

Best Friends Approach

	Best Friends Approach	Validation
<p>Definition</p>	<p>Person centered approach developed Virginia Bell, David Troxtell.</p> <p>The goal is to train master individuals who would then train people within their organizations</p> <p>Four keys elements:</p> <ol style="list-style-type: none"> 1. Dementia bill of rights 2. Life story 3. KNAK nurturing approaches community kinship <p>Communication – Dignity, interaction, social skills</p>	<p>This <i>method of communication</i> is based on building a relationship with older adults with cognitive decline. The aim is to accompany them while acknowledging ("validate") the emotions and needs being expressed, whether they still have the ability to speak or not.</p>
<p>Concept of humankind</p>	<p>Humanistic perspective.</p> <p>Doesn't specific talk about domains of wellness but strongly support.</p>	<p>Holistic vision of people: physical, psychological and social factors are all critical to how people age and if they become Mal or disoriented.</p>
<p>Goals</p>	<p>Improve the quality of life of the person living with dementia, the family member and the staff.</p> <p>Improve the relationship between all parties. This is key to QoL: For example, the use of the life story is essential to create bonds and create opportunities for engagement and help someone through a behavior expressions.</p> <p>Foster cooperation between the person living with dementia, the family member and the staff.</p> <p>Fosters a sense of agency for the older adult, enabling them to express their preferences and allow the caregiver to honor them.</p>	<p>For the older adult:</p> <p>Increased verbal and non-verbal communication;</p> <p>Increased feelings of well-being and self-worth;</p> <p>Expression of emotions and being actively listened to with empathy leads to less anxiety and stress;</p> <p>Their process of resolving old issues is continually 'validated'</p> <p>Validation prevents isolation and loneliness which prevents withdrawal inward to vegetation.</p> <p>For the caregiver (professional or layperson):</p> <p>Less burnout</p> <p>More joy and energy</p> <p>Feeling more capable of handling difficult situations</p> <p>For family caregivers:</p> <p>Improve communication with relatives</p>

		<p>living with dementia; (Re)build a positive relationship; Older adults can stay in their own homes longer; Less burnout</p>
<p>Basic Theory</p>	<ul style="list-style-type: none"> - No basic theory based on underpinning literature - Based on concepts around the importance of social engagement and relationship 	<p>Based on 3 Main Elements:</p> <ul style="list-style-type: none"> - The Attitude based on empathy. - Tailored communication techniques, - Principles developed by Naomi Feil in reference to human beings psychophysical and social developmental theories. She refers to humanistic authors such as E. Erikson, C. Rogers, J. Piaget, S. Freud, C.G. Jung, A. Maslow...
<p>Targeted population</p>	<p>Older adults living with dementia</p> <p>All training is geared towards people with memory loss.</p>	<p>Older adults with cognitive losses; those diagnosed with 'late onset Alzheimer's disease. Aspects of Validation (the validating attitude and some techniques) can be used with many different populations.</p>
<p>Techniques used</p>	<p>4 keys elements:</p> <p>Understanding the individual</p> <p>Communicating in a way that takes into account the cognitive impairment</p> <p>Understanding how to approach someone: Asking for permission...</p> <p>Including the family members</p>	<p>Individual Validation:</p> <ul style="list-style-type: none"> - Prerequisites: centering, finding a trust-building physical position (eye contact and using an adult to adult voice tone. - Verbal techniques include: asking open questions and exploring the needs and emotions being expressed by the other person. - Non-verbal techniques include: anchored touch, singing songs familiar to the client, saying the emotion with emotion, mirroring the repetitive movements. <p>Group Validation: 4-8 disoriented older adults form a weekly group that explore issues relevant to the group members using a fixed agenda, seating order and social roles.</p>
<p>Developers</p>	<p>Virginia Bell has lectured widely on Alzheimer's disease at national and international conferences, speaking at 12 National Education Conferences of the Alzheimer's Association and lecturing at 18 conferences of Alzheimer's Disease International.</p>	<p>Naomi Feil Method created 1960s-1970s; first published in 1982.</p>

	<p>Shes published journal articles and books, notably in Dementia Care: Patient, Family and Community (John Hopkins, 1989). Many of her articles have been reprinted numerous times: "The Alzheimer's Disease Bill of Rights" (1994), "The other Face of Alzheimer's Disease" (1999) and "Spirituality and the Person with Dementia" (2001), co-authored with David Troxel and published in the American Journal of Alzheimer's Disease and in the Alzheimer's Care Quarterly. She has also co-authored five books with David Troxel. Virginia is currently the Program Consultant for the Greater Kentucky and Southern Indiana Chapter of the Alzheimer's Association.</p>	
<p>Training</p>	<p>Connected with Health Profession Press (publishing company) that organizes the training</p> <p>Training over a long weekend that includes: (\$1200)</p> <ul style="list-style-type: none"> • Training • Competency test • Facilitation skill test <p>Annual fee to keep certification that includes: (\$450)</p> <ul style="list-style-type: none"> • Access to portal • Training • List of other master trainers. <p>Master need to report annually:</p> <ul style="list-style-type: none"> • Whom was trained • A % of revenue earned <p>Master can then train anyone in their organization (nurses, ED, life enrichment staff...)</p>	<p><u>Workshops/Presentations:</u> Offer an introduction to the method and a few basic skills</p> <p><u>Basic courses: (2-6 days)</u> Offer integration of basic attitude skills and a few techniques</p> <p><u>Targeted courses, seminars and workshops (1-3 days)</u> Offers an introduction to the method and some basic skills based on the needs of: Family caregivers Facility managers Volunteers Fire, police and ambulance workers Home healthcare workers ... and as requested</p>
<p>Certification Courses</p>	<p>Best Friend Master trainer is the only</p>	<p><u>Level 1, Worker course: (certified)(10 days spread out over an average of 9 months)</u></p>

	<p>level</p> <p>That person can then implement the processes, the ideas, the programs</p> <ul style="list-style-type: none"> - Education opportunities are then very flexible for the staff 	<p>Offers integration of basic attitude skills and all individual Validation skills</p> <p><u>Level 2, Group Practitioner course: (certified)(6 days spread out over an average of 9 months)</u></p> <p>Offers further integration of individual Validation skills and adds Group Validation skills</p> <p><u>Level 3, Validation Presenter/Teacher course: (certified)(5-6 days spread out over a minimum of 2 months)</u></p> <p>Offers presentation skills and deepening of theoretical and pedagogic knowledge as applied to teaching Validation. Successfully co-teaching a Level 1 course with an experienced teacher leads to Teacher certification</p> <p><u>Level 4, Validation Master</u></p> <p>Validation Teachers with a minimum of 5 years experience of teaching all certification levels may apply for this certification. Validation Masters become members of the VTI Education Committee and are responsible for the integral development of the Validation method contents and teaching materials. Masters are authorized to teach Level 3 courses.</p>
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