



KEY POINT SUMMARY

OBJECTIVES

The purpose of this study was to evaluate the effects of small-scale living facilities in dementia care on residents, family caregivers, and staff.

DESIGN IMPLICATIONS

The authors recommended further study in this area because the push for small-scale living facilities for dementia patients may not have sufficient evidence to warrant generalized adoption.

Dementia care redesigned: Effects of small-scale living facilities on residents, their family caregivers, and staff

Verbeek, H., Zwakhalen, S. M., van Rossum, E., Ambergen, T., Kempen, G. I., & Hamers, J. P. 2010 | *Journal of American Medical Directors Association* Volume 11, Issue 9, Pages 662-670

Key Concepts/Context

Small-scale environments are increasing in popularity for the care of dementia patients. This study aims to evaluate the effectiveness of this strategy.

Methods

This study investigated the effects of small-scale living compared with regular care in nursing homes in the Netherlands. A quasi-experimental study was conducted from April 2008-January 2010. Measurements were done at baseline with follow-ups after six and 12 months. Two types of long-term institutional nursing care settings were included.

Experimental condition consisted of 28 houses in small-scale living which met the following criteria:

- Eight residents or fewer per house
- A joint household with activities centered around daily life
- Staff performing multiple tasks
- A small, fixed team of staff
- Organization of daily living mainly by residents

Control conditions consisted of 21 regular wards that met the following criteria:

- At least 20 residents per ward
- Staff had differentiated tasks
- Organization of daily routines were largely dictated by the nursing home

The primary outcome measures for residents were quality of life, neuropsychiatric symptoms, and agitation.



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Differences in characteristics between the two groups at baseline were tested for categorical variables, t-tests were used for normally distributed continuous variables, and Kruskal-Wallis tests were used for continuous variables with skewed distributions. Study hypotheses were tested with mixed-model multilevel analyses according to the intention-to-treat principle.

Findings

This study did not convincingly demonstrate benefits to small-scale living facilities for dementia patients. Family caregivers whose family was in a small-scale facility experienced less burden and greater satisfaction with nursing staff. Only subgroup analysis using contrast groups revealed greater job satisfaction and higher motivation in nurses working in small-scale environments.

Limitations

Small homogeneous sample.

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