More self-reliance and autonomy for nursing home residents with dementia: a multidisciplinary intervention (SOCAV)

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Introduction: Traditional focus of nursing is based on a biomedical acute care model, that limitedly addresses psychosocial needs. Neglect of psychosocial needs can exacerbate behavioral problems in dementia, and leading to losses of: self-reliance, autonomy, selfcare, decision-making, and social engagement. Holistic psychosocial care models reduce behavioral problems and maintain personhood. A positive approach is multidisciplinary person-centered care based on educating and supporting staff and peer coaches, resulting in enhanced quality of life, self-reliance, and autonomy.

Objectives: The SOCAV project aims to evaluate a multidisciplinary intervention of OTs, nurses coached by peer coaches, and support by staff, focusing on improving the self-reliance and autonomy of nursing home residents with dementia. It’s a “Dignity & pride” project of the Dutch Ministry of Health.

Methods: A longitudinal study with repeated measurement design, with baseline, 3, 6, 9 and 12-month measurements. Primary outcome: self-perceived performance and satisfaction of the Canadian Occupational Performance Measure, on meaningful activities defined by the residents (with support of family caregivers), and scored from the perspective of the resident and responsible nurse. Secondary outcome: residents’ behavior score on the Dementia Care Mapping, and diaries findings of 1) nurses’ reflections on interactions with people with dementia, and own learning process; 2) peer-coaches’ reflections on interaction with the nurses, and own learning process.

Results: Changes in attitudes, behavior, and satisfaction of people with dementia, nurses, and coaches, educational and learning processes, barriers/ facilitators experienced will be presented.

Conclusion: Feasibility intervention, and recommendations for future implementation and health policy will be concluded.