

#### 411 - Palliative Care in Dutch Green Care Farms and Innovative Small-Scale Living Facilities

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**Background:** Dutch Green Care Farms and innovative small-scale facilities for residents with dementia focus on promoting resident abilities and engaging residents in activities to maintain resident quality of life up until death. Palliative care approaches are needed in these innovative facilities to maintain quality of life and quality of care. To our knowledge, there are currently no literature reviews discussing palliative care in these facilities or exploring palliative care in Green Care Farms in the Netherlands.

**Research Objectives:** To identify current palliative care approaches at innovative small-scale facilities and Dutch Green Care Farms for residents with dementia.

**Methods:** This two-part study includes a scoping review focused on identifying research regarding palliative care approaches in innovative small-scale facilities. Thematic analysis based on van der Steen et al.'s (2014) domains for palliative care in dementia were used to analyze the final papers included in the review. The second part of the study included qualitative semi-structured interviews of six managers and two front-line caregivers at five care farms in the Netherlands in 2019 focused on palliative care approaches in their facilities.

**Preliminary Results of Ongoing Study:** Eight papers were included in our final scoping review. Most facilities in these papers focused on maximizing comfort and the residents remaining abilities at end-of-life while providing person and family-centred care. Similar findings were seen in the preliminary results of the interviews, which indicate that all farms use palliative care approaches while maximizing physical and psychological functioning and engagement in activities. Care farms also reported promoting family involvement, preventing hospitalizations, and ensuring family and resident involvement in decision-making at the end-of-life.

**Conclusion:** By providing palliative care approaches, innovative facilities provide a home for life and improved quality of life for residents up until death. Innovative small-scale facilities including green care farms prioritize resident autonomy and choice, minimizing discomfort and family-centred care at the end-of-life. Additional research surrounding barriers to palliative care, quality of end-of-life care, and comparisons of innovative facilities to traditional long-term care homes are needed to have a more comprehensive picture of palliative care in these innovative facilities.

#### 412 - Empowerment for people living with dementia: an integrative literature review

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**Introduction:** Although the concept of empowerment seems useful for good care and support for people living with dementia, there is a lack of understanding as to how to define this concept. Therefore, insight is needed in what empowerment means for people living with dementia.

**Methods:** We performed an integrative literature review (PubMed, CINAHL, PsychINFO), including articles that addressed empowerment for people living with dementia in their title or abstract. Using qualitative data analysis software ATLAS.ti, we applied open codes to describe all relevant aspects of included articles. Common themes and categories were identified using inductive reasoning and constant comparison.

**Results:** Sixty-nine articles were included. We identified four themes: (1) description of the state of being empowered, (2) the process of empowerment, (3) contribution of the environment to the empowerment process, and (4) effects on other variables. We combined these results with the conceptual framework of our previous qualitative study on the definition of empowerment for people

living with dementia based on stakeholders' perspectives into a revised conceptual framework. Subsequently, the combined information of both studies was visualized in a revised conceptual framework.

**Conclusion:** This literature review provides more details as to the role of the environment for empowerment of people living with dementia and suggests that empowerment can be considered a dynamic process, taking place through interaction between the person living with dementia and their environment. Our revised conceptual framework of empowerment can serve as a basis for future studies on empowerment for people living with dementia, and to support (in)formal caregivers in the empowerment process.

### **413 - Delivering tailored, holistic support to people living with dementia and their families: a new primary care intervention**

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**Background:** Currently, post-diagnostic dementia care and support in England and Wales is highly variable, and often insufficient in meeting the needs of people living with dementia and their families.

**Objective:** To develop and deliver a new primary care based intervention to enable people living with dementia and their carers to live as well as possible from the point of diagnosis to end of life.

**Method:** We conducted a survey and interviews with managers and commissioners of dementia services, and in-depth qualitative studies of six different existing service models to understand current post-diagnostic support in England and Wales. We also reviewed relevant literature on the management of long-term conditions and models of post-diagnostic support. Using the findings, a new intervention has been produced through a co-development process involving stakeholder task groups, our patient and public involvement group (the Dementia Care Community), and the multidisciplinary programme management board.

**Results:** Our findings highlighted key priorities from the perspective of people living with dementia, their carers, and professionals which focus on the need for personalised, proactive and holistic care. We also identified a number of challenges in the provision of good quality post-diagnostic support, and examples of how these could be overcome to deliver best practice. Importantly, we found that no one service model delivered all aspects of post-diagnostic dementia support well.

The new intervention will focus on three main areas: developing systems for delivering evidence-based support; delivering tailored care and support; and building capacity and capability. A clinical dementia expert, a specialist nurse or similar professional with dementia expertise, will be based in primary care to lead and facilitate change across these three interlinked areas to develop systems and services that meet the needs of all older people living with dementia.

**Conclusion:** Our new intervention will now be tested in practice in a feasibility and implementation study.

### **414 - Supporting staff delivering person-centered care to people with dementia in Dutch nursing homes**

#### **Author list**

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#### **Background**

Positive evidence has been found for person-centered care provisioning (PCC), the level of person-centeredness of care is positively associated with residents' quality of life, quality of care and wellbeing.