Making Moments Matter: ‘Butterfly’ model sees positive results

The Salvation Army Aged Care Plus is seeing positive outcomes from a trial of The Butterfly Household Model of dementia care, with interim results showing a reduction in expressive behaviours, falls, psychotropic medication use, and increased pain level stabilisation among residents. Kerry Schelks reports.

Aged Care Plus implemented the Butterfly Household Model of Care in July 2016 at its Mountain View Aged Care Plus Centre at Narrabundah, ACT and The Cairns Aged Care Plus Centre at Chapel Hill, Queensland, with plans to roll it out across other Aged Care Plus centres upon successful completion of the 12-month trial.

The model, developed in the UK in 1995 by Dr David Sheard of Dementia Care Matters, focuses on enabling rather than de-pending, moving away from traditional task-focused care and routines to an approach where ‘feelings matter most’ and involvement in domestic activities gives residents a sense of purpose.

Residents live in small households with others who are at a similar stage of dementia.

In 2016 Aged Care Plus was one of two aged care organisations in Australia selected to implement the model, which it calls Making Moments Matter. The other is Barunga Village in Port Broughton, South Australia. The three trial sites were chosen after more than 40 facilities responded to an expressions of interest invitation from Dementia Care Matters.

The results

The interim results from the first six months of the trial at the two Aged Care Plus centres show:

- Significant reductions in residents’ expressive behaviours—100% reduction at Mountain View Aged Care Plus Centre and 25% reduction at The Cairns Aged Care Plus Centre at Chapel Hill.
- Reductions in resident falls—85% decrease (Mountain View Aged Care Plus Centre) and 67% decrease (The Cairns Aged Care Plus Centre at Chapel Hill).
- Decreases in the number of residents requiring psychotropic medication—33% decrease (Mountain View Aged Care Plus Centre) and 10% decrease (The Cairns Aged Care Plus Centre at Chapel Hill).
- Substantial increases in pain level stabilisation—60% stabilised at both centres.

Aged Care Plus attributes this to improved quality of life as a result of residents’ increased physical activity and contentment.

The first six months

The first six months of implementation have seen physical, cultural and environmental changes in the Aged Care Plus centres. Residents’ living arrangements and routines have been reorganised so they now eat and socialise with those at a similar stage of dementia. A
Making emotional connections
Aged Care Plus Executive Manager – Care Services, Peter Bewert, said the interim results demonstrate that caring for the physical is not the only consideration to make when caring for people living with dementia.

“The value of replacing task-orientated care routines with relaxed home-like experiences, where staff are considered to be an extension of family cannot be underestimated. The benefits of emotional connectivity have had a significant impact on physical, psychological and social wellness. In essence, we’ve been able to quantify that love, peace, joy and hope are key to quality of life and this is achieved through Making Moments Matter,” Mr Bewert said.

“Within the experience of dementia, you continue to retain your emotional awareness and overwhelmingly the most powerful emotion is love. Making Moments Matter represents the ability of our staff to tap into those real emotions and make them matter. The results we have seen over the last six months are evidence that these moments are being achieved and thus improving residents’ lived experience.”

“Challenges in introducing the model
Peter’s greatest concern was how people would react to the new model: “It’s so different and really asks a lot of the staff and even the families involved. Staff need to be vulnerable and aware of their own emotions and be able to recognize others’ emotions.

“We need to find the balance between being involved with people and acknowledging there are tasks to do, but looking at collaborative ways of doing these together, to increase meaningful interactions and provide value and purpose to our residents. This involves unlearning old routines and training, which for some has been a real challenge.

“Despite these challenges, we’re still on track with staff embracing the change and stepping willingly onto the journey.”

Call for expressions of interest
Dementia Care Matters is seeking three more facilities in Australia to adopt The Butterfly Household Model of Care approach in 2017. Interested providers can contact Dr Sheard at david@dementiacarematters.com. In addition to the three Australian sites already operating, there are 44 Butterfly Care homes in the UK, three in Ireland and three in Canada.

The Butterfly Household Model of Care checklist of practical ideas for achieving quality of life in care homes is freely available to download at: http://bit.ly/2mzZEnd.

You can also read David Sheard’s previous article in AJDC describing The Butterfly Household Model of Care checklist for culture change, at http://journalofdementiacare.com/inspiring-action-checklist-for-cultural-change-in-aged-care/