

PEER REVIEW HISTORY

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ARTICLE DETAILS

TITLE (PROVISIONAL)	Implementing Dementia Care Management into routine care: protocol for a cohort study in Siegen-Wittgenstein, Germany (RoutineDeCM)
AUTHORS	Thyrian, Jochen René; Boekholt, Melanie; Boes, Charlotte; Grond, Martin; Kremer, Stefanie; Herder-Peyrounette, Anja; Seidel, Katja; Theile-Schürholz, Anna; Haberstroh, Julia

VERSION 1 – REVIEW

REVIEWER	Anja Bieber Martin Luther University Halle Wittenberg, Institute for Health and Nursing Science
REVIEW RETURNED	29-Apr-2024

GENERAL COMMENTS	<p>Thank you for this interesting protocol which inform about a trial to implement dementia care management into routine care in a selected region of Germany.</p> <p>Information should be added if a reporting guideline was used in the preparation of the protocol.</p> <p>Abstract Page 3 line 24-26: „Primary outcomes are unmet needs at FU1 and FU2. Secondary outcomes are anti dementia drug treatment, neuropsychiatric symptoms and caregiver burden at fu1 and fu2.“ Upper and lower case letters of FU1 vs. fu1 should be taken into account.</p> <p>Article summary Page 4 line 18-19: Please check the quotation marks. Page 4 line 28: Please remove a dot.</p> <p>Background and rationale Page 5 line 10: The abbreviation pwd should be avoided throughout the whole manuscript (positive-language-an-alzheimers-society-guide-to-talking-about-dementia.pdf (hse.ie)). Page 5 line 14-23: The information on the German dementia strategy should be replaced by information on the need for dementia care management. Page 5 line 55-56: It should be added which participatory research methods were used.</p> <p>Methods Page 7 line 30: Which criteria were used to assess cognitive impairment? Page 7 line 34ff: Repetitions of the description of the intervention should be removed. It should be explained in which setting the</p>
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	<p>Dementia Care Managers are working (e.g. primary care, specialized care, memory clinics). Page 8 line 47: The sentences should be checked. P.9 line 27: The assessments are carried out taking into account the cognitive capacity of the participants. Does this mean that only patients who are able to answer the questions of the assessments independently can take part in the intervention? It can be assumed that people with moderate to advanced dementia and their informal caregivers have various unmet needs. It should be explained whether these groups of patients can receive the DeCM intervention. P.10 line 43: Please add a full stop at the end of the sentence. P.10 line 52-54: The sentence should be checked. P.11 line 57ff: It should be explained which descriptive methods and regression models are to be used to analyse the data.</p> <p>Expected results and discussion P.13 line 3ff: It should be discussed whether the setting in which Dementia Care Managers work is appropriate.</p>
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REVIEWER	Mick Kumwenda Betsi Cadwaladr University Health Board, Academic Unit
REVIEW RETURNED	04-Jun-2024

GENERAL COMMENTS	<p>In this protocol paper: Purwins D, Fahsold A, Quasdorf T, et al. Implementation of dementia care management in routine care (RoutineDeCM): a study for process evaluation BMJ Open 2023;13:e072185. DOI 10.1136/bmjopen-2023-072185, it was reported that DeCM was implemented in Germany as part of a national strategy to improve outcomes in dementia care in 2020 and has subsequently been followed by the RoutineDeCM, which should be completed before the end of this year.</p> <p>Publishing more protocol papers will add some value for those interested in carrying out quality improvement projects in DeCM. Otherwise, we should look forward to the results of RoutineDeCM.</p>
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VERSION 1 – AUTHOR RESPONSE

Reviewer: 1

- Information should be added if a reporting guideline was used in the preparation of the protocol.
 - *We refer to the STROBE guidelines now. In the study status section on page 11.*
- Abstract

Page 3 line 24-26: „Primary outcomes are unmet needs at FU1 and FU2. Secondary outcomes are anti dementia drug treatment, neuropsychiatric symptoms and caregiver burden at fu1 and fu2.“ Upper and lower case letters of FU1 vs. fu1 should be taken into account.

 - *We corrected that.*
- Article summary
- Page 4 line 18-19: Please check the quotation marks.
 - *The article summary has been changed.*
- Page 4 line 28: Please remove a dot.
 - *We removed it*
- Background and rationale
- Page 5 line 10: The abbreviation pwd should be avoided throughout the whole manuscript (positive-language-an-alzheimers-society-guide-to-talking-about-dementia.pdf (hse.ie)).

- *We deleted the abbreviation PWD in the manuscript*
- Page 5 line 14-23: The information on the German dementia strategy should be replaced by information on the need for dementia care management.
 - *The study is funded in the line of the National Dementia Strategy and as such we think it is important to refer to it. The reasons are laid out in thi strategy, that is while it is cited.*
- Page 5 line 55-56: It should be added which participatory research methods were used
 - *We have included this information now by citing the appropriate references.*
- Methods
 - Page 7 line 30: Which criteria were used to assess cognitive impairment?
 - *We added the sentence “Cognitive impairment was self-reported and/ or the reason for visit in routine care.” On page 6 in the “participants” section.*
- Page 7 line 34ff: Repetitions of the description of the intervention should be removed. It should be explained in which setting the Dementia Care Managers are working (e.g. primary care, specialized care, memory clinics).
 - *We have provided this information in the “study setting. It says: “The study is organized in the health care system of the German county of Siegen-Wittgenstein, North-Rhine-Westphalia. Stakeholders from different health providers (Alzheimer Gesellschaft, clinic, ambulatory physicians, nursing services) jointly recruit participants and deliver the intervention in their respective setting”*
- Page 8 line 47: The sentences should be checked.
 - *We checked the sentences.*
- P.9 line 27: The assessments are carried out taking into account the cognitive capacity of the participants. Does this mean that only patients who are able to answer the questions of the assessments independently can take part in the intervention? It can be assumed that people with moderate to advanced dementia and their informal caregivers have various unmeet needs. It should be explained whether these groups of patients can receive the DeCM intervention.
 - *Cognitive ability to answer the questions is not an inclusion criteria (or the inability an exclusion criteria) for participation. We added a sentence in the study procedure that now says: “Furthermore, the trained interviewer will ask caregivers or try to retrieve information from other sources in case the participant’s cognitive ability seems to be insufficient for providing valid information.”*
- P.10 line 43: Please add a full stop at the end of the sentence.
 - *We added this.*
- P.10 line 52-54: The sentence should be checked.
 - *We checked this.*
- P.11 line 57ff: It should be explained which descriptive methods and regression models are to be used to analyse the data.
 - *We have added some more details about the statistics planned now.*
- Expected results and discussion
- P.13 line 3ff: It should be discussed whether the setting in which Dementia Care Managers work is appropriate.
 - *The focus of the paper is to evaluate the effects. We now have refered to the process evaluation, which is a prt of the project, but distinct to the study described here. The focu of the protocol is the effect on the person with dementia and/ or her/his situation. The process analysis will delibver results aiming at implementation variables like the setting.*

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- Reviewer: 2
 In this protocol paper: Purwins D, Fahsold A, Quasdorf T, et al. Implementation of dementia care management in routine care (RoutineDeCM): a study for process evaluation BMJ Open

2023;13:e072185. DOI 10.1136/bmjopen-2023-072185, it was reported that DeCM was implemented in Germany as part of a national strategy to improve outcomes in dementia care in 2020 and has subsequently been followed by the RoutineDeCM, which should be completed before the end of this year. Publishing more protocol papers will add some value for those interested in carrying out quality improvement projects in DeCM. Otherwise, we should look forward to the results of RoutineDeCM.

- *Thank you for this comment. We do think that it is appropriate to describe the protocol in detail as it is different from the protocol regarding the process evaluation. We have added some more information about this by adding the paragraph: "This study protocol refers to the analysis of the effect of the intervention and thus the comparability of efficacy in comparison to other interventions. It is accompanied by a process evaluation that focusses on implementation. The protocol has been published also [Purwins et al] and refers to an embedded case study focusing on the stakeholders of the implementation. Both studies are distinct and will together provide qualitative and quantitative evidence for improvement of implementing Dementia Care Management."*