

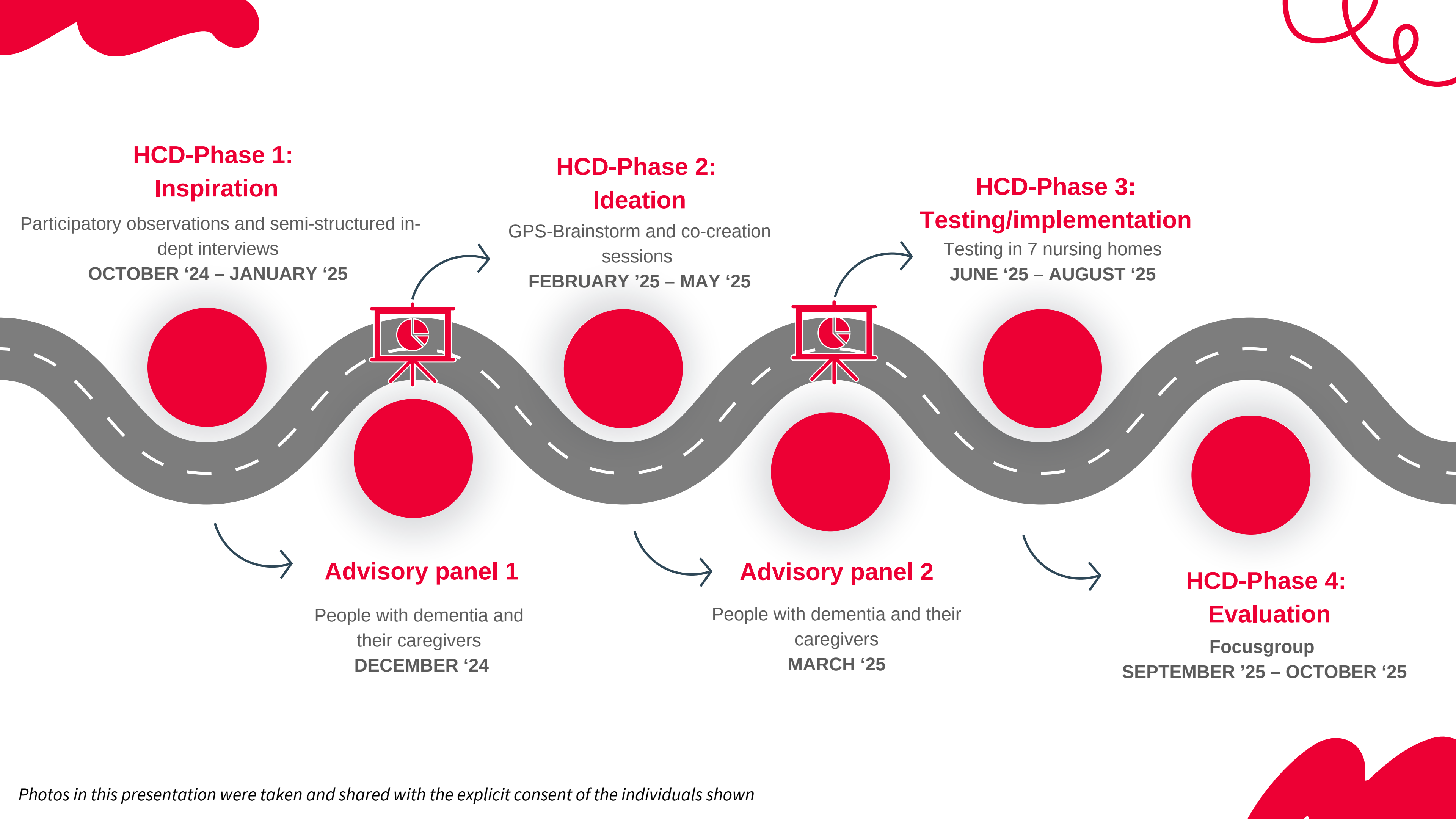


“Met VerVe”

Enriching and Connecting Interactions
with People with Dementia in LTCF

Jolien Allart, Elise Cornelis (PhD)





HCD-Phase 1: Inspiration

PARTICIPATORY OBSERVATIONS (n=16, 110h,15min)



Early shift, n=6
Late shift, n=5
Day shift, n=3
Night shift, n=2



Age (M)

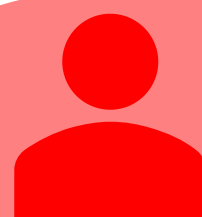
42,7yrs (range 34 – 61)

Work experience (M)

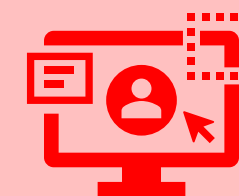
18,2yrs (range 5 – 41)

Experience dementia (M)

16,4yrs (range 4 – 32)



HC assistant, n=6
Nurse, n=5
CSM, n=2
LSM, n=1
RGC, n=2



Age (M)

44,3yrs (range 22 – 64)

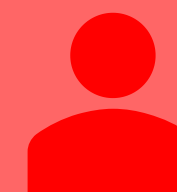
Work experience (M)

19,4yrs (range 1 – 41)

Experience dementia (M)

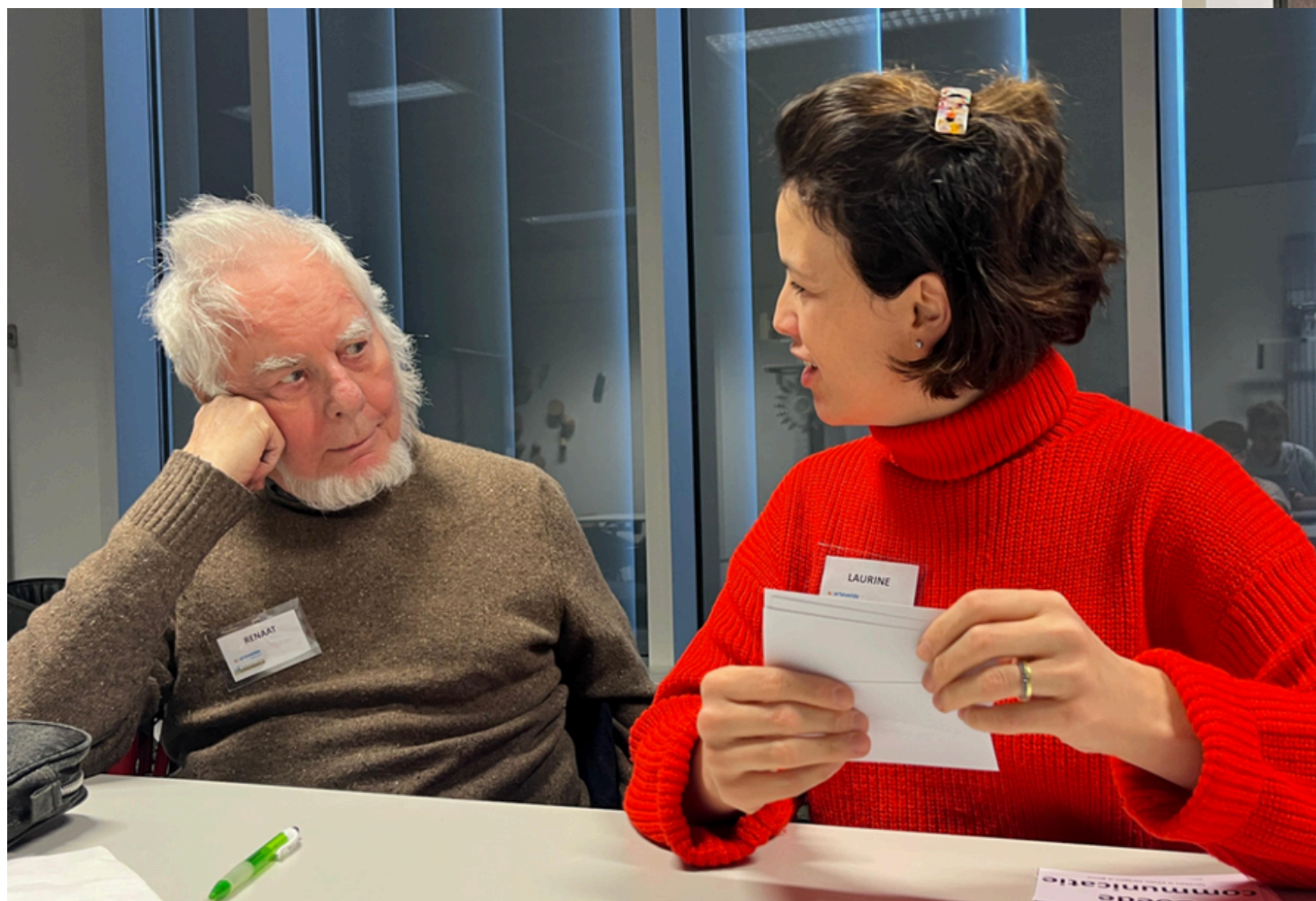
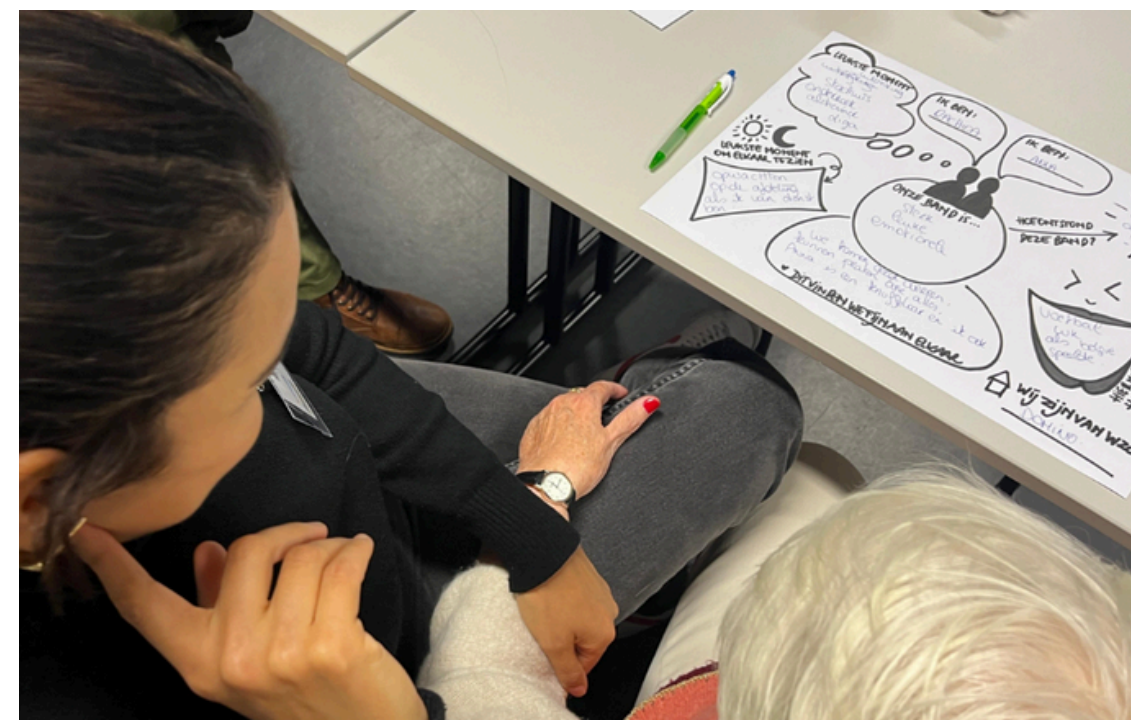
10,7yrs (range 1 – 32)

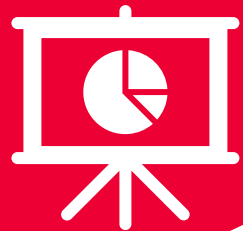
IN-DEPT INTERVIEWS (n=27, 26h,30min)



HC assistant, n=6
Nurse, n=7
OT, n=2
Physio, n=3
CSM, n=2
LSM, n=3
RGC, n=3

Advisory panel 1





Results 1: Requirements

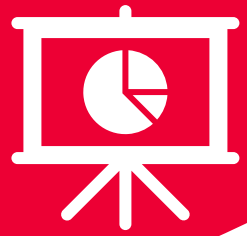


S	Samen in het nu	Together in the now
L	Liefdevol	Loving
E	Echtheid	Authenticity
U	Unieke afstemming	Unique attunement
T	Traag maar gestaag	Slow but steady
E	Er zijn	Being present
L	Luisteren	Listening

*“It is a continuous process of finding the right **key**, discussing, and above all, sharing experiences.”*

*“The **key** depends on the situation: what does he need at this moment?
A hug, for example, a kind word, care, or a shower. Every situation is different.”*

*“For me, it was important to quickly build a good relationship with the people here; that is the **key**.”*



Results 2: Influencing Factors

**Body
expression**

Use of time

**Points of
connection**

Use of voice

Adaptability

Group dynamics

**Internal Locus
of Control**

Tenderness

Humor

**Environmental
sounds**

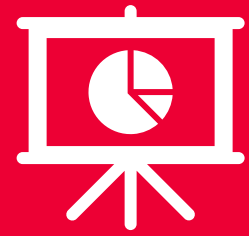
**Engaging in a
joint activity**

HCD-Phase 2: Ideation

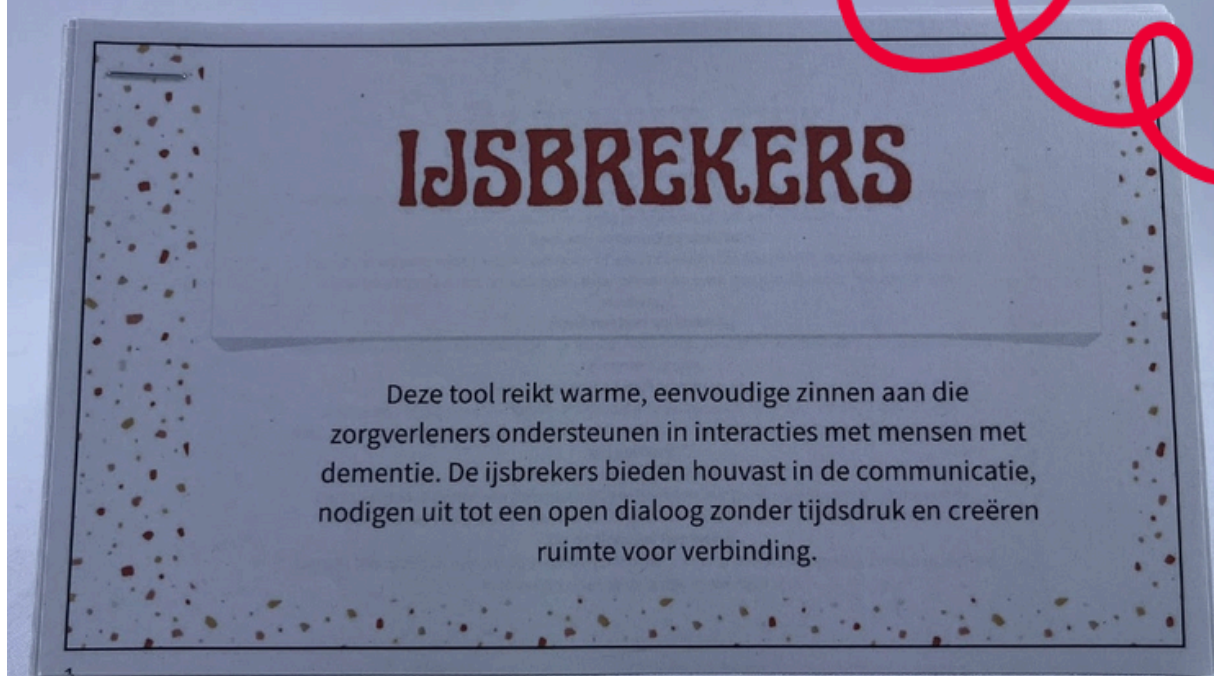


Advisory Panel 2





Prototypes tools



HCD-Phase 3: Testing/Implementation

Living Labs

- Conducted in 7 nursing homes
- 10 healthcare professionals actively involved
- Total reach: 70 healthcare professionals
- Duration: +/- 3 months

Evaluation Method

- Continuous evaluation conducted via logbook registrations

DATUM: / /

WELKE TOOL HEB JE TOEGEPAST? DUID AAN

☐ IJSBREKERS ☐ VISITEKAARTJE
☐ KEYHANGER ☐ KLETPOT
☐ TSJIEK TSJAK ALMANAK

KLEUR OF OMCIRKEL HET DAGDEEL: ☀️ ☀️ ☀️ ☀️

HOEVEEL STERREN GEEF JE DE INTERACTIE?

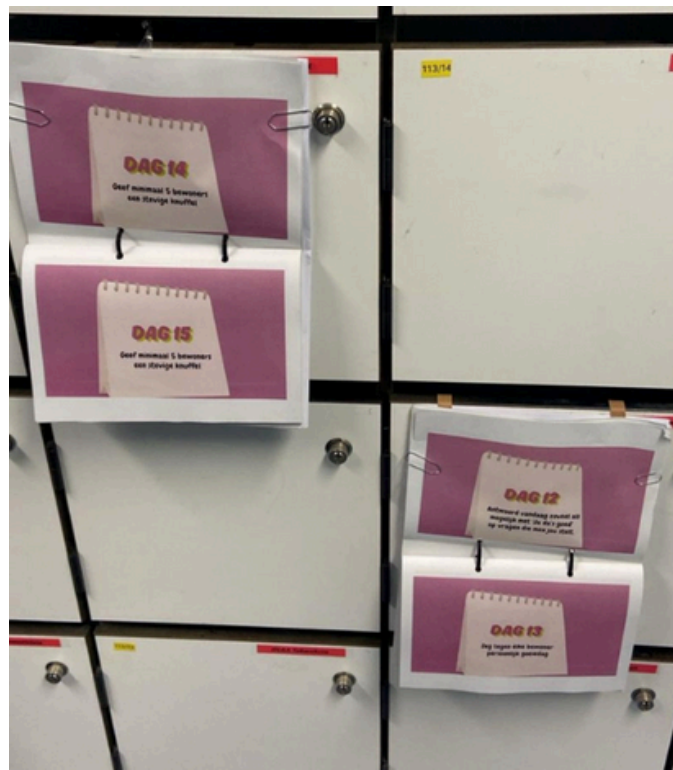
WEINIG ☐ ☐ ☐ ☐ ☐ ☐ STERK
VERBINDEND/VERRIJKEND VERBINDEND/VERRIJKEND

HOE ERVAAR JE DE INTERACTIE? ZET EEN KRUISJE OP DE LIJN

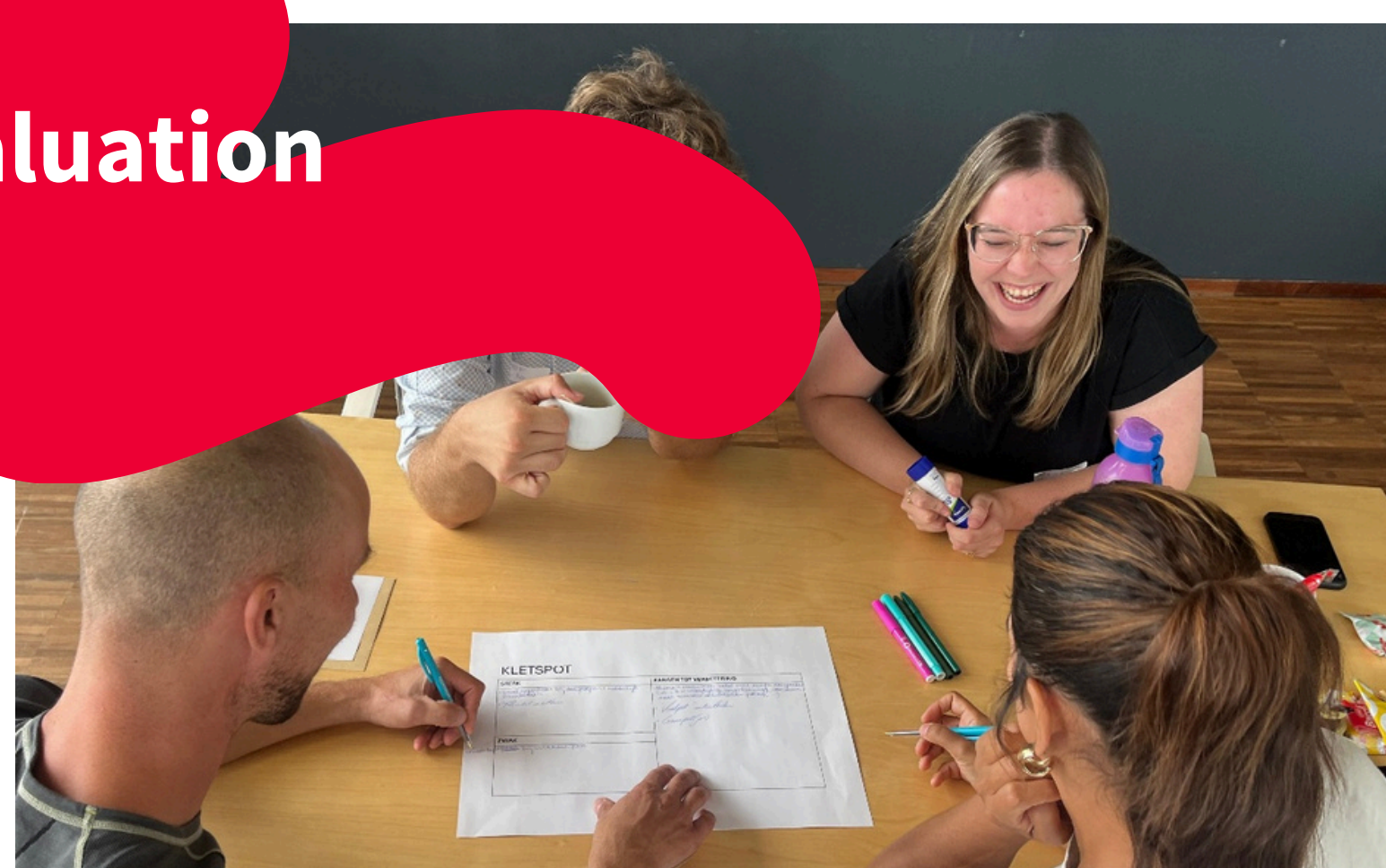
VERWACHT	.....	VERRASSEND
ZINLOOS	.....	VERRIJKEND
VERVREEMDEND	.....	VERBINDEND
NON VERBAAL	.....	VERBAAL
TELEURSTELLEND	.....	VOLDOENING GEVEND
TIJDROVEND	.....	TIJDBESPAREND

HOE BRUIKBAAR VIND JE DE TOOL?

NIET BRUIKBAAR ☐ ☐ ☐ ☐ ☐ ☐ HEEL ERG BRUIKBAAR



HCD-Phase 4: Evaluation



Focusgroup n=14

- Discussed experiences with the tools
- Attributes Rogers' Diffusion of Innovations
- SWOT for each tool

Data analysis of the logbooks

- Strength of interactions
- Usability
- Outcomes

Early insights



1

Real interactions start when we **step out from behind the caregiver role** — and meet as people, in authentic and natural situations

2

Person-centered care thrives on equality and reciprocity between caregiver and person with dementia — **it's about being with, not just doing for**

- *Do we need to move beyond person-centered care towards **relation-centered care**?*

3

The tools don't take more time; they **create space for real, spontaneous interactions** — and empower **natural initiative** from persons with dementia.



“Every interaction with a person with dementia is an opportunity to connect on a deep human level, beyond the confines of cognitive impairments.”

Gail Weatherill

Thank you!



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