Introduction

Long-term care homes must work within current regulations and legislation to meet the needs of people with dementia and their families. This is not always easy to do within a person-centred approach. Compliance with regulations and legislation imposes rigorous standards of care, which have historically focused on “tasks” rather than developing relationships. An institutional culture has been the result in many homes.

There is an urgent need to change the culture of care – shifting from an institutional model to a relationship-based approach – and to focus on the needs of people with dementia and their families through a person-centred approach. This approach is beneficial for all people, especially those with dementia, regardless of the stage of the disease or where they live, and is based on the values of dignity and respect, information sharing, participation and collaboration.

Like all individuals, people with dementia are people first. Like all of us, they have an inherent dignity, value and personhood which remain with them throughout the whole course of the disease, and this needs to be respected at all times. Many people want to live in their own homes for as long as possible. The reality is, however, that the majority of people with dementia will move to a long-term care home. Fifty-seven percent of seniors living in a residential care home have a diagnosis of Alzheimer’s disease and/or other dementia, and 70% of all individuals diagnosed with dementia will die in a long-term care home.

Through its culture change initiative, the Alzheimer Society of Canada (ASC) aims to improve the experience of long-term care for people with dementia and their families, and is working with others to provide useful strategies, tools and tips that can help long-term care homes across Canada put the principles of person-centred care into practice.

Background

In 2012, ASC conducted an exploratory qualitative research study in six long-term homes across Canada to understand how person-centred care is put into practice. These homes are not perfect; however they are committed to changing the culture of care in their environment, by providing elements of leading-practice, person-centred care to their residents with dementia in their own unique way. They also reflect the diversity of long-term care homes in Canada, regarding aspects such as: sources of funding, for-profit and not-for-profit, unionized and non-unionized staff, urban and rural settings, chains and independents, and number of beds.

1 Canadian Institute for Health Information, Caring for Seniors with Alzheimer’s Disease and Other Forms of Dementia, August, 2010.
Introduction

**PC P.E.A.R.L.S.™**

Through this research, ASC learned about seven common key elements to begin and sustain a culture change to provide person-centred care. These elements are outlined and explained in seven information sheets entitled PC P.E.A.R.L.S.™, under the following headings:

1. Person and Family Engagement
2. Care
3. Processes
4. Environment
5. Activity & Recreation
6. Leadership
7. Staffing

The approaches adopted and practices implemented by the six homes studied are real-life, credible, effective choices that can be duplicated in most other homes and the lessons learned can be applied in various situations and settings.

ASC encourages long-term care homes to put the PC P.E.A.R.L.S.™ into practice to improve the experience of people with dementia, caregivers and staff. The ultimate goal of ASC is to make person-centred care the norm rather than the exception in Canada, and many long-term care homes already share our vision.

Keep up to date by visiting our website to learn more about ASC’s culture change initiative: [www.alzheimer.ca/culturechange](http://www.alzheimer.ca/culturechange).