

Care profile protected living with intensive dementia care (VV 05)

(Source: CIZ.nl)

In the Netherlands, people with a care profile of 5 or 7 can live in a nursing home (The Hogeweyk is an official nursing home). The care profiles were drawn up by an independent institute (CIZ) commissioned by the Dutch government. These care profiles describe the stage of dementia and the client's care and support needs.

Care profile 5

Due to serious problems caused by dementia, the clients require intensive support and care. The clients are heavily or completely dependent on care. With regard to their social self-reliance, the clients need help in all instances and often need full-time care. These clients experience a profound loss of control over their own lives. There may be roaming behaviour. Clients no longer have control over their own actions. They need continuous help, supervision and direction in terms of their various psychosocial and cognitive functions, because the clients have many limitations with regard to orientation, concentration, memory and thinking. There is complete disorientation with regard to time, places and people. Help or full-time care is needed in all aspects of everyday life including eating and drinking, minor grooming tasks, personal care for teeth, hair, nails, skin, going to the toilet, washing and dressing. With regard to mobility, clients often need help or full-time care. Indoors, clients have very limited autonomy and outdoor autonomy is not possible at all. Due to their fragile health, nursing attention is necessary (including prevention of pressure ulcers and infections). The clients can sometimes exhibit behavioural problems. This concerns, in particular, compulsive behaviour, uncontrolled or uninhibited behaviour or reactive behaviour in interactions. Psychiatric problems occur in some of the clients; these are mainly passive in nature. The support usually involves assistance in decline. Clients have a structural need for care many times a day. The level of disability of these clients changes both slowly and quickly. The dominant basis for this client profile is usually a psychogeriatric illness or disorder.