

**IN BRIEF**

Summarizing the Evidence

# Dementia Villages: Innovative Residential Care for People With Dementia

## Key Messages

- Dementia villages are a new way to provide residential long-term care for people living with advanced dementia.
- There is insufficient evidence to conclude that dementia villages improve clinical or quality of life outcomes for residents. However, dementia research has found that certain design factors (such as small-scale, homelike group living environments and access to outdoor space and gardens) may improve quality of life. These factors have been mapped to the elements of dementia village care.
- There is not enough information on the cost-effectiveness of dementia villages to draw any conclusions. Costs are an important policy consideration.

## Context

*Dementia* is a broad term that covers various conditions that affect one's brain; these conditions make everyday tasks (both mental and physical) increasingly difficult. The most common form of dementia is Alzheimer disease. Other types include Lewy body, vascular frontotemporal, and dementia associated with conditions such as Parkinson disease.

More than 400,000 Canadians have been diagnosed with dementia and most are over the age of 65. People with early-to-moderate dementia can often live in their home when supported by family, friends, or home care services. As the disease progresses, dementia affects the ability to carry out everyday activities, like eating and bathing. People with dementia who can no longer live safely in their own homes are often moved to long-term care homes with 24-hour care. As Canada's population ages, the number of people living with dementia will increase. As a result, there will be a greater need for effective care models to support these individuals at all stages of disease progression.

## Technology

The dementia village — also known as the Hogeweyk Care Concept — is an innovative care model for people with advanced dementia. The first dementia village, De Hogeweyk, was developed in the Netherlands and is equipped with townhouse units that are shared by small groups of residents with similar lifestyles and interests. All the services of a small village are available to residents, like a supermarket, restaurant, pub, and theatre. These design elements allow residents to live life and receive care in a more homelike setting. Person-centred care practices are applied at De Hogeweyk, with a focus on meeting the individual needs of residents while honouring their values, choices, and preferences. Assisted when necessary by staff, volunteers, or family, residents participate in everyday activities that are meaningful to them, like preparing meals, enjoying the garden, or attending a concert. Residents remain at De Hogeweyk until they die, being supported by a palliative care team in their final days.

## Issue

Recently, there has been significant public interest in using dementia villages as a care model for people with advanced dementia. Conceptually, dementia villages align with existing dementia strategies at the provincial and national levels in Canada. A review of the evidence regarding dementia villages, including quality of life outcomes for residents, cost-effectiveness, and implementation and policy issues, will help Canadian jurisdictions make decisions on if and how to incorporate this model of care within the current health care system.

## Methods

A literature search was conducted of key resources, and titles and abstracts of the retrieved publications were reviewed. Full-text publications were evaluated for final article selection according to predetermined selection criteria (i.e., described elements or outcomes of dementia village care or other innovative models of residential care for people with dementia). Consultations with

experts and stakeholders (i.e., researchers, clinicians, health system leaders, industry, and developers) were conducted to supplement the literature search.

## Results

The literature search identified four published qualitative studies of dementia villages in Europe. No published evaluations of the De Hogeweyk village were identified. No Canadian literature was identified. Further information on dementia villages came from conference presentations, media reports, and correspondence with the co-founders of De Hogeweyk.

New Canadian dementia villages currently in operation or planned to open in the coming years present a unique opportunity for the creation of high-quality evidence on the benefits and costs of this type of care.

## Policy and Implementation Considerations

As dementia villages are established in Canada, it is important that decision-makers consider the many policy, regulatory, and implementation issues associated with this type of care. For example:

- Financial aspects, such as capital costs (e.g., construction of resident common spaces) and operational costs (e.g., the possible need for additional staff and volunteers) should be considered.
- Given that all residents are encouraged to participate in daily life activities (e.g., shopping for groceries, preparing meals), additional staff and volunteers may be required.
- Additional training may be needed for staff and volunteers to support a new model of care, and to empower them to fully involve residents in daily life activities.

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- A strong willingness and commitment from leadership is required to transform a traditional long-term care facility into an innovative model like the dementia village.

### Dementia Villages – Position Statement

CADTH's Health Technology Expert Review Panel created a position statement from this bulletin. The committee advised:

- Although further research and evaluation are needed, dementia villages based on the Hogeweyk Care Concept may have a place within the continuum of dementia care in Canada.
- Built environment (e.g., creating homelike environments with access to outdoor and common spaces) and living environment (e.g., encouraging social activity and meaningful participation in daily household activities) characteristics should be considered when developing or funding residential care facilities for individuals with advanced dementia.
- Before adopting new design standards or models for residential care, decision-makers should consider the ease with which Canadians can access dementia villages. For example, high monthly costs for residents in private facilities, limited availability for publicly funded spots, and limited accessibility for those living in rural or remote communities could make it hard for many Canadians to access dementia villages.

Read more about CADTH and this topic at:  
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