

College of Social Science

Briefing Notes

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Informing care related decisions with the Cognitive Daisy





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Key Points

- •The Cognitive Daisy is a practical cost-effective intervention that prompts care staff to consider inter-individual variation in the cognitive abilities of care home residents.
- •The online training programme is an effective approach for teaching about cognitive dysfunction in dementia and how to 'read' individual cognitive profiles.
- •Increased awareness in care staff of different cognitive profiles was shown to enhance care-related decision making and foster a greater sense of confidence.

Summary

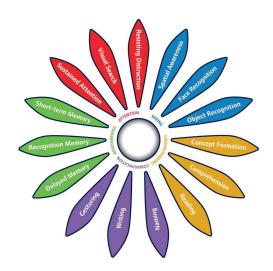
This study examined how care practices may be modified by the Cognitive Daisy. At pre and post Cognitive Daisy training, care staff stated how they would respond to a series of hypothetical case studies. We found unequivocal evidence of the Cognitive Daisy's potential to positively inform person-centred care related decisions.

Context

To examine whether a cognitive approach can usefully guide care-related decisions in dementia.

The Cognitive Daisy

Individual differences in cognitive impairments underlie many behavioural problems in people with dementia residing in care homes. Recognising the cognitive difficulties and strengths of care home residents is a major challenge for care workers yet critical for enhancing the delivery of individualised care, reducing agitation and identifying optimal forms of communication. The Cognitive Daisy (Hudson & Pollux, 2017) is a visual profiling system for enhancing care and support of people with neurological cognitive impairment. The Cognitive Daisy comprises a flower head consisting of 15 colour coded petals depicting information about five cognitive domains: visual-spatial perception, comprehension, communication, memory and attention. The level of impairment in each of these areas is determined by a specific test and denoted by the number of coloured petals.



Method

41 care staff completed an online training program which introduced the concept of the Cognitive Daisy and tested the ability of care staff to interpret individual profiles. Participants were requested to report how they would respond to four hypothetical case scenarios prior to starting the training and again following training when a corresponding Cognitive Daisy for each case was presented. Completion of the scenarios and training took around 40 mins.

Results

The Cognitive Daisy changed carers hypothetical interaction with the resident in each case. Even though some staff were knowledgeable about how to interact with residents with cognitive disorders, the Cognitive Daisy significantly increased this number. Following training staff were more likely to mime the use of objects to cases who were unresponsive and seek alternative methods of communication (e.g. gestures, writing) for those with speech production problems. In addition, we also found that care staff changed the information they sought for guiding decisions about residents. Pre-intervention care decisions were informed by consulting other sources (e.g. care plan, GP, relatives, other care staff); post-intervention care-related decisions were made independently.

The Cognitive Daisy has the potential to significantly improve the care of people with cognitive problems in a number of ways:

- (a) Adjustment of care-choices in response to the Daisies reduces agitation associated with loss of cognitive skills.
- (b) Viewing Cognitive Daisies constructed at different stages enables monitoring progression over time and facilitates discussions over care plans.
- (c) The Cognitive Daisy training informs care-workers about cognitive changes in ageing and dementia.
- (d) New staff can readily derive an overview of the people they will care for.
- (e) Viewing the Daisies of all service users together will help identify common needs and influence choices of home-activities.

In Conclusion

Overall our findings indicate that the Cognitive Daisy is a practical and effective intervention for residential care. Cognitive impairment is a precipitating factor for many dementia-related behavioural problems. By making cognitive strengths and difficulties visible the Cognitive Daisy empowers care staff with the potential to predict and avert behavioural problems and improve the delivery of person-centred care.

References

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