

Why do we use the DCM (Dementia Care Mapping) method in a Reminiscence project?

In our experience delivering reminiscence projects with people living with dementia, their carers and professionals, we have been aware of the need to gather data about the implications of the reminiscence technique. We are sure that by reminiscence, we get closer to the person living with dementia and help to retrieve their sense of identity. The goal is to show how the reminiscence works with people with dementia, and how the family carers, and the professionals can use it in daily life.

In our approach, we use the Person-centred care definition by Brooker, 2004:

- Firstly, we need to respect and value the individual as a full member of society. We need to see people with dementia as having all the rights of citizenship and root out discriminatory practice against people living with dementia and those who care for them.
- Second, we need to provide an individualized plan of care that is in tune with people's changing needs, giving increasing compensation and reassurance as cognitive disability decreases.
- Third, we need to try to understand the perspective of the person with dementia.
- Fourth, we need to provide a supportive social psychology in order to help people with dementia live a life where they can experience relative well-being.

The DCM method helps us in recognizing PCC values in our practices. Dementia Care Mapping (DCM) (Bradford Dementia Group, 1997;2005) is a set of observational tools that have been used in formal dementia care settings such as hospital wards, care homes and day care facilities. It has been used both as an instrument for developing person-centred care practice, and as a tool in research. It developed from the pioneering work of the late Professor Tom Kitwood on person-centred care.

DCM is both a tool and a process. The tool is the observations and the coding frames. This is the intensive in-depth, real-time observations over a number of hours of people with dementia living in formal care settings. The process is the use of DCM as a driver for the development of person-centred care practice, including careful preparation of staff and management teams, feedback of the results of the map, action-planning by the staff team on the basis of this feedback, the monitoring of progress over time and then the cycle of re-mapping commences.

In our Reminiscence Project, we use DCM mostly to recognize well-being and ill-being during the project and to meet the emotional and psychological needs by the use of 'detractors' and 'enhancers' in the exchanges and communications during the sessions.