

RESEARCH OBJECTIVE:

We evaluated the effect of implementation of a multifaceted management programme on the compliance with international practice standards for lithium monitoring in patients under the care of Psychiatry of Old Age (POA), Sligo Leitrim Mental Health Services in the North West of Ireland.

METHODS:

Results from a prior audit performed in February 2020 involving a cohort of 18 patients prescribed lithium under the care of POA were analysed and compared to accepted standards. The guideline used as the benchmark for compliance was the National Institute for Clinical Excellence (NICE) guidelines on the use and monitoring of lithium therapy, as published in 2014. Several deficits were found and therefore a designated Lithium Management Programme was established. A subsequent audit, performed using a simplified audit tool incorporating the NICE guidelines, delivered results which were directly compared to the initial findings and analysed to evaluate the effect of the implemented management programme.

PRELIMINARY RESULTS OF THE ONGOING STUDY:

In comparison with findings from 2020, there had been a significant improvement in most facets of lithium management and compliance to practice standards. Of particular note was the improvement of biochemical monitoring, side effect screening, polypharmacy surveillance, patient education and interdisciplinary communication.

CONCLUSION:

The launch of a dedicated Lithium Management Programme with specific features aimed at identifying and addressing poor compliance with monitoring guidelines has led to improved adherence to accepted international practice standards. Our model provides a dynamic, multi-layered system which paves the way for better patient outcomes, timely access to care and furthering education for patients and staff members.

514 - Practice-based intervention to implement Person Centered care in long-term care facilities for people with Dementia

Claudia Van Der Velden, MSc, Henriëtte G. Van Der Roest

Healthcare professionals working with people with dementia (PWD) have increasingly been moving away from task-oriented models of healthcare towards person-centered care (PCC). Several studies have showed positive results of PCC on quality of life of PwD. Also, it shows positive effects on self-esteem and work satisfaction of healthcare professionals (HCP).

We developed an successful practice-oriented intervention to implement PCC in long-term care facilities (LTCFs), based on the theory of Kitwood. The intervention consists of different components and learning methods:

- 1) Management of the facility is trained. They have an important role in motivating HCPs and safeguarding PCC-policy in the future.
- 2) Dementia Care Mapping (DCM)-observations are carried out to gain understanding of the LTCF. DCM is an evidence-based observational method and aims to give a good understanding of the quality of life of PwD.
- 3) The training of staff starts with a Kick-off-meeting. During a 'Mirror theater' with professional actors, an act representing a familiar care situation is performed. Staff participates in the act to become aware of PCC. The kick-off also serves as a warming-up on PCC knowledge.
- 4) After this, staff complete an interactive e-learning on the basic theory of PCC. The e-learning contains practical videos and exercises.

- 5) Finally, staff follow two consecutive, practical-oriented team-trainings. They will learn what PCC means for their daily practice and how to reflect on it. The most effective part is the reflection on examples of their own clients, and get more aware of their own behavior. In between trainings, HCP will carry out a practice exercise and provide feedback in session two.

In an early stage of the intervention we discuss the possibilities and adjust the approach to the needs and situation (culture, level of knowledge etc.) of the LTCF. Involvement of all the staff in the intervention is essential, so everyone speaks the same 'language' and staff can rely on each other. Based on experience, these factors contribute to a sustainable way to implement PCC in LTCFs.

515 - Developing an observational instrument for people with somatic care needs to review Person-Centred Care in Nursing Homes

Claudia van der Velden, Elsemieke van Belzen, Henriëtte van der Roest

Healthcare professionals working with people with dementia (PwD) increasingly apply a person-centred care (PCC) model instead of task-oriented models of healthcare. Several studies have shown positive results of PCC on the quality of life of PwD. The PCC-model has not only shown positive results in the quality of life of PwD, but also for people with somatic needs.

Dementia Care Mapping (DCM) is a dementia-specific observational tool that is used worldwide in long-term care facilities (LTCFs) for developing PCC-practice, but also to review staff development- and training needs. LTCFs providing care for people with somatic needs also have the need of an instrument like DCM, but nothing specific is available. In this project we develop, together with a Dutch nursing home and DCM-Netherlands, a method that suits this target group with the same aims as DCM.

An iterative design has been applied. Based on a literature search and experience of the project group, a method has been developed. This method consists of three main components: (1) group observation with components of DCM, (2) structured interviews with residents and (3) feedback sessions with professionals and individual feedback for residents. To determine if the method meets the needs of practice, several expert groups (residents, informal caregivers and nursing staff) were asked about the content and feasibility using interviews/focus group. Furthermore in a pilot, the method will be tested by experienced DCM-mappers in practice, based on the outcomes of this pilot adjustments will be made.

We are currently in the pilot phase and expecting to finalise the method with instruction manual coming summer. First feedback of the project- and expert groups are very positive. The nursing staff endorse the need of this instrument, and also feel it contributes to a better PCC-attitude. On the other hand, they emphasize that implementation can be challenging, because of time constraints in daily care.

516 - A more integrative approach to better match treatments to long-term care residents: Preliminary results of a meta-analysis

Abstract

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Background: Depression is common among long term care (LTC) residents and has a considerable impact on their quality of life. Therefore, there has been an increased interest in interventions aiming at the reduction of depression among LTC residents. These interventions could be described as formal depression care and include psychosocial interventions (e.g., Creative Arts Interventions), psychotherapeutic interventions (e.g., Life Review) and/or (neuro-)biological interventions (e.g.,