Innovations in the delivery of Care of Older People

Living well with complex co-morbidities; dementia and frailty

The PEARL programme began as a pilot project back in 2008 with 10 care homes to establish whether, with a fixed set of evidenced/research based criteria, training and support, we could move homes that were providing good 'fundamental' care to providing excellent specialised Dementia Care.

The original project was based around 100 criteria that were known to improve well-being for people living with dementia either from experience or from research that I had reviewed.

The programme takes each home approximately 12 months to complete with the support of a Dementia Care Project Manager and once the home feels they have achieved the required standard, members of the Dementia Services Team will visit the home unannounced to score against the criteria to establish if the home have achieved PEARL status.

The validation is carried out by experienced clinicians in dementia care who observe practice through Dementia Care Mapping (DCM), talk to residents, relatives and staff and review documentation to ensure pro-active approaches are being taken and residents are being accurately assessed.

A major outcome of this initial pilot was that an average 52% reduction in anti-psychotic medication was achieved across 8 homes that were validated. A study of Phase 2 of the project revealed a 48% reduction (please see full clinical outcomes in Phase 2 report)

As far as we are aware this was the first programme of its kind that had been developed internally by its own organisation that followed set criteria, training and mentorship and had a dedicated dementia care team.

We also developed an innovative training programme called Resident Experience Training in 2007 which is an intense 1:2 training day (Baker 2008)

In 2008, we worked with Professor Dawn Brooker (University of Worcester, Association of Dementia Studies) to review the criteria and align it to her published work around the VIPS Model (Brooker 2007). The programme now has 154 criteria and the team has grown from a team of 2 to a team of 24 working across 250 dementia care units. All dementia care policies are aligned to the criteria.

There are now 70 validated PEARL homes and a further 60 undertaking the programme at various stages with the remainder of the homes on a planned rollout to become accredited by 2017.

We have continued to see huge anti-psychotic reductions as well as significant outcomes in reduction of depression, falls, pain and distressed reactions.

One of the many things that the PEARL programme has achieved is the culture transformation within the home. Even though we had specific dementia care policies, person centred care training and DCM trained staff, homes would not always adopt or follow the policies and were quite task focussed, making sure that everybody looked and smelled lovely and had their meals at the right times etc but sometimes this resulted in quite noisy and
hurried environments which in turn resulted in residents sometimes responding to their lack of choice or independence by lashing out or shouting which was then seen as ‘challenging behaviour’. Staff have been trained to reconsider this terminology and reframe it as a distressed reaction helping them to reflect on what we may have missed within our own approach to possibly cause the distress.

PEARL - Positively Enriching And enhancing Residents Lives

Link to PEARL on Website: http://www.fshc.co.uk/our-services/care-types/PEARL-dementia-care

References
