping patient and family plan for the future

Care transitions

Other

9) When do you screen for memory loss/cognitive decline?

At Medicare annual wellness visit

When patient or family member expresses concern

When provider has concern

Other (please specify)

10) What percent of patients do you refer to specialists outside your clinic for dementia evaluation and care?

5% or fewer

5-10%

10-20%

More than 20%

What are main drivers of outside referrals?

11) Approximately how far do patients typically travel to receive specialty services?

Fewer than 25 miles

25-50 miles

50-100 miles

More than 100 miles

12) Do you have a clinical pathway for assessment? Yes No Don't know

13) Do you use the 99483 CPT Code? Yes No Don't know

14) Do you have standardized templates in place? Yes No Don't know

15) Do you have processes/tools in place for Advance Care Planning? Yes No Don't know

16) Do you have process/tools in place for Legal and Financial Planning? Yes No Don't know

17) What kinds of support services are available in your community for patients with dementia and their families?

18) What are the issues and pitfalls with existing programs?

19) What additional services and resources would benefit your community?

20) What topics would you like to see this ECHO program explore?