CONFERENCE ABSTRACT

Exploring the need for an expertise centre for challenging behaviour.

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In a case study (N=1) a 78-year-old woman of Indonesian origin was referred for admission to the psychiatric hospital because there were increasing behavioural problems in the nursing home where she was staying. The challenging behaviour consisted of screaming; name calling, pinching, hitting and throwing food. The multidisciplinary team in the nursing home did not cope with the behaviour of the patient. This patient has an extensive history in psychiatry; she was diagnosed with bipolar disorder, anger management disorder and cognitive impairment. Because of cognitive impairment the patient lived in a nursing home because her husband was no longer able to care for her because of his own health problems. The medical team of the nursing home wanted her transfer to GGz centraal with the purpose to treat her provocative behaviour and to lead her to a permanent place to live in a setting appropriate to her problems. Also, the family of the patient supported this. They were very dissatisfied with the care offered in the nursing home. They indicated that they were very overburdened by the challenging behaviour of this patient in the nursing home. They also said that they felt that the nurses tried to solve the behavioural problems themselves without enlisting the help of experts in psychiatry. The patient was admitted to the geriatric psychiatry ward for a multidisciplinary evaluation of condition and challenging behaviour. Through the efforts of the team and the involvement of the family it was clear what causes the challenging behaviour and the team members were able to gradually work on the provocative behaviour of the patient. Most of the causes were related to traumatic experiences in the past. Small simple interventions led to a better quality of life for the patient and the team could discharge her to the nursing home with a clear treatment and supervision plan for the carers. The mental health care management organization came to the aforementioned case study with the question of whether the author wanted to deepen more on this subject and wanted to do research on challenging behaviour in older adults with severe mental illness and cognitive comorbidity. This subject is especially important because at the same time the government decided that the long-term beds must be decreased in psychiatry. Many elderly patients who may have lived most of their lives in the long-term psychiatric wards are being transferred to nursing homes, which lead to problems in the provision of care for these patients. The author claims an expertise centre could provide the solution.

The expertise centre challenging behaviour aims to diagnose the possible causes of challenging behaviour and investigate what interventions can be effective. As a theoretical basis it uses the Neuman Systems Model. This nursing model can be used both as a theoretical framework,

based on a systems thinking perspective, as well as on a methodical approach to explore nursing problems. Based on this case study an expertise centre for challenging behaviour will be developed in which a multidisciplinary team consisting of a psychiatrist, a nurse practitioner and a nurse will visit the nursing home team members and talk with the patient if possible and his or her family. This team will also focus on the interaction between the caregivers and the patient. The hypothesis of the author is that these efforts will ultimately lead to a better quality of life, fewer readmissions in a psychiatric hospital and a higher satisfaction with the family or directly involved healthcare professionals with the patient. In a next study the patient outcomes of the expertise centre will be investigated as well as the cost-benefits.