collected using semi-structured interviews and analysed with a thematic analysis.

Results: Mean age was 72 years (range 63-78), four lived alone, three smoked and three had oxygen treatment. Four main themes emerged: *having a life despite of COPD,*predictability and confidence in getting help,*the struggling balance between insight and compliance to treatment and *barriers and facilitators of the system. The women were no longer able to do household chores due to breathlessness, they lacked energy to socialize and were concerned about altered appearance due to COPD treatment. They used different strategies of coping and adaptation in their daily life that enabled them to have a good life despite of COPD. To feel safe at home, the women wanted a contact person at the hospital who know their story that could be telephoned for questions regarding COPD or visited at the hospital for an assessment of whether hospitalisation was required. The women experienced a struggle between knowing they should stop smoking, need to eat and drink sufficiently and increase their physically activity and the lack of motivation for change. All women had an action plan for COPD exacerbation. This self-management strategy empowered eight of the women by helping them to assess the severity of their symptoms and to start treatment at home. One woman felt insecure and did not manage to use the plan.

Conclusion: Knowledge about older women's experience of living at home with COPD can help nurses to tailor nursing interventions such as education and supervision to prevent COPD exacerbations and hospital readmissions.

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Improving communication with people with dementia during daily nursing care: a systematic review

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Background: Communication between people with dementia (PWD) and nursing staff is important in daily nursing care activities. Due to their limited communication skills PWD have difficulties understanding what others communicate. In addition, they struggle with expressing their needs verbally. Behavioural and psychological symptoms of dementia might occur as a nonverbal way of sending information. Nursing staff need to be able to interpret this nonverbal communication to understand basic health information and to establish preferences, feelings and need of care. However, they often report communication difficulties with PWD, which makes it challenging to provide most adequate care. Therefore, interventions are urgently needed that aim to improve communication between PWD and nursing staff during daily nursing care.

Aim: To provide an overview of interventions which aim to improve communication during daily nursing care (irrespective of care setting). Secondly, to evaluate the effectiveness

regarding communication outcomes in people with dementia and nurses.

Materials and methods: From June 1st until June 19th 2015 the databases Cochrane, CINAHL, PsycINFO, and Pubmed were searched. Papers were included, if: 1) interventions focused on communication between nurses and people with dementia and were applicable during daily nursing care; 2) studies were (randomised) (cluster) controlled trials; 3) papers were written in English, Dutch, or German. Data was extracted on content and effectiveness of interventions, and on methodological quality of the studies.

Results: After screening titles, abstracts and full-texts, 6 studies were included in this review. All of the studies incorporated a communication skills training for nurses with diversity in frequency, duration and content. In addition, there was a great variation in outcomes measures for communication. Four studies measured non-verbal communication, all found positive effects on at least some of the chosen outcomes. Four studies measured verbal communication, of which three found positive effects on at least some of the measured outcomes. However, in five studies a high risk of bias was found.

Conclusions: There were few interventions identified that aim to improve communication with people with dementia during daily nursing care. The effectiveness of the interventions is divers and questionable to some extent due to the methodological limitations of the studies. More research is needed to develop and evaluate communication interventions, by including some components of the identified interventions in combination with other promising approaches. Furthermore, consensus is needed about the identification and measurement of communication to be able to compare studies.

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Implementation of the Veder Contact Method in dementia nursing home care: a process evaluation

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Background: As the interaction between caregivers and people with dementia is related to the quality of life of people with dementia, during the last decades many person-centered care methods have been developed. Previous research showed that the person-centered care method, the Veder Method, a 'living-room theatre performance' provided by actors, positively influenced mood and quality of life of people with dementia. Execution of this 'performance' by trained caregivers proved difficult. However, key elements of the method were considered suitable for application in daily care, resulting in the development of the Veder Contact Method (VCM). VCM

combines as well as the Veder Method, elements from existing psychosocial interventions, such as reminiscence, validation, and Neuro Linguistic Programming with theatrical, poetic and musical communication, and applies this in daily care. Implementation of VCM was carried out by Foundation Theatre Veder with a thorough training and coaching program. The design of this program took into consideration implementation barriers known from previous research.

Aim: This study aims to describe the implementation process of the VCM and to gain insight into factors that facilitate or hinder successful implementation of the VCM in daily dementia care.

Materials & Methods: Multiple case study design with the nursing home ward as the unit of analysis.

Eight focus groups with caregivers (n = 42) and twelve interviews with stakeholders in the implemention of VCM were held. Thematic analysis was conducted to identify factors facilitating or impeding the implementation. To structure the analysis the RE-AIM framework is used, an implementation model which describes the Reach, Effectiveness, Adoption, Implementation and Maintenance of the implementation.

Results: Reach (43-86%) and Effectiveness of VCM (e.g. increased experienced reciprocity in contact with residents) facilitated the implementation. For Adoption and Implementation, a number of facilitating factors (e.g. positive approach during training and coaching, development of competences, feasibility of VCM in daily care without requiring extra time) and impeding factors (e.g. resistance against VCM, organizational problems like absence of management and/or colleagues) were found. Little effort was put in Maintenance, only one nursing home developed a long-term strategy. Conclusions: VCM can be applied in daily care without additional time investments. Although adopted by the majority, some caregivers resisted using theatrical communication. Organizational factors (e.g. staffing changes, budget cuts) impeded long-term implementa-

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End-of-life issue: obstacles faced by nurses in delivery of end-of-life care to patients
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Background: Care of end-of-life patients involves many aspects: pain and symptom management, dealing with culturally sensitive issues, support for patients and their families in the process of dying and experiencing the loss, ethical decision making. A survey of relevant literature has revealed that there are obstacles preventing nurses from showing their professional competences. Obstacles are caused by limitations in educational programmes on the death and dying process, different policies and practices in healthcare