***Cognitive Stimulation Therapy Living well with Dementia***

During my time on my older adult placement I was placed in a LLAMs service which worked with services user who had a diagnosis of Mild Cognitive Impairment or Dementia. One of the non-pharmacological therapies that are offered to service users who present with a higher functionality is a 5 week course of Cognitive Stimulation Therapy. Throughout the 5 weeks the service users attend the centre for 1 day, 3 times a week and work with support workers on a set course of activates to aid management of cognitive symptoms and improve daily functionality.

In this session I proposed an idea to the group to involve a healthy eating taster and education session each week in the mornings of the group. The group agreed to this and thought it ‘would be a nice idea’ this would involve bringing in various food and drinks for the service users to sample.

***The structure of the session was as follows:***

The service users would be introduced to the food item in its whole form , such as an avocado, they would then be given the opportunity to see, touch, smell and eventually taste the food item. Once they had used all of their senses to hazard a guess of what the item is I would reveal its actual name. I then would go on to explain where they can purchase this food, how to prepare it and suggestions of what they could use it in conjunction with or substitute it for, and the health benefits of consuming this food item.

The purpose of not revealing the name of the food initially was to informally assess the services users’ visual recognition and naming, in concordance with elements such as in the MMSE (Mini Mental State Examination) and the MOCA (Montréal Cognitive Assessment). The sessions also prompted reminiscence, short term memory testing ( weekly reflections on previous sessions) and testing base line /decline in the 5 senses.

Each week I formulated an information leaflet with visual representation of the food they had tasted, instructions of how to prepare the food, and the health benefits of the food. This presented the opportunity for the service users to refer back to the session content at a later time, providing cognitive prompts if the service user could not remember what to do with the food or what a particular taste was associated with. The text was made large enough to read for those with visual limitations and key terms were highlighted for emphasise.

At the end of each session I would request verbal feedback of the how the service users found the session and if they would be interested in trying the foods at their leisure. Each week the feedback was predominantly positive, however some service users would be reluctant to engage at times and would be resistant to tasting particular foods that were out of their normal diet comfort zone. This was address by myself to the service user calmly and of appropriate manner, vocabulary and proxemics. I would explain that although they may not have come across these foods beforehand, and may not have had the means of acquiring them around their time of upbringing, this was a great opportunity to try these foods and maybe discover new tastes that they like or dislike. This would prompt group debates, which was seen a s a positive result as it encouraged reminisce and social interaction.

In the session each week I would begin with a recall session of the previous week, here I would ask the service users for any information they could remember about the previous session. This again allowed for an informal assessment of their short term recall and memory association. Each week would bring a variety of responses; mainly however it was evident that the service users had no recollection of the previous session.

***Personal reflection:***

I believed that the service users benefited from an experience they may not have been subjected to otherwise. Each week I wrote a synopsis of my observation on each service user throughout to add to their continuing care notes.

Throughout the session that I have delivered, I have discovered that the older generation are much more resistant to changing their habits. Many discussions were had with the service users to discover if they felt they would or could incorporate the foods they had tried into their eating habits. Many of them did like the foods and would be keen to try them again and have them in a meal. However many felt that the difference between the foods they were used to and the foods they were being introduced to were too great to comprehend. One service user in particular advocated the fact that the generational shift in the approach to food has had a huge impact. He continued to refer to the foods as ' posh, exotic and unnatural' despite education on the availability and origin of the foods.

The resistance I faced in the un-changeable attitudes towards foods from some of the service users helped to inform me of the difficulties an older adult may incur when asked to participate or be subject to something they are not familiar with. This can be applicable to any number of instances in the individual’s life, but have a great significance in relation to mental health and particular dementia.  This project has enabled me to empathise with the sometimes defensive reactions that people may present with when faced with the unknown.

On reflection I feel I was not as organised or prepared from the start of the sessions as I would have like to have been, however the following week I made sure this was rectified by preplanning the session, complying the leaflets in more detail and holding more of a structured informal session.

If I was to complete this project again I would formulate a formal tool to help me assess and record visual recognition and recall, as this was not at the forefront of my mind in the first session, and only became an apparent that it would have been of use in the second session. if I was to carry out the sessions again with this service user group I would conduct more research into the foods of the service users era so to provoke memories as well as incorporating modern day alternatives.

***Feedback of Sessions:***

Feedback and thoughts on the session were gathered weekly either by myself or by the support workers present, predominantly this was verbally (due to service users written word difficulties) and is compiled into short statements in the below subheadings.

In line with the NMC Code of Conduct, Pseudonyms have been used to protect and uphold patient confidentiality.

***Feedback from Service user:***

***Mickey:***

*“I really liked the food tasting, lots of good food to try and I learn a thing or two I didn’t know”*

***Donald:***

*“It was ok, but my wife is a fantastic cook and she would not know what to do with this stuff. My grandkids would love it though!”*

***Fred:***

*“I loved the group; it was a lot of fun and interesting. The food was great, some of it I think I’ve had before but all the same it was good to have it again!”*

***Minnie:***

*“Lots of the food was not my cup of tea, but I did try most of them. Something’s I recognise from being a young girl. I prefer my potatoes, meat and vegetable though”.*

***Daphne:***

*“I liked the group today, some very interesting things to try that I would like to buy in my shopping. I struggled to hear sometimes but the lady made sure I to repeat things closer and clearer to me when I struggled.”*

***George:***

*“Food was ok, a little strange at times. The girl did a good job in the group. I got to try things that I hadn’t before so that was good”.*

***Mentor Feedback***

Simone has conducted a session within our Living Well with Dementia group, which is part of our Cognitive Stimulation Therapy session. Simone’s session focused on introducing new foods and healthy eating to the group, the session was designed to include participation from the group. This session was able to informally assess a service user’s cognition in a relaxed environment. Feedback from the service users is documented in Simone’s learning outcome book that included service user enjoyment of the session, our director of nursing who was visiting Willow House on one day sat in the session and commented on how she enjoyed the group. Simone was confident in manner during her session and planned each week individually and provided a worksheet to take home. Simone has demonstrated her keenness and has brought ideas to our team and has exceeded the expectations of that of a first year student.