

MeetingDem

Adaptive implementation and evaluation of the Meeting Centres Support Programme in Europe.

Background:

MEETINGDEM (2014-2017) aimed to implement and validate the successful Dutch Meeting Centres Support Programme for community-dwelling people with mild to moderately severe dementia and family carers in three EU countries: Italy, Poland and the UK.

Meeting Centres provide a social day club for people with dementia, information meetings, discussion groups for carers, and individual consultations and plenary meetings for both in local community centres.



Meeting Centre participants in Poland

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.



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Implementation method:

- In each country an Initiative Group of organisational collaborators and user representatives was formed;
- Potential facilitators and barriers to implementing the Meeting Centre Support Programme were identified;
- An implementation plan, practical guide and toolkit were developed using Dutch materials;
- Staff were trained and 15 Meeting Centres were established – 9 in Italy, 4 in Poland and 2 in the UK.

Evaluation:

9 Meeting Centres participated in a 6-month controlled pre/post evaluation of the impact of the Meeting Centres compared to 'usual care'. The evaluation looked at:

- Behaviour, mood and quality of life for people with dementia;
- Carers' sense of competence, mental health, loneliness, distress and burden;
- Cost-effectiveness and user satisfaction.

Findings:

Implementation – The components and vision of the Meeting Centre Support Programme were maintained. Country-specific requirements resulted in variations in inclusion criteria, frequency of programme components, and culture specific activities.

Facilitators to implementation – added value of the Meeting Centre Support Programme; evidence of its effectiveness; matching the needs of the target group; enthusiastic local stakeholders; suitable staff. **Barriers** – competition with care/welfare organisations; scarce funding.

Cost-effectiveness – After six months Meeting Centre participants showed positive effects on quality of life; there was less carer burden; the benefits were associated with higher costs (€990 per month per dyad compared to usual care); but the combined Meeting Centre cost was only €3 per hour more. Evidence suggests that for quality of life Meeting Centres may be cost-effective.

User satisfaction – High satisfaction with Meeting Centres and high attendance; activities for people with dementia are functionally activating and provide an important means of social and emotional interaction.

Conclusions:

- The Meeting Centre Support Programme is transferable across countries;
- It is highly rated by users;
- Benefits include improved quality of life and mental health for people with dementia and carers against reasonable additional costs;
- Potential longer term savings require investigation;
- Dissemination in Europe and beyond is recommended.

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