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Transforming nursing home-based day care for people with dementia into socially integrated community day care: Process analysis of the transition of six day care centres



A.M. van Haeften-van Dijk a, F.I.M. Meiland a,b, L.D. van Mierlo b, R.M. Dröes a,*

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ABSTRACT

Background: The community-based Meeting Centres Support Programme for people with dementia and their carers has been proven more effective in influencing behaviour and mood problems of people with dementia and improving sense of competence of carers compared to nursing home-based day care centres for people with dementia. Six Dutch nursing home-based day care centres were transformed into Community-based day care centres with carer support, according to this Meeting Centres model.

Objectives: To determine which factors facilitate or impede the transition to Community-based day care.

Design: A process evaluation was conducted with a qualitative study design.

Settings: Six nursing home-based day care centres transformed into Community-based day care centres for people with dementia and their carers.

Study participants: Stakeholders (n = 40) that were involved during the transition.

Methods: Factors that facilitated or impeded the transition were traced by means of (audiotaped and transcribed) interviews with stakeholders and document analysis. All data were coded by two independent researchers and analyzed using thematic analysis based on the Theoretical framework of adaptive implementation.

Results: Six nursing home-based day care centres successfully made the transition to Community-based day care with carer support. Success factors for the start of the project were: the innovation being in line with the current trend towards more outpatient care and having motivated pioneers responsible for the execution of the transition. Barriers were difficulties reaching/recruiting the target group (people with dementia and carers), inflexible staff and little or no experience with collaboration with community-based care and welfare organizations. Facilitating factors during the implementation phase were: finding a suitable location in the community, positive changes in staff attitude and adoption of the new vision, and good cooperation with care and welfare organizations. Barriers were insufficient involvement of, and support from the managers of the responsible organizations, and communication problems with referrers of other organizations, including the GPs and case managers.

E-mail address: rm.droes@vumc.nl (R.M. Dröes).

^a Dept of Psychiatry, VU University Medical Center, Amsterdam, The Netherlands

^b Dept of General Practice and Elderly Care Medicine, VU University Medical Center, Amsterdam, The Netherlands

Abbreviations: CO day care, Community-based day care centre for people with dementia with carer support; MSCP, Meeting Centres Support Programme.

^{*} Corresponding author.

Conclusions: The transition from nursing home-based psychogeriatric day care support to a community-based combined support programme for people with dementia and their informal carer is shown to be feasible. Successful implementation of this community-based combined support programme requires – besides motivated pioneers, a change in staff attitude and working style, a suitable pleasant location and collaboration with other care and welfare organizations – special attention for effective communication with the target user group and the referrers, and also how the management of the pioneer organizations can facilitate the staff during the transition process.

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What is already known about the topic?

- The community-based Meeting Centres Support Programme (MCSP) for people with dementia and their carers is more effective as compared to nursing home based day care centres for people with dementia.
- Until now, very few nursing home-based day care centres for people with dementia have decided to implement the proven effective MCSP.
- Knowledge on how to transform health care services according to an evidence-based model is scarce.

What this paper adds

- This process evaluation shows that the transition of nursing home-based day care centres for people with dementia into community-based day care with carer support according to the MCSP-model is indeed feasible, also for people in the more advanced stages of dementia.
- This paper confirms some of the facilitators and barriers known from implementation research (such as cooperation, finances) and adds new knowledge on influencing factors for successful implementation, more specifically on a micro level (e.g. flexibility of staff in adopting a new way of working in a non-institutional environment, need for differentiation in participant groups of different severity levels of dementia).
- This paper provides a structured overview of factors influencing the transition from usual day care to a community-based support programme for dyads of people with dementia and carers. This will help providers of this type of care make the transition successfully so that more community-dwelling people with dementia and their carers can benefit from it.

1. Background

For over 20 years the Meeting Centres Support Programme (MCSP) for people with dementia and their informal carers has offered effective combined support for community-dwelling people with dementia and their informal carers in the Netherlands (Dröes et al., 2000, 2004). The added value of combined support for community-dwelling people with dementia and their carers has been demonstrated in earlier studies (Brodaty et al., 2003; Olazaran et al., 2010; Smits et al., 2007; Van't Leven et al., 2013). Examples of effective combined interventions are the Early-Stage Memory Loss Support Groups (Logsdon

et al., 2010), the Tailored Activity Programme (Gitlin et al., 2008) and the Community Occupational Therapy in Dementia (COTiD) (Graff et al., 2007). Combined support is found to be effective because positive results in the person with dementia (e.g. improved behaviour and mood) also influence results in the carer (e.g. improved feelings of competence and burden) and vice versa (de Vugt et al., 2004; van der Lee et al., 2014). The combined support programme of MCSP consists of a varied activity programme for people with dementia, including recreational and creative activities, cognitively stimulating activities and psychomotor therapy. Informative meetings and (ongoing) discussion groups are provided for carers. Both the person with dementia and the carer can utilize a weekly consultation hour and join a regular 'centre meeting' in which they are invited to express their experiences, needs and wishes regarding the support and activity programme. Coordination of care is also available when needed. The support programme is offered in easy-access buildings like community centres, which enhances social integration. This proves to be very important to people with dementia (Clare et al., 2003; van der Roest et al., 2007). At present there are some 120 Meetings centres in the Netherlands and an additional 20 are being developed. The MCSP has also been adopted in several countries inside and outside Europe. The European implementation, efficacy and cost-effectiveness are currently being studied (see www.meetingdem.eu). The Meeting centres offer the support programme in close cooperation with local care and welfare organizations, in order to reduce fragmentation of care. Repeated multicentre studies have shown that the Meeting centres are (cost-)effective compared to regular day care centres in the nursing home. Participants with dementia (from now: participants) had less behaviour and mood problems and better self-esteem. Their carers felt less burdened and more competent to care for their relative. Furthermore, there was a trend of delayed nursing home admission (Dröes et al., 2000, 2004).

Despite these promising results and the socioeconomic benefits of the MSCP, very few regular day care centres for people with dementia located in the nursing home (nursing home-based day care centres) have decided to make the transition to Community day care with carer support (from now: CO day care) according to the Meeting centres support programme model. In the Netherlands, day care for people with dementia is generally provided by these nursing home-based day care centres that are mainly

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