

## Evaluation of a Namaste service for patients with dementia



Dr Kathryn Richardson, Lourdes Colclough,  
and Dr Mags Clifford

## What is Namaste?

- “To honour the spirit within”
- Holistic care for people with advanced dementia who can no longer benefit from social groups or activities
- Meaningful activities, multisensory stimulation, reminiscence
- Support for family and carers



“Dementia is rarely recognised as a terminal illness. We’ve been medicating rather than thinking about quality of life. That’s why I came up with Namaste Care – to honour the spirit within. It started in care homes - and now I’m really excited that its happening in peoples’ homes. It’s all about loving touch, it’s so easy but we all tend to go too fast.”

- Professor Joyce Simard



## Evidence for Namaste

- Positive impact in terms of behaviour and social engagement (Simard 2010)
- Positive impact in care home setting provided good leadership, continuity and clinical care (Stacpoole 2014)
- Improved QoL in acute hospital setting (St John 2015)

Mainly small qualitative studies, proxy reporting, no comparison to usual care



## St Joseph's Namaste service

- Running since April 2014
- First service to provide Namaste care to people in their own homes
- From start - September 2016:
  - 70 volunteers trained, 42 delivered Namaste care
  - 164 referrals (community and hospital), 127 matched with volunteer
  - 111 referrals within patient's home (74 matched)
  - 501 Namaste sessions carried out





## Video clip

<https://www.youtube.com/watch?v=IQ8iKHdq4Q>



## Aim of this project

To evaluate the Namaste service for patients with dementia by exploring volunteers' experiences of delivering the service and perceptions of the outcomes



## Methods

- Monthly facilitated case-work sharing sessions – for supervision and debrief
- Average 6-10 volunteers present
- Open question style
- Explore dynamics & interactions with the person with dementia and their carer
- Impact of Namaste on volunteer themselves



## Methods – Content analysis

- Conventional qualitative content analysis of notes from case work sharing sessions
- Ethics approval not needed (secondary analysis of anonymised routine data)
- Analysed notes from the sessions between October 2014 and November 2015



## Results

- 55 case sharing reflections examined
- 19 volunteers, 24 people with dementia

Research questions:

- Effect of sessions on person with dementia and carer
- Impact on volunteer



## Results - Demographics

- 15 female, 9 male
- 3 Indian, 3 Bangladeshi, 2 Pakistani, 1 Asian, 5 white British, 3 black Caribbean, 1 black African, 6 not recorded
- 4 patients required an interpreter as they did not speak English

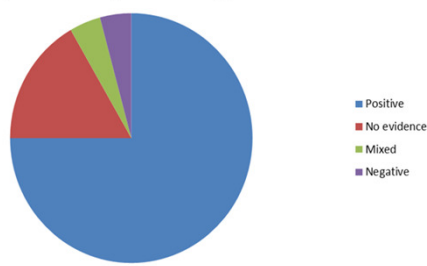


## 5 themes

- Impact on person with dementia
- Engagement of person living with dementia
- Impact on carer
- Engagement of carer
- Impact on volunteer



### Impact on the person living with Dementia

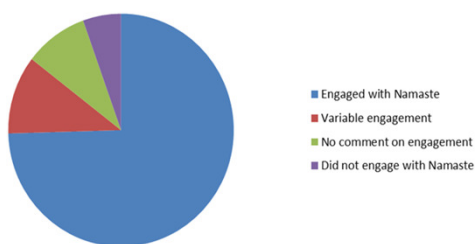


### Impact on person with dementia

- Appeared to enjoy sessions
- Appeared relaxed and displayed positive emotion
- Increased rapport and trust developing over time
- More sessions requested
- Quotes from carers
  - "calmer, pleasant and less irritable"
  - "reached mum in a special way....you can't buy"...



### Engagement of the person living with Dementia



### Engagement of person with dementia

- Accepted care, e.g. massage
- Engaged in singing and dancing with volunteer
- Listened to stories, shared stories
- Increasing engagement over time (e.g. increased eye contact, appeared happy to see volunteer)
- Sometimes variable, e.g. one person sometimes appeared calmer when left alone, at other times relaxed while being read to



### Impact on carer

- Many sessions did not comment
- 13 positive:
  - Carers commented that they looked forward to the sessions
  - Opportunity for rest or to complete other tasks
  - More positive impact over time
- 1 negative:
  - Found sessions tiring and requested that they stop



### Engagement of carer

- Learned to massage
- Gave massages / manicures in between Namaste sessions
- Joined in activities, e.g. playing cards



### Impact on Volunteer

- 8 positive:
  - Enjoyed developing rapport
  - Felt they were making a difference
- 4 negative or mixed:
  - Hearing negative comments from carer
  - Feeling drained
  - Frustrated at perceived lack of impact on person with dementia



### Discussion

- These findings support the view that Namaste has a positive impact on people with dementia
- Impact of providing service in own home (possibly some change in the way carers engage with the person with dementia?)
- Positive findings may add strength to efforts to continue the service
- More research needed (interviews with volunteers and carers +/- patients, and comparisons with usual care)



### Limitations

- Researcher bias (2 researchers)
- Did not capture feedback from volunteers who did not attend the sessions
- No standard questions / topic guide, or ability to further explore comments
- Perception of volunteers rather than people with dementia (may be a valid approach given research limitations with this group)



### References

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Any Questions?

St Joseph's Hospice,  
Mare Street, Hackney,  
London E8 4SA

T: 020 8525 8000  
E: [info@sjh.org.uk](mailto:info@sjh.org.uk)  
[www.sjh.org.uk](http://www.sjh.org.uk)

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