

Seeing the whole person: the effectiveness of the BRighTER DAWN programme on care for people with dementia in care homes

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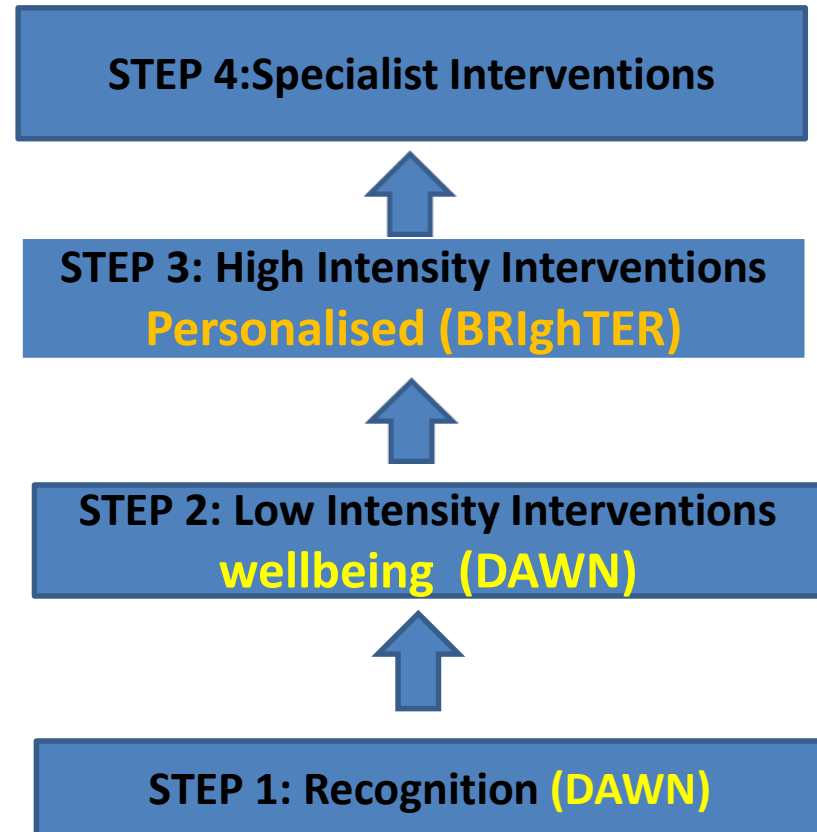
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What does this approach involve ?

- Combines 2 **evidence based** mental health treatments in a **stepped care** approach
- Training programme for the team developed as:
 - **Dementia Assessment of Wellbeing & Need (DAWN)**
4 step approach (based on Ballard , 2009) – 1 day team training
 - **Building Relationships & Individualised Tailored Evaluation and Response (BRighTER)**
12 step personalised assessment & intervention (based on Fossey 2006/ Fossey & James 2008) – 2 day team training
- Ongoing joint team supervision weekly
- Working with care home colleagues to plan and provide biopsychosocial responses to people who are distressed.

Creating a new team to work with 102 care homes across a county

- **Integrated** – 18 staff with a physical health background (DAWN) and 5.5 staff with mental health training (BRighTER)
- **In reach** – not a referral service
- **Joint training and supervision of staff with a physical or mental health background**
- **Supporting CH staff to improve care for people with multiple needs that are best addressed by an integrated approach**



BRighTER DAWN approach

Reach (Effectiveness Adoption Implementation Maintenance)

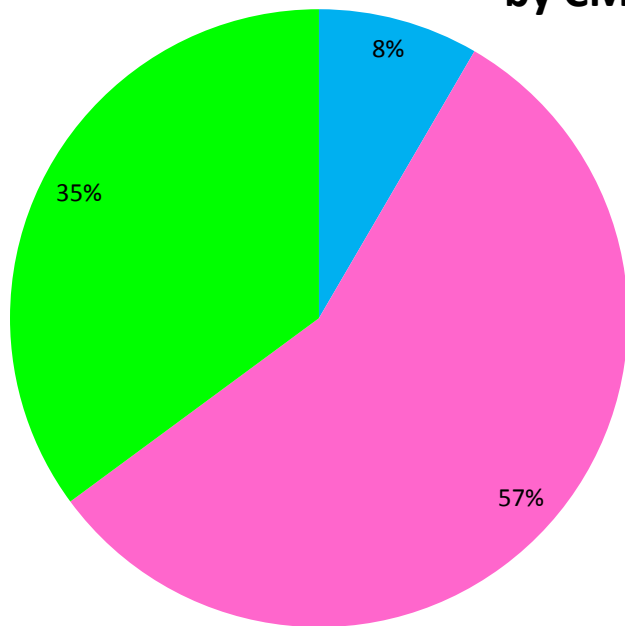
- 99 of the 102 homes in the county accepted this service
- 81 homes had residents who received BRIGHTER.
- 448 people received 507 episodes of care
- Provided access to mental health services to people who were previously not known to community teams.

Improving access to mental health assessment and treatment

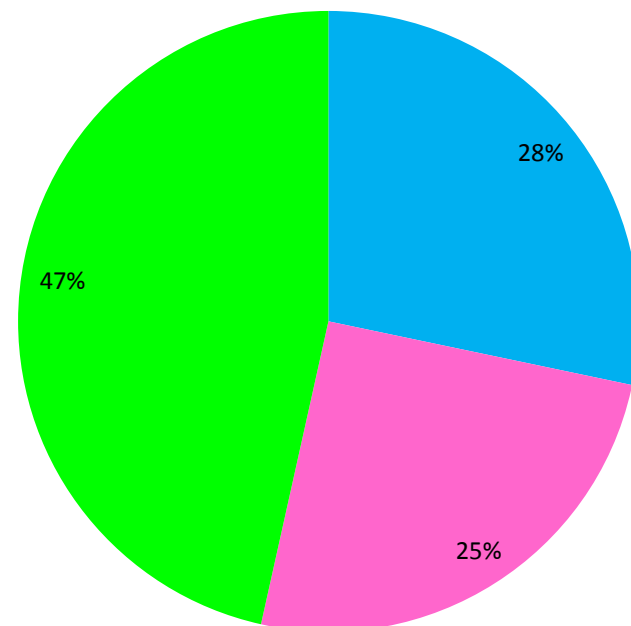
■ Active to CMHT at point of referral

■ Never known to CMHT

■ Previously known but no longer seen by CMHT



DAWN



BRighTER

What kinds of need were reported ?

DAWN

Agitation
Resistive to care
Aggression verbal
Aggression physical
Pain

BRIGHTER

Agitation
Physical Aggression
Resistive to care
Verbal Aggression
Depression

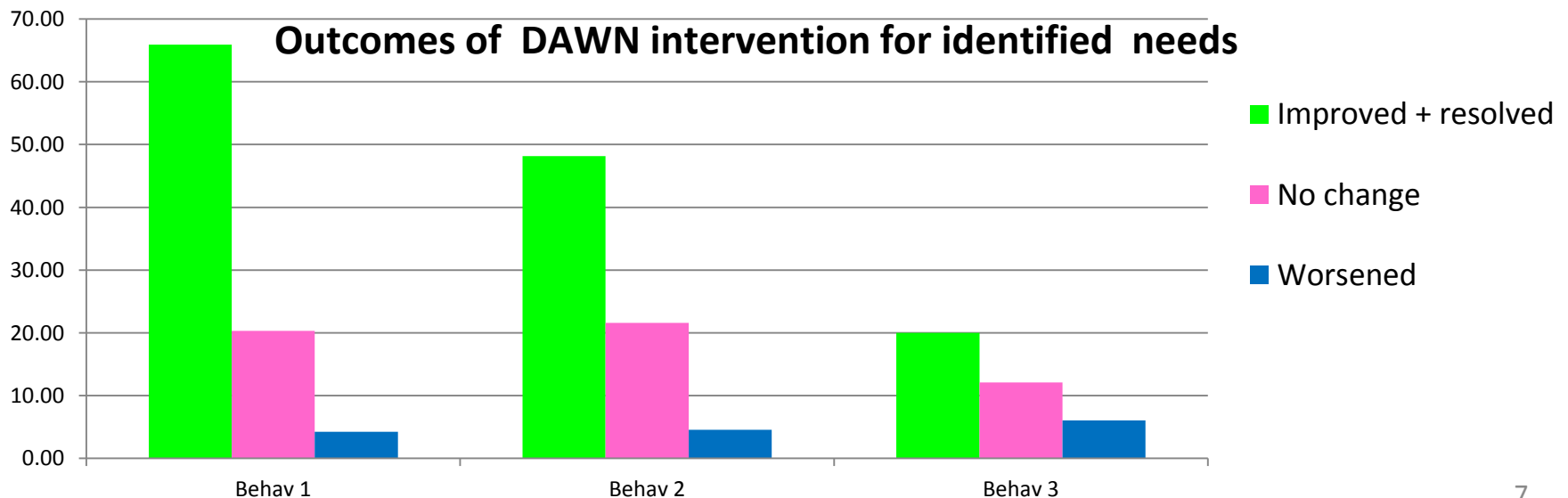
127 people had 1 identified need

219 had 2 identified needs

142 had 3 identified needs

Effectiveness: DAWN

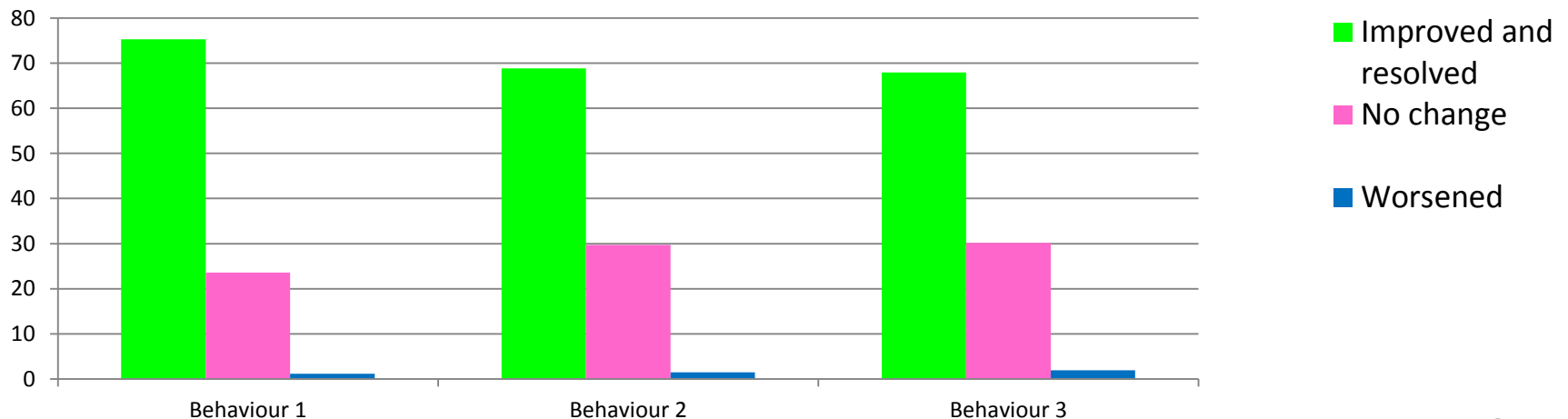
- **Team members supporting well-being needs :**
 - Evidence of good care home staff engagement
 - Improved pain detection and management from Abbey Pain score outcomes
 - Improvement of identified needs



Effectiveness : BRighTER

- **Team members supporting personalised interventions:**
 - 72% of residents had a 30% improvement in symptoms on Neuropsychiatric Inventory scores
 - Approach also benefitted people who experienced anxiety and/or depression.

Outcomes of personalised interventions for 3 behaviours (%)



Understanding team perspectives:

4 focus groups with 20 staff

DAWN

Recognising the effects of pain

“They actually had almost emptied out a wing of the care home because of this one particular lady because she shouts non-stop and I said to [carer] just ask them to give a paracetamol 4 times a day and just see where that goes, and she stopped. To my amazement, she stopped!”

Moving from reactive to proactive approach:

“We are trying to teach you to pre-empt things, don’t wait until everything goes wrong... It’s trying to convince them that that is a better way than keep going round on the same cycle, fire-fighting all the time because it just doesn’t work, you get nowhere fast”

Impact of BRighTER interventions

- **Recognition of the person**

“I’ve noticed certainly for a couple of residents in that home, just being treated a little bit differently and being seen as a whole person who had a career, and who... has children, rather than that lady who shouts a lot in room 7. So I think that’s a huge, I think it’s subtle but I actually think that’s a really big impact”

- **Information sharing sessions with care home team** were highlighted as being particularly valuable.

- **Recognition of benefit from other colleagues** e.g. GP’s seeing:

“a real benefit of the service in the care home at preventing admissions to hospital and better palliative care, and advanced care planning and all those sort of things”

Reflections following feedback of service outcomes

“ Seeing is believing” Having the positive experience of methods working is the best way to increase engagement.

Steep learning curve for new “tools” and a need to keep evolving based on experience of using them with colleagues in homes – reflective practice is essential.

“It’s changed the way I work, I would continue to think like this now, even if the model changed”.

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