

Lifestyle Options/Choices in Community Living 'Life my way. Living well with dementia'

Final Report

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EXECUTIVE SUMMARY

The Butterfly Household Model, a comprehensive model of caring for individuals living with dementia, has garnered a lot of interest in Alberta over the past years because of its compelling example of delivery of successful person-centered approaches practiced in the UK for the past 22 years. The Butterfly Household Model™, developed by Dementia Care Matters (DCM) and led by Dr. David Sheard has received international recognition and interest based on DCM evidence collected through observational audits of care in real-time, standardized baseline measures, and tools measuring well-being and ill-being on a global scale.

In July, 2015 Choices in Community Living and Lifestyle Options (Alberta-based Supportive Living providers) commissioned Dementia Care Matters (DCM), a UK based company to conduct a one-year long pilot to implement the Butterfly Household Model in their organizations. The pilots took place at Copper Sky Lodge, Spruce Grove and at Lifestyle Options Whitemud. It is very significant to note, that in 2016, at the end of the one year pilot both organizations' Butterfly sites, received the first ever Butterfly Household Model Designation in Canada, both achieving Level 1 Awards (Exceptional Person-Centered Dementia Care- a rare achievement where only 11 homes in the UK and 2 homes in Ireland hold this Level 1 Award).

Building on the proven impact of the Butterfly Household Model internationally and now within these Alberta-based organizations, the objective of this community innovation project was to sustain and to increase organizational capacity to deliver Butterfly Household Model and to implement the innovative Model at Legacy Lodge in Lethbridge and at Lifestyle Options (LSO) in Leduc. The implementation of the Model at these 2 additional sites would contribute to understanding the potential spreadability of the Butterfly Household Model, as well as engage people living with dementia, their families, and the care facilities in which they live.

As an innovation, the Butterfly Household Model enables quality of care and life through detailed observation and of the residents and staff interactions, building team-based culture and practices, and environmental enhancements designed to engage and inspire.

Evaluation of this community innovation project included research from Norquest College, through interviews with families, staff and stakeholders in the implementation of the Butterfly Household Model at Legacy Lodge and LSO Leduc, as well as Copper Sky Lodge. The researchers then provided the data in a summary report. The facilities also gathered data on agreed upon measures over the course of the year-long implementation. Further, an Advisory Committee was formed to assist the project managers and stakeholders in examining and discussing the implementation and evaluation, and give the members an opportunity to provide input as well collaborate on recommendations and dissemination of learnings.

Results of this project include findings which suggest that the Butterfly Household Model implementation at these Alberta Supportive Living facilities was successful in increasing the quality of life for people living with dementia at these facilities, and has improved or enhanced the experience of families and staff.

OBJECTIVE & IMPLEMENTATION

The Butterfly Household Model is recognized internationally as a model of dementia care which organizations, directly respond to the emotional, physical, intellectual and spiritual needs of individuals and in families affected by dementia. The tools, methodologies and practices promote and build capacities to respond to their social and care needs. Staff are taught and mentored to understand that 'feelings matter most' and that there is meaning behind every behavior. The Butterfly Model promotes engagement in a wide range of meaningful activities, and creates meaningful occupation in a familiar, home-like environment that is filled with color and sensory stimulation that will connect and engage people.

In 2015, Choices in Community Living and Lifestyle Options, two Alberta-based Supportive Living providers successfully implemented Dr. David Sheard's Butterfly Household Model in two of their care homes. They understood the critical need to provide innovative, person-centred dementia care to improve the quality of life for people living with dementia in their two pilot sites in Alberta.

Objectives:

- To increase community and social engagement for families and individuals impacted by dementia through participation in the delivery of an innovative person-centered model of care and engagement.
- To improve quality of care and life and thereby contribute to the reduction of social stigma based on established DCM measures including clinical and quality of care and engagement measures.
- To build on the best practices and proven innovative Butterfly Household Model and its beliefs, foundations/practices and principles of providing person-centered care, and building staff understanding and specialist skills demonstrating 'a feelings matter most' approach to people affected by dementia.
- To disseminate information on how residents, family, staff, and professionals experience the culture change both in terms of objective measures, perceptions of care and quality of the lived experience as well as satisfaction measures.
- To collaborate with advocacy, academic, as well as government and community agencies to work towards a culture change in dementia care and collaboratively disseminate the learnings from the project.

The Butterfly Household Model implementation included the following elements which were attended to over the course of a year at the (SL4D) Butterfly households:

- By connecting staff and families, the environments were enhanced to engage people living with dementia in the household. Color and the 'stuff of life' were brought in to recognize residents' individuality, history and stage of dementia. Environments were extensively painted, decorated and filled with objects to provide sensory activities and meaningful occupation.
- Different stages of dementia were acknowledged and small groups of residents at similar stages of dementia were organized into Households. Households were given friendly names with staff suggestions and input
- Staff were given eight full-day 'Being a Butterfly' sessions, ranging from emotional intelligence training, to specific training in 'end-of-life' dementia care.
- 'STAR' teams made up of supervisors and Team Leads from all staff departments were initiated to provide support and mentorship to the all staff team members.
- 'Home Action Teams' (HAT) comprised of enthusiastic staff were created to meet regularly to discuss the progress the Butterfly transformation.
- Throughout the training staff were evaluated on their ability to provide person-centered care. Staff were also matched for their strengths to provide care for people at different stages of dementia. Staff were encouraged to wear colorful activity belts to no longer wear uniforms in order to remove the 'us' and 'them' perspective in the home.
- Staff and family members assisted with developing life-stories of staff and residents, which were

posted and shared showing everyone's histories and highlighting their strengths. Skills, talents and life-long passions.

- Activities which provide meaningful engagement were created through ongoing discovery of people life-histories, present interests and capabilities. Environments were created that foster flexibility and being in the moment. Staff are mentored to be more aware of their emotions and the emotions of people living with dementia.
- Special attention was given to the 'Mealtime Experience' in order to enhance and transform facility-delivered meals into family-style mealtime 'experiences'. Everyone is now eating together, encouraged to make their own food choices, and when able, to serve themselves and participate in table conversation. Everyone is encouraged to help one another in the home, including with all aspects of mealtimes (as in normal family homes). Additions were made to the dining areas with colorful place-settings, adding background music (when appropriate) and important visual and sensory cues and smells, incorporating the 'hear it, see it and feel it' modality of DCM.
- Family became engaged in the Butterfly Model goals and activities, through meetings that provided the plans, updates and education to actively engage them within the household.

IMPACT FOR PEOPLE LIVING WITH DEMENTIA

Improving the day-to-day quality of the lived experience for people living with a dementia at Legacy Lodge and Leduc was a core anticipated outcome of the implementation of the Butterfly Model. Throughout the 12-month implementation of the Butterfly Projects both quantitative and qualitative measures were gathered.

The qualitative and quantitative data gathered along with the substance in the Norquest report, evidence a culture change, and a positive increase in the quality of care and engagement. The Qualitative Observational Audits indicate increased quality of life, well-being, and time spent in meaningful occupation, increased engagement by families, and reduction of expressive behaviors. Additionally there is evidence of new relationships being developed between people living dementia, their families, and the networks of people who support them.

Return to Life My Way...Living Well With Dementia and click on "[Evaluation](#)" for evaluation results

Contact seniorshhealth.scn@ahs.ca for a copy of the Life My Way...Living Well with Dementia Final Report.