

FITS into Practice: Developing Dementia Specialist Care Homes

Translating research into practice in reducing the use of anti-psychotic medication in care homes

Background:

The original Focussed Intervention Training and Support (FITS) intervention (Fossey et al, 2006) used an in-house 'FITS therapist' to train and support care home staff and reduce the inappropriate prescription and use of anti-psychotic medications, by providing a person-centred framework for understanding and caring for people with behavioural symptoms.

Although it achieved positive results, translating the research into everyday practice is the real challenge. Between April 2012 and April 2014 the Association for Dementia Studies worked with the Alzheimer's Society to design, implement and evaluate an intervention that would remain true to the original FITS programme but could be delivered across a large number of care homes.



About the Association for Dementia Studies:

The Association for Dementia Studies is an active research and education centre. Our multi-professional team are experts in the field of person-centred dementia care and support.

Through research, education, consultancy and scholarship, we make a cutting-edge contribution to building evidence-based practical ways of working with people living with dementia and their families that enables them to live well.



Key features of the FITS into Practice programme included:

- Two Dementia Practice Development Coaches (DPDCs) delivered an intensive nine-month education and supervision programme to care home staff designated as Dementia Care Coaches (DCCs).
- Training and supervision focussed on: reviewing anti-psychotic prescriptions for residents; psychosocial alternatives to managing behavioural and psychological symptoms in dementia; modelling person-centred care; training and support of staff teams to achieve person-centred care.



The original FITS research was conducted at King's College London, in association with Oxford University, University of Newcastle and Oxford Health NHS Trust.

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Evaluation:

Qualitative and quantitative data was gathered from multiple stakeholders with a view to ascertain the impact of the intervention on residents, staff and care homes, and also the barriers and facilitators of implementing the FITS into Practice programme overall.

Data included:

- Resident anti-psychotic prescriptions and goal attainment
- DCC knowledge, attitudes and confidence questionnaires
- DCC training evaluations
- DPDC reflective diaries and interviews
- Case studies of 9 participating care homes including interviews with DCCs, home managers and care home staff.

Facilitators and barriers to implementation

To achieve maximum benefit care home organisations and management needed to provide role clarity and protected time for the DCCs to implement FITS in their care home. Where this did not occur, DCCs struggled and implementation was significantly reduced.

The level of practical support from management within the care home made a significant difference to implementation by DCCs.

Implementation was more successful when external factors, such as the approach of GPs and local community mental health teams was consistent with the FITS approach.

Findings:

There was a 30.5% reduction in antipsychotic prescriptions for residents from baseline to the end of the intervention.

Residents whose medication was reviewed were more alert, communicative and active, with improvements in mobility, eating and sleeping.

Participating DCCs showed a statistically significant improvement in attitudes and knowledge about dementia

Very positive changes in care practice were seen in care homes whose DCC completed the programme. These included: improved physical environment, improved staff team engagement, increased activity and engagement between staff and residents, improved relationships with family and enhanced reputation with regulators and local commissioners.

Support provided by DPDCs through training and supervision was highly valued and influential.

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