

Master of Public Health Master de Santé Publique

Exploring Narrative Approaches to Enhance Quality of Care for Older Adults in French nursing homes or "Établissements d'hébergement pour Personnes Âgées Dépendantes" (EHPAD): A Literature Review.

Alimatou Dedji BARRY MPH 2, 2023-2024

Haute Autorité de Santé-HAS

Direction de la Qualité de l'Accompagnement Social et Médico-social (DIQASM) 5, avenue du Stade de France – 93218 Saint-Denis La Plaine CEDEX

Professional Advisor:

Cécile LAGARDE

Chef de projet scientifique

Direction de la Qualité de l'Accompagnement Social et Médico-social (DiQASM)

Academic Advisor:

Michael Padget, PhD

Ecole des Hautes Etudes en Santé Publique (EHESP)

Acknowledgements

I would like to first start by thanking GOD. It was only through His love, grace, and mercy that I was able to get this far.

To my husband and son, Moussa LOMPO and Hakeem A LOMPO- thank you for being on my side during this journey.

To my brothers and sisters - thank you for the opportunity.

To my remaining family, friends, and dear loved ones- thank you for your words of encouragement, your help and guidance.

To the team DIQASM- thank you for your assistance.

To my academic supervisor Michael PADGET, and HPM track coordinator, Odessa DARIELthank you for your guidance.

Lastly, I extend my deepest gratitude to my professional supervisor, Cécile LAGARDE and her colleagues Jonathan BIGLIETTO and Renaud HARD (both project manager in recommendation service DIQASM). Your steadfast support and guidance have been invaluable throughout this journey. I am profoundly grateful for the opportunity to work alongside such talented professionals. Your expertise and dedication have been instrumental in helping me navigate this challenging path, and I could not have achieved this without you. Thank you for everything.

Table of Contents

| List of acronyms | |
|-----------------------------|----|
| Abstract | 2 |
| Introduction | 3 |
| Context | 5 |
| Methodology | 8 |
| Results | 11 |
| Discussion | 23 |
| Conclusion | 29 |
| References | 31 |
| Appendix 1 | 37 |
| Appendix 2 | 39 |
| Abstract in French (Résumé) | 40 |

List of acronyms

WHO - World Health Organization

EHPAD - Établissements d'hébergement pour Personnes Âgées Dépendantes (Accommodation Establishments for Dependent Elderly People)

HAS - Haute Autorité de Santé (French National Authority for Health)

ALF - Assisted Living Facilities

NH - Nursing Home

NA - Narrative Approach

PRISMA - Preferred Reporting Items for Systematic Reviews and Meta-Analyses

CNRS - Centre National de la Recherche Scientifique (French National Centre for Scientific Research)

CVS - Conseil de Vie Sociale (Social Life Councils)

DREES - Direction de la Recherche, des Études, de l'Évaluation et des Statistiques (Directorate for Research, Studies, Evaluation, and Statistics)

DGS - Direction Générale de la Santé (Directorate General of Health)

DGAS - Direction Générale de l'Action Sociale (Directorate General of Social Action)

CASF - Code de l'Action Sociale et des Familles (Code of Social Action and Families)

ARS - Agences Régionales de Santé (Regional Health Agencies)

NHCI - National Health Care Institute (Netherlands)

DHA - Dutch Healthcare Authority

SQI - Story as a Quality Instrument

LTC- Long-term care

Abstract

Background: An aging population in France poses significant challenges for healthcare systems, particularly in Établissements d'hébergement pour Personnes Âgées Dépendantes (EHPAD) or nursing homes. These shifting demographics and care quality issues in EHPAD require a revised approach to assessing resident needs and satisfaction toward person-centered care for the elderly. Traditional questionnaires often fail to capture residents' nuanced experiences and preferences, leading to inadequate care planning. This thesis explores the potential of narrative approaches to meet this need by enhancing the quality of care through more personalized interactions in long-term care setting.

Methods: A literature review of qualitative studies was conducted, focusing on narrative approaches used as an instrument to gain insight into the experiences of residents in aged care facilities. Databases like Medline, Embase, and Emcare were searched, including only studies that captured residents' perspectives. The review examines the impact of narrative approaches on residents' care quality, staff satisfaction and outcomes in long-term care facilities, the essential structural and process factors for successful implementation, such as organizational culture and the potential adaptation of these approaches in France, guided by key success factors and international insights.

Results: This literature review of 16 publications found that narrative approaches significantly enhance residents' quality of life by increasing engagement and enabling personalized care. These approaches empower residents to express their needs, informing care practices and improving staff responsiveness. Additionally, they contribute to professional development by providing caregivers with deeper insights into residents' preferences and improving organizational understanding of care. Effective implementation requires strong management support, comprehensive training, and a commitment to person-centered care among other factors.

Conclusion: The literature review suggests that narrative approaches, if properly implemented, can transform care practices in French EHPAD by making them more resident-centered and responsive.

Keywords: Narrative, storytelling, Quality of Care, elderly, nursing home

Introduction

The World Health Organization (WHO) has projected that the population of individuals aged 60 and older will nearly double worldwide, from 12% in 2015 to 22% by 2050¹. France's aging population presents a significant challenge to its healthcare system with a projected 28% of the population aged 65 and older by 2050². This demographic shift is accompanied by an anticipated increase in the elderly experiencing loss of autonomy, expected to rise from 15.3% in 2015 to 16.4% in 2050, affecting nearly 4 million individuals.³

The growing proportion of the elderly necessitates an adaptation of care structures, particularly in nursing homes or "Établissements d'hébergement pour Personnes Âgées Dépendantes" (EHPAD) in France, where 8.8% of those aged 75 and older reside—higher than in many other European countries⁴. Currently, France hosts approximately 7,600 EHPAD serving over 600,000 elderly individuals, many of whom are vulnerable due to varying degrees of autonomy loss or disabilities⁴. However, loss of autonomy and dependence are central concerns in these care organizations, posing significant challenges in meeting residents' complex needs and satisfaction. Additionally, traditional quality assessment methods rely on quantitative data, but this approach has limitations in capturing the nuances of care, raising questions about effectively meeting residents' needs and satisfaction ^{5,6}.

To address these challenges, it's crucial to understand residents' experiences, expectations, and priorities through a comprehensive approach encompassing physical, social, emotional, and psychological well-being. Providing quality care that goes beyond medical contexts is a complex challenge. To overcome this, careful consideration is needed to develop effective methods for gathering residents' experiences comprehensively and respectfully, ensuring adherence to their rights, including free and informed consent as mandated by the 2002 law ^{5,6,7}.

Furthermore, the care quality in these EHPAD has increasingly attracted critical attention, intensified by various factors such as recent scandals and reports highlighting issues ranging from staffing inadequacies to insufficient engagement activities and abuse^{8,9,10}. For instance, a study by the Institut Nationale de la Consommation (National Institute of Consumption) revealed that only 25% of residents finish their meals, indicating widespread dissatisfaction with the food's taste and presentation, and a possible malnutrition¹¹.

Recent literatures highlight the importance of amplifying residents' voices when assessing the quality of care in nursing homes from their perspective ^{12,13}. Sion et al., through a systematic literature review and thematic synthesis focused on residents' perspectives on care quality,

revealed that to ensure a high level of experienced quality of care in nursing homes, it is crucial to directly engage residents in evaluating their care experiences and integrate these insights into quality management practices ¹³. In cases where residents cannot communicate their experience, the use of proxy reports is necessary. ¹³

As a result, several initiatives are being put in place to improve the quality of care and experience of EHPAD residents. A summary document from The Haute Autorité de Santé (HAS) – or French National Authority for Health, titled 'Approaches to Collecting Satisfaction from People Hosted in Nursing Homes,' revealed different methods used by EHPAD to collect data from the residents about the service they received¹⁴. These tools included questionnaires, individual interviews, group discussions, committees, workshops, and other unspecified methods. Some facilities reported not employing any method. The questionnaire emerged as the most frequently used tool, with 79% usage in permanent accommodations, 57% in temporary accommodations, and 40% in daycare services ¹⁴.

However, respondents identified limitations regarding participation in standard methods, such as questionnaires, especially among residents with cognitive impairments ¹⁴. Furthermore, quantitative methods such as surveys and performance indicators are primarily used to assess the quality of care for older individuals. These methods typically involve closed questions with predefined themes, which can simplify the complexity of care quality and may not fully capture the actual quality experienced by the care recipients themselves ^{15,16}. Consequently, to obtain better insight in experienced quality of care, nursing home facilities are turning to more qualitative data collection from residents, their families, and professionals ¹⁶. Internationally, these qualitative data are collected using narrative approaches ¹⁷.

The narrative approach considered here is design to provide a better understanding of residents' experiences, thereby enhancing the empathy and responsiveness of caregivers, understanding these experiences can be achieved by collecting stories, making observations, or using other narrative and visual tools¹⁸. Additionally, this approach is participatory and engaging, allowing professionals to gain direct feedback on their practice from residents, while ensuring the rights and well-being of the elderly are preserved respectfully and with dignity ^{19,20}.

Even though recent studies have started to explore the narrative approach to capture residents' perspectives and enhance the quality of care in nursing home, there is a distinct gap in research specific to the French context. This thesis, therefore, aims to explore the adaptation through a comprehensive literature review on the narrative approach in long-term care including nursing

(NH) home, assisted living facilities (ALF), residential care facilities (RCFs), evaluating its impact, and considering its potential adaptation within the French context.

Objectives

The objective of this paper is to explore the potential of narrative approaches to enhance the quality of care in long-term care settings through a comprehensive literature review. Specifically, the study seeks to:

- 1. Examine the impact of narrative approaches on the quality of care for residents, staff job satisfaction, and overall outcomes in long-term care facilities.
- 2. Identify the structural and process factors that contribute to the successful implementation of narrative approaches in long-term care settings.
- 3. Develop and propose strategies for implementing narrative approaches in French EHPAD, taking into account key success factors identified from literature and international experiences.

Research Questions

To achieve these objectives, the study will address the following research questions:

- 1. What impact does the narrative approach have on the quality of care for residents, staff job satisfaction, and overall outcome in long-term facilities, as documented in existing literature?
- 2. Which structural factors (e.g., organizational culture, staff training, resource allocation) and process factors (e.g., communication, resident engagement) contribute to the successful implementation of the narrative approach in long-term care, according to existing literature?
- 3. How can the narrative approach be adapted for use in France, considering the key success factors identified in the literature review and international experiences?

Context

Definitions of Quality of Care

According to the WHO, quality of care is determined by the extent to which health services provided to individuals and populations are likely to achieve desired health outcomes ²¹. While definitions of quality healthcare may vary, there is a broad consensus that it should be effective, safe, and people centered. Effective care involves delivering evidence-based healthcare services

to those in need, ensuring that interventions are appropriate and timely. Safety focuses on minimizing harm to patients throughout the care process, emphasizing the importance of risk management and patient protection. People-centered care, on the other hand, is tailored to align with individual preferences, needs, and values, ensuring that the care provided respects and responds to the unique circumstances of each patient.²¹

In nursing homes, many important practices are closely monitored, but there has been a significant emphasis on person-centered care, often regarded as the gold standard of care²². Over recent years, many definitions of person-centered care have surfaced, each adapt to its specific context. However, these definitions all share a few key points: It is essential to know the individuals receiving care personally, involve them in making decisions about their care, and recognize the importance of their relationships with caregivers²³. This underscores the increasing importance of including the service user's perspective when assessing quality of care and focusing on what matters most to them, i.e., the user's experienced quality of care.

The dynamic understanding of quality suggests that it is not a fixed concept, but an evolving and interactive process deeply influenced by the relationships among residents, their families, and professional caregivers²³. This nuanced understanding of quality necessitates an evaluation approach that surpasses traditional quantitative metrics to include qualitative narrative data. Such an inclusive approach acknowledges the complex nature of quality of care and provides the unique needs of vulnerable populations in nursing home settings ²³. Therefore, to enhance the assessment and improvement of care quality, it is imperative to engage directly with residents. Conducting in-depth interviews allows for a more nuanced understanding of their lived experiences within these facilities.

Introduction to Narrative Approach (NA)

The **narrative approach (NA)**, a significant development in psychology, traces its origins to the pioneering work of Theodore R. Sarbin. In his seminal 1986 book, 'Narrative Psychology: The storied nature of human conduct Sarbin introduced the term' narrative psychology, he posited that the best way to understand human conduct is through stories, advocating for this understanding to be derived from qualitative research ²⁴.

Building on Sarbin's work, other influential psychologists such as Jerome Bruner with his book "Actual Minds, Possible Worlds" (1986) investigated how we understand stories using a more factual, research-based approach. At the same time, Dan McAdams (1985) created a set of rules and a method for analyzing personal stories, following a traditional approach that focuses on

individual personalities ²⁵. This approach has found application in diverse fields, including psychotherapy, counseling, and organizational development ²⁵.

Furthermore, the term 'narrative' highlights the importance of people's stories about their lives and the impact that can arise from various ways these stories are told and retold ²⁶. Among many definitions of NA, one of them is that it relies on the ability to produce narratives to make sense of the world continuously, and these narratives, in turn, influence oneself and one's way of living ²⁶. Bartel and Garud, in the article "The Role of Narratives in Sustaining Organizational Innovation", stated that stories help people understand and solve new or unclear situations as they arise. Over time, stories about creativity and innovation build up collective memory in organizations ²⁷.

Thus, the memory helps people use past ideas and experiences to guide current and future projects ²⁷. In LTC, the narrative approach plays a significant role, emphasizing the understanding and respect of residents' life stories and experiences. This understanding then guides their care and support ²⁷. Narrative approaches can be implemented through interviews, focus groups (a specific form of group interview), or a photovoice approach.

Interviews or Focus Groups

In this method, caregivers, professionals, and/or family members are asked to share their experiences through open- ended questions. Generally, these questions address overall care experiences, but sometimes they focus on specific topics like "end of life care, and advanced care planning"," well-being", and five other areas such as "how I spend my time, physical activities, food and drink, self- care, home environment". It is important to monitor whether the clients' perspectives were genuinely expressed or if the topics highlighted were those deemed significant by the organization. Typically, the interviews are conducted by staff members, who interviewed participants that could be residents alone, residents and relatives, or a mix of residents, staff, and relatives ^{28,29,30}.

Interviews can be employed either independently or alongside other sources of information, such as a questionnaire. They are particularly useful in the initial stages for identifying the most important subjects or themes to explore, and in the later stages, they provide clarity and depth to the responses obtained from closed questions. Moreover, it is important to seek a diversity of profiles and viewpoints to ensure a comprehensive understanding of the topics being discussed³¹.

For conducting the interviews, interviewer receives training on interviewing techniques, analysis, and reflection ³². The users involved in these interviews are generally a mix of individuals with and without cognitive issues, with articles specifically including participants with dementia. Researchers conduct these interviews, using tools like emotion cards, picture symbols, and a visual scale to help participants express their feelings when necessary ³³.

Photovoice approach

The photovoice approach resembles the interview approach but includes taking photos related to one's care experiences as part of sharing these experiences, followed by an interview or group discussion, and often an art display. The participants are usually guided by a general question about personal care experiences related to the photos taken. Participants include individuals without cognitive problems, family caregivers, and home care workers ³⁴. Photographs hold significant potential to enhance storytelling and foster social connections among older adults living with dementia in residential aged care facilities, owing to their communicative power. For example, during group discussions, interviewers can identify key themes such as joy found in residential environment, active participation in leisure activities, and the importance of social interactions and connections, particularly with fellow residents and staff ³⁵.

Methodology

For this research, a literature review was deemed the most appropriate method, and we followed the rigorous PRISMA guidelines to ensure the reliability and methodological soundness of our review. Our search strategy was developed in collaboration with a research documentarian, leveraging their expertise to ensure thoroughness. We identified key terms related to the main categories: "older adults", "long-term care," "quality of care," "narrative approach," and "storytelling" from existing literature, and applied this strategy to search databases such as Medline, Embase, and Emcare. The research was conducted between May 27, 2024, and June 6, 2024. Using these terms, we developed two research equations, which were then submitted to these databases for data collection, as outlined in **Box 1** and **Box 2**.

Box 1

(((Homes for the Aged[Title]) OR ("Homes for the Aged"[Mesh])) OR ((((((("Residential Facilities"[Mesh:NoExp]) OR ("Assisted Living Facilities"[Mesh])) OR ("Nursing Homes"[Mesh])) OR (residential Facilities[Title])) OR (Assisted Living Facilities[Title])) OR

(Nursing Homes[Title])) AND (((("Aged"[Mesh]) OR "Aged, 80 and over"[Mesh]) OR "Frail Elderly"[Mesh]) OR ((Aged[Title]) OR (Elderly[Title]))))) AND (((story telling[Title]) OR ((((focus group[Title]) OR (interview[Title])) OR (narration[Title])) OR (narrative[Title]))) OR (((("Focus Groups"[Mesh])) OR ("Self Report"[Mesh])) OR ("Forms as Topic"[Mesh])) OR ("Narration"[Mesh]))) OR ("Interviews as Topic"[Mesh])))

With the term quality: ((((((Quality Improvement [Title]) OR (Quality of Life[Title])) OR (Quality of Service[Title])) OR ("Quality of Life"[Mesh])) OR ("Quality of HealthCare"[Mesh])) OR ("Quality Improvement"[Mesh])

Box 2

(EMB.EXACT("storytelling") OR TI("storytelling" OR "story telling") OR (TI("narrative*") NOT TI("narrative review" OR "narrative study" OR "narrative analysis" OR "narrative synthesis")) OR (TI("story" OR "stories") AND TI("quality" OR "centred" OR "centered" OR "improv*")) OR TI("life stories")) AND (EMB.EXACT("nursing home") OR TI,AB("nursing home*") OR EMB.EXACT("nursing home patient") OR ((EMB.EXACT("assisted living facility") OR TI,AB("assisted living facilit*") OR EMB.EXACT("residential care") OR TI,AB("residential care") OR TI,AB("long term care setting*") OR TI,AB("long term care facilit*") OR EMB.EXACT("residential home*") OR TI,AB("group home*")) AND (EMB.EXACT("frail elderly") OR EMB.EXACT("very elderly") OR EMB.EXACT("institutionalized elderly") OR EMB.EXACT("aged") OR TI,AB("old*" OR "elder*" OR "aged"))))

For the review, we included papers with empirical data, written in English, and published within the past ten years. This time frame was chosen to ensure our focus was on the most recent studies and articles. Two additional articles from other sources, published more than ten years ago, were also included due to their relevance.

For the inclusion criteria, we carefully selected studies with a "narrative approach" used as an instrument to gain insight into the experiences of residents in long-term care. We also included stories and visual resources because they provide valuable insights. This rigorous selection process ensured that only the most relevant and insightful studies were included in our review.

The exclusion criteria included articles that are not relevant to our research and articles focused on perceptions of family members or caregivers. This was done to maintain a focus on the use of the narrative approach in long-term care and to ensure the relevance of the included studies.

A total of 566 articles were identified from the PubMed (n=496) and Embase-Emcare (n=90) databases. Additionally, four (N=4) references were recommended by professionals involved in developing the methodological guide "Collecting the Views of People Living in Nursing Homes and Other Social and Medico-Social Institutions." After removing duplicate records (n=476), 96 unique records were screened based on their title and abstract. We excluded 80 studies, primarily because they focused on narratives presented as life stories or involved populations other than residents in long-term care facilities. Subsequently, 16 articles that met the inclusion criteria were selected to address the research question. After a thorough screening of the full text of the 16 selected articles, all were retained as they met the inclusion criteria, resulting in 16 final studies included in the analysis.

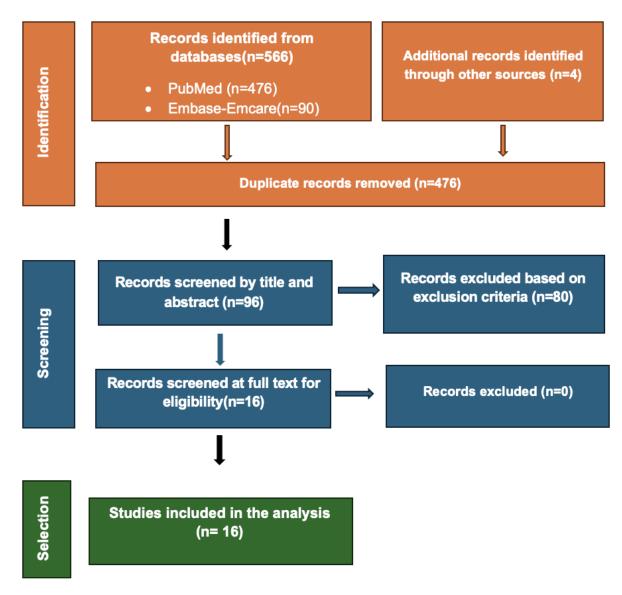


Figure 1: Flowchart of the selection process

Results

This section will address the research questions by analyzing the 16 articles included in the study.

| Table 1: Characteristics of Included Studies | | | | | | | |
|--|--|--|--|--|---|--|---|
| Source | Aim | Setting | Sample Size/Description | Data Collection/Analysis | Results | Application | Limitations |
| Sion et al. (2024) | Evaluate narrative methods for improving care quality | Nursing homes, Netherlands | Residents, caregivers, others | Narrative methods: interviews, reflections | Detailed insights into care quality | Integrated into quality improvement | Time and resource intensive |
| Hamers et al. (2023) | Develop methods using narratives for long-term care improvement | Nursing homes, Netherlands | Residents, care staff, significant others | Observations, interviews, focus groups | Developed "Experience Matters" method | Applied in care evaluation and policy | Needs organization support |
| Sion & Hamers (2023) | Identify barriers and facilitators for implementing 'Connecting Conversations' | Nursing homes, Netherlands | 42 conversations across 4 homes | Process evaluation: interviews, focus groups | Key facilitators: leadership, clear instructions | Improved quality management strategies | Resource constraints |
| Scheffelaar et al. (2023) | Evaluate "The Story as a Quality Instrument" for care improvement | 6 locations, Netherlands | 46 participants in meetings | Observations, focus groups | Identified learning mechanisms; holistic care views | Structured learning tool for care teams | Time- intensive, COVID-19 delays |
| Scheffelaar, Janssen, & Luijkx (2021) | Develop a narrative- based quality instrument | Long-term care, Netherlands | Literature review, no specific sample size | Thematic analysis | Developed "The Story as a Quality Instrument" | Framework for person-centered care | Needs empirical testing |
| Sion et al. (2021) | Introduce a stepwise approach to narrative quality data for care improvements | Dutch nursing homes | 24 triads in 8 homes | Narrative data analysis | Developed valence and agreement scores method | Enhanced systematic care quality | Needed more time. |
| King & Miller (2021) | Explore photographs for storytelling and social connections | Residential aged care, Australia | 14 residents, 3 staff | Narrative enquiry | Facilitated connections, improved communication | Promoted narrative care approaches | Small sample size |
| Sion et al. (2020) | Assess feasibility of "Connecting Conversations" method | 18 nursing homes, Netherlands | 275 conversations | Feasibility metrics analysis | Feasible with challenges, positive feedback | Potential for quality improvement | Scheduling challenges |
| Sion et al. (2020) | Validate "Connecting Conversations" for | 10 nursing homes, Netherlands | 149 conversations | Group discussions | Validity confirmed, appropriate for | Supports quality monitoring | Needs coordination |

| | care quality assessment | | | | quality assessment | | |
|--|---|---|--|-----------------------------------|---|---|---|
| Huijg (2019) | Develop narrative approach to enhance resident well-being | 11 nursing homes, Netherlands | Participatory action research | Observations, interviews | Improved well- being, integrated stories in care | Enhanced person- centered care | Requires continuous training |
| Buckley, McCormack, & Ryan (2021) | Evaluate narrative framework for person-centred care | Residential care, Ireland, UK | 37 residents, 38 staff | Participatory action research | Influenced practice development | Integrated narrative practices in care | Needs strong support |
| Buckley, McCormack, & Ryan (2018) | Develop narrative- based care framework | Residential care, Ireland | 46 narrative interviews, focus groups | Hermeneutic analysis | Framework with four pillars for care integration | Supports narrative, person-centred care | Cultural and attitudinal shifts needed |
| Walker & Paliadelis (2016) | Investigate lived experiences of older people in RACFs | 5 RACFs, Australia | 18 residents aged 65+ | Semi-structured interviews | Loss of autonomy, importance of relationships | Informs care planning | Excludes residents with dementia |
| Milte et al. (2016) | Understand quality care from perspectives of people with dementia | RACFs, Australia | 15 people with dementia, 26 family members | In-depth interviews, focus groups | Personhood and connections key to quality | Supports person- centered care | Small sample, limited generalizabi lity |
| Hewitt, Draper, & Ismail (2013) | Evaluate participatory approaches for improving life quality | Residential home, Guyana | 24-33 residents, staff | Observations, focus groups | Highlighted benefits, challenges | Informed future practices | Limited participation due to dynamics |
| Murphy et al. (2010) | Evaluate Talking Mats for communication in dementia care | Dementia care facilities, Scotland | 31 participants with dementia | Interviews, video analysis | Improved communication, on-task behavior | Enhances person- centered care | Small sample, limited generalizabi lity |

Table 1: Characteristics of the 16 studies that were included.

The Impact of Narrative Approach in Care Institutions Settings / Long-Term Care

Impact of Narrative approaches on Residents Experience of Quality of Care

The study conducted by Van Delft E. et al named "Feasibility of the Story as a Quality Instrument", revealed that narratives in nursing home help establish a personal connection ³⁶. They enable residents to share their experience through professional interviews, and the data obtained from these interviews are later transformed into written or visual representations that highlight essential experiences. These activities are part of a broader approach to enhance the quality of care by capturing detailed, personal feedback from care recipients, which can then be used by care professionals to learn and improve care practices within their locations ³⁶. More details are available in **appendix 1** for the tool "story as a quality instrument".

Moreover, to enable residents to express their experiences, Huijg's participatory research in 11 nursing home organizations in the Netherlands, utilized the "Doodle Me tool" ³⁷. This tool encourage open dialogues with residents about their primary concerns and the gathered information is used to craft visual summaries (Doodle boards) that aid caregivers in comprehending residents ³⁷.

A study by Sion K et al., employed the "Connecting Conversations" method ³⁸. This narrative method, which evaluates the perceived quality of care in nursing homes from the resident's viewpoint, incorporates the perspectives of family and caregivers showing that the perception of the family and caregivers are also important to provide good quality of care to the residents through separate conversations (**appendix 2**). Also, it reveals that residents in nursing homes are often capable of discussing their perceived quality of care, even when they face verbal challenges³⁸.

Building on the studies above, Walker and Paliadelis underscore that sharing experiences in nursing homes allows caregivers to better understand residents' wishes and desires. Their study emphasizes the importance of this understanding, particularly given the challenges older adults face in maintaining autonomy, dignity, and meaningful relationships when excluded from decision-making processes ³⁹. This study focused on participants who were cognitively impairments ³⁹.

In their study, Hoof et al. explored residents' experiences of the sense of "home" in nursing homes using interviews, focus groups, and photography. The researchers identified several key themes that residents associated with their well-being, including interior design and building features, the ambiance of eating and drinking, autonomy and control over daily life, involvement of relatives,

engagement with others and in activities, and receiving good quality care. In their study, Hoof et al. focused on the physical aspects of the sense of home, rather than the psychological and social factors that also contribute to this feeling ⁴⁰.

Empowering Residents Through Narrative Approaches

King and Miller's study showed how a simple and low-tech approach can use the strong visual impact of photography to create connection. By using photographs to foster collective storytelling, this method enabled residents to take ownership of their stories and experiences rather, than depending on others to speak on their behalf ³⁵. This photovoice approach not only encouraged creativity and self-expression but also promoted a sense of purpose and fulfillment among the residents. By allowing residents to exert control over their environment, the approach supported autonomy and empowered them to express their individuality. This method also deepened their understanding of their own needs, reinforcing the importance of person-centered care, which emphasizes "knowing, respecting, and valuing the person". This study focused on participants with cognitive capacity ³⁵.

Walker and Paliadelis further explored the theme of empowerment in their research, highlighting significant issues such as loss of autonomy, dignity, and control among residents ³⁹. Their work underscored the critical role that meaningful relationships play in enhancing residents' experiences. Through in-depth discussions, the narrative approach addressed residents' desires and concerns, amplifying their voices and ensuring that the data collected resulted to tangible changes in their care, thereby reinforcing the residents' sense of empowerment ³⁹.

Similarly, Scheffelaar et al. conducted a study in which residents' voices were given priority during quality meetings, resulting in the creation of action plans to improve care ⁴¹. By deeply understanding what is most important to the residents through their narrative, care professional were able to identify key areas for improvement and implement meaningful changes such as a shift in attitude among care professional, who adopted a more empathetic view of older adults ⁴¹.

The Connecting Conversations Method by Sion et al., as previously mentioned, also significantly empowered nursing home residents by facilitating meaningful dialogues. This method was inclusive and accommodated all residents regardless of their cognitive abilities, by adapting conversation techniques to ensure that even those with communication challenges had their voices heard and respected ³⁸.

Additionally, Huijg's study, involved residents, their families, and staff in care decisions, empowering all participants to actively engage in the decision-making process ³⁷. This approach aligns with the findings of Van Hoof et al., who emphasized the importance of involving residents in activities that resonate with their past experiences and interests, enabling individuals to discover their purpose and empower themselves ⁴⁰.

Narrative Approach impact on Residents' quality of life

Murphy et al. investigated the role of narratives in supporting residents with communication challenges, particularly those with dementia. Their research highlighted the significant communication difficulties faced by individuals with dementia, as the deterioration of communication is a distressing symptom of the condition. The study specifically investigated the effectiveness of the "Talking Mat Framework" in improving communication among individuals with dementia. Involving 31 participants at various stages of the condition, the findings indicated that the use of talking mats significantly improved communication effectiveness compared to traditional methods⁴².

The study "Exploring the Use of Photovoice" by Mysyuk and Huisman introduced an innovative approach to improving the care of older individuals in nursing homes ⁴³. Photovoice, the method employed in this study, empowers residents to express their perspectives through photography, offering a unique form of self-expression ⁴³. This technique, also utilized in Miller's research, demonstrated that photovoice allows residents to visually convey their needs and experiences. Both studies found that this method helps staff gain a deeper understanding of residents' needs, ultimately leading to improved quality of care practices. This approach goes beyond traditional verbal communication by equipping residents with cameras and helps increase residents' engagement and participation in the care process ^{35,43}.

Hewitt et al. emphasized the importance of participatory approaches in improving the quality of life in residential homes for older individuals in Guyana ⁴⁴. Their research explored how actively involving residents in identifying and implementing solutions to enhance their living conditions can lead to positive outcomes. The study reported favorable feedback from residents, who valued their involvement in the process. These findings highlighted the effectiveness of participatory methods and underscore the importance of continuing to employ such approaches, despite potential practical and ethical challenges. The study also pointed to the necessity of developing strategies that account for the physical and cognitive limitations of residents to ensure their meaningful participation ⁴⁴.

The Impact of Narrative Approach for Professional

Sion et al. illustrated the benefits of Narrative Approaches in enhancing the professional development of caregivers. Programs such as "Connecting Conversations" and the "Experience Matters" approach are highlighted as effective methods that allow caregivers to learn directly from the experiences and preferences of residents and their families. The approach improved caregivers' ability to provide personalized care and deepened their understanding and appreciation of the individuals they serve. Additionally, Sion et al. reported that such empowerment significantly increases job satisfaction and fosters a stronger sense of team cohesion among care staff ⁴⁵. Likewise, Hamers's study highlighted the positive impact of narrative approaches on the professional development of caregivers, further underscoring their importance in long-term care settings ⁴⁶.

Scheffelaar et al.'s study, focused on how SQI could be used to generate actionable insights for improving care quality-based narrative of older adult. This study offers a clear example of how narrative approaches can be effectively implemented in care settings ⁴¹. In addition, authors demonstrated that learning from the experiences of older adults significantly enhances care quality and underscores the value of professionals sharing residents' stories with one another to improve care practices. Participants in the study reported gaining a broader perspective, experiencing shifts in their attitudes, and recognizing that even small adjustments in their approach can lead to meaningful improvements in care delivery ⁴¹.

Building on the insights from Scheffelaar et al.'s study, Huijg's research further underscored the transformative impact of narrative and training tools on professional understanding and care practices. In the 'Enjoying Life' project, which aimed to amplify the quality of care across 11 nursing home organizations in the Netherlands, staff initially believed they were well-acquainted with their residents. However, post-training questionnaire responses indicated a significant shift, with 87% of staff reporting a deeper understanding of their residents, 58.7% stating they knew them better, and 28.3% feeling they knew them much better. This study highlighted the effectiveness of narrative approaches in deepening caregiver-resident relationships and improving care quality ³⁷.

Helen Walker and Paliadelis' study highlighted the importance of engaging with the personal stories of residents in residential care facilities as a means to better understand and meet the emotional and psychological needs of the elderly, thereby promoting professional development for care staff ³⁹. This finding aligns with the results of Huijg's study, where care staff reported that

integrating residents' personal narratives into care not only improved the residents' overall experience but also significantly increased the staff's sense of fulfillment in their work ³⁶. These studies emphasized that fulfillment is closely linked to better staff retention rates, as caregivers find greater meaning and satisfaction in their roles when they are able to connect more deeply with the individuals, they serve ^{37,39}.

In Huijg's study, the emotional depth and rewards of caregiving are powerfully illustrated through the use of narrative approaches. A caregiver shared a moving experience with a resident's daughter, who, despite her usual grumpiness, expressed heartfelt gratitude after her mother's passing by gifting the caregiver a keychain inscribed with "You were always my rock". This deeply touching moment brought the caregiver to tears and exemplified the profound appreciation and value that caregivers can experience in their roles. This study underscored how narrative approaches not only build empathy between caregivers and residents' families but also enhance the overall fulfillment and emotional rewards that caregivers gain from their work ³⁷.

Furthermore, in Buckley et al.'s study "Working in a Storied Way - Narrative-based Approaches to Person-Centered Care and Practice Development in Older Adult Residential Care Settings," case studies showed how staff across various wards used a narrative framework to identify practice themes and devise improvement strategies ⁴⁹. In this study, process of theme identification, discussion, and implementation, which fosters critical reflection, learning, and application, is recognized as a key form of professional development ⁴⁹.

The reviewed articles did not provide specific examples of how professionals reflect on their practices. However, the NA encourages professionals to move beyond simply speaking on behalf of residents and instead fosters a deeper examination of their own practices. For instance, if a resident expresses that mealtime, though adapted, does not suit them because they are not accustomed to eating at those times, or if scheduled bath times are inconvenient, the professional is forced to reflect and adjust their approach accordingly. Effective practice must be adaptable and responsive to individual needs.

Often, professionals may not inquire about residents' preferences—not out of neglect, but to minimize the risk of errors. As a result, this can inadvertently lead to practices that do not fully meet residents' needs. For example, if a professional observes that plates are empty and assumes the meal went well, but residents reveal that they are quickly out of hunger and lack of options, the professional should question this practice and seek ways to adjust it to better serve the residents' needs and improve the quality of care.

Impact of Narrative Approach on Care Organization/Long-Term Care

Stories about experiences, so-called narratives, help care organizations understand the resident's world, their experiences, preferences, and satisfaction to better improve care planning relationships ³⁷. The study by Sion et al., also emphasized that stories about care experiences provide valuable insights into how care is perceived. These detailed accounts help care organizations such as directors of nursing homes or decision makers to understand what is important to residents, leading to better personalized care ⁴⁵. It is also argued in this same study of Sion et al., that residents, significant others, and professionals may better understand each other's needs and perspectives on good care and develop shared goals using a narrative approach, which further strengthens their relationship. The authors argued that the process contributes to quality improvement and thus becomes time well spent for care organization ^{37,45}.

Furthermore, the study by Scheffelaar et al. demonstrated that narrative approaches can be timeefficient for organizations with adequate staff resources ⁴¹. Similarly, Huijg's study highlighted the
positive outcomes of the narrative approach through the "Enjoying Life Plan" project within a care
organization and discussed plans to extend this approach to numerous other nursing home
facilities ³⁷.

Finally, while the reviewed articles emphasized that the narrative approach enhances both resident satisfaction and staff job fulfillment, they did not explore its broader organizational impact. Narrative Approach has the potential to transform care organizations into more reputable institutions, attracting more residents and staff while earning the trust of residents' families. This, in turn, can make nursing homes more competitive, leading to improved staff retention, better pain management, and overall higher quality of care.

Key Factors Contributing to the Success of the Narrative Approach in Elderly Care

The review of the literature showed that communication, resident engagement, organizational culture, and resources all play important roles in the success of the narrative approach in nursing homes.

The literature identifies communication as an essential factor for the success of the narrative approach in care settings. Effective communication, whether verbal or non-verbal, enables older adults to express their viewpoints and perspectives in a natural and unstructured manner to better understand the aspects of care that are most important to them. The authors also highlighted that

open expression facilitates the implementation of changes by caregivers and care organizations to improve residents' current situations ^{37,40,42,45,49}.

In their study by Scheffelaar et al., explored the effectiveness of narrative quality instrument and emphasize that the process of in-depth discussions, exchange of perspectives, abstraction, and concretization, significantly contributes to individual learning outcomes. These outcomes include changes in attitude and a more holistic understanding of older adults, which not only improve the knowledge and skills of caregivers, but also make them more effective in their roles. Complementary findings by Huijg, Sion et al., and Buckley et al. further emphasize that effective narrative practices rely on communication, collaboration and active listening —core competencies for caregivers, which should be prioritized in daily practice ^{37,41,45,52}.

Mysyuk and Huisman's study highlighted the importance of resident engagement in the narrative approach by encouraging older adults to use a visual method to express their perspectives. The authors focused on encouraging active resident participation to obtain more comprehensive data for analysis, and they used the findings to inform and improve care planning ⁴³.

In the study by Scheffelaar et al., resident engagement was facilitated through the interviewer's role in actively listening and assisting the individual in sharing their story. This was achieved through verbal encouragements such as affirming words, humming, and asking clear questions, as well as through non-verbal cues like nodding, facial expressions, and attentive posture. The study emphasized that the comfort and willingness of the person being interviewed to express themselves is contingent upon the interviewer's ability to listen without judgment and establish mutual trust. Consequently, interviewers were advised to adhere to ethical principles such as respect, mutuality, openness to different viewpoints, and a willingness to negotiate, ensuring a supportive and respectful environment for residents to share their experiences ⁴⁷.

Scheffelaar et al. emphasized that during the narrative interview process, it is essential to avoid questions that seek opinions or reasons. Instead, they recommended the use of open-ended questions, as the more open the question, the more detailed the responses are likely to be. The authors cautioned against the use of 'why' questions, which can disrupt the flow of the interview. They advocated for attentiveness and engagement by following up on the respondent's own wording, ordering, and phrasing to preserve the interviewee's framework of meaning ⁴⁷.

Training of interviewers

Sion et al. stressed the importance of thorough interviewer training before conducting narrative approach interviews. In their study, nursing staff employed at a different nursing home were selected as interviewers. These interviewers participated in a 3-day Connecting Conversations training, which equipped them to perform separate interviews with residents, their families, and professional caregivers ⁴⁸.

In addition, Sion et al. detailed that interviewers were invited to informally evaluate the Connecting Conversations training at the end of each day. They were asked to provide feedback on their satisfaction with the training content, their level of engagement, and confidence, as well as any suggestions for improvement. After completing all conversations, interviewers were required to complete a written customer journey that described their experience with the training, the process of scheduling and conducting conversations, documentation procedures, and any additional comments they wished to provide. The authors highlighted that proper training is essential for conducting successful interviews, as it ensures the collection of accurate and reliable information for subsequent analysis ⁵⁰.

Care Institution's Culture Change

The success of NA is also reflected in the cultural shift with LTC facilities . In Sion et al.'s literature review "How stories can contribute toward quality improvement in long-term care", the authors highlighted that narrative data is descriptive and subjective, allowing residents, their significant others, and care professionals to determine what they consider high-quality care. This can reveal conflicting norms and values, showing that quality care is a highly individual concept that standardized themes cannot capture. The study stated that quality of care is not an unchanged entity but a dynamic one that varies for each person, underscoring the need for a new perspective in quality assessments ⁴⁵.

The reviewed articles did not explicitly address conflicting values, such as those between the families of residents and the professionals providing care. Families may express concerns that, despite paying for a high-quality care organization, they do not perceive the level of care they expect. On the other hand, professionals may argue that they strive to deliver quality care, but face challenges such as understaffing, which hinders their ability to meet residents' needs effectively. This disconnect underscores the need for change to improve conditions and ensure that care organizations align more closely with the needs, preferences, and wishes of the elderly. Sometimes, these improvements can be achieved through relatively simple measures, such as better managerial planning.

Sion et al. argued that care organizations should reflect on the reasons for assessing quality care, focusing not only on the assessment itself but on the intended use of the data collected. They emphasized that narrative information can be a valuable starting point for quality improvement through a participatory and co-creative process that involves various stakeholders working together to generate new insights. For this approach to be successful, the authors suggest that care organizations must undergo a cultural shift—from relying only on checklists to prioritizing reflection and learning ⁴⁵. Moreover, Sion et al. indicated that communication between facility regulators and care organizations should be strengthened to ensure that care organizations have systems in place that support organizational learning from both qualitative and quantitative quality information ⁴⁵.

Resource Allocation and National Initiatives

Hamers, in his study "Using Narratives to Improve Quality of Long-Term Care for Older People," along with Scheffelaar, Sion et al., emphasized that achieving positive outcomes for the elderly through the implementation of narrative methods requires significant resources and a shift in organizational culture ^{41,46,51}. Building on this, the study by Huijg successfully demonstrated the initial implementation of a narrative project, with plans for broader adoption across multiple organizations in the Netherlands. Central to this expansion is the development of customized training materials designed to facilitate a smooth implementation and practices of NA. Additionally, the process includes a careful assessment of the implementation to identify and address potential challenges effectively, ensuring that the narrative approach can be integrated successfully on a larger scale ³⁷.

Huijg et al. also underscored the importance of significant collaboration with various regulatory and oversight bodies, including the Dutch Ministry of Health, the Dutch Health Inspectorate, Netherland's National Health Care Institute (NHCI), the Dutch Healthcare Authority (DHA), and leading health insurers, in the continued expansion of the narrative project. This study showed that collective involvement of these stakeholders is crucial for the successful scaling of the narrative approach. Additionally, Sion et al. emphasized the role of funding in facilitating the dissemination of narrative methods, noting that seven long-term care organizations in the Netherlands within the Living Lab in Ageing and Long-Term Care contributed to the project's success by enhancing the quality of care through these approaches ⁴⁸.

Finally, the literature review pointed out that one of the key successes of the narrative approach lies in the availability of time and sufficient staffing. Therefore, it is essential for LTC organizations

to allocate adequate time for their employees and provide the necessary resources to support this approach effectively ^{45,47,48}.

Discussion

The literature review showed that the Netherlands has a unique narrative approach that can be learned from. This country, like France faces challenges related to aging population and quality concerns in nursing home, largely driven by increasing life expectancy. In 2017, the Dutch NHCl released guidelines for nursing home care in the Netherlands. These guidelines emphasize the importance of focusing on the individual needs and stories of residents, known as personcentered care. However, the guidelines did not explain how to effectively use these personal stories in daily care or evaluate them during inspections.

To improve existing guidelines, the Leyden Academy on Vitality and Ageing launched a two-year project called Enjoying Life, supported by Netherland's Ministry of Health, Welfare, and Sport. The project aimed to develop methods for integrating and assessing personal stories within care delivery and evaluation. The Dutch care sector is progressively adopting person-centered care in nursing homes for older adults, with a strong emphasis on well-being, relationships, and individualized care ³⁶. This focus on person-centered care makes the Netherlands an ideal case to be studied, whereas a case from another country might be less applicable.

Challenges mentioned in the literature

Narrative approaches have been implemented in at least one location and are available in numerous others. However, the implementation presented several challenges as noted by the authors in the review. Firstly, diminished cognitive abilities among residents with mental health issues have been identified as a significant obstacle ^{35, 39, 50}. Secondly, the approach requires substantial time and support from staff to be effectively executed ^{38, 41, 45}, which may increase quality improvement, thereby making it beneficial in the long term ⁵³.

Thirdly, managing and analyzing the data produced by narrative approach posed another challenge ⁵¹. Systematic data capture and utilization to improve care practices and quality assessments require effective management prioritization, which falls under the purview of nursing home administration ³⁷. A fourth challenge is the need for significant organizational support and resources to fully integrate narrative approaches ^{46, 50}.

A particular study highlighted the difficulty of integrating narrative approaches with the daily routines of nursing home staff, who must balance these activities with their regular duties.

Activities such as conducting interviews, creating Doodle boards, and participating in training sessions demanded a considerable time commitment. Care aides required support to manage these additional tasks alongside their usual responsibilities ³⁷. Moreover, a cultural shift towards a new mindset and practice approach were mentioned ³⁷. Understanding these challenges can aid French EHPAD in more effectively implementing narrative approaches.

French Context

The articles included in the review highlighted the significant impact of the narrative approach in care settings. This approach enables residents in nursing homes to share their experiences, which enhances their quality of life and encourages professionals to deliver better care. However, the success of the narrative approach depends on several essential factors, including effective communication, resident engagement, thorough interviewer training, cultural change within care institutions, adequate resource allocation, and support from national initiatives.

In France, alongside the satisfaction questionnaires used in EHPAD to assess residents' satisfaction with the services they receive, another approach, known as the Conseil de Vie Sociale (CVS) or Social Life Council, promotes resident participation in these facilities ^{14,54}. However, unlike the narrative approach, CVS focuses more on the operation of facility rather than deeper on the individual wishes and preferences of residents.

The law of January 2, 2002, played an essential role in strengthening residents' rights in social and medico-social establishments by formally recognizing these rights and establishing clear guidelines. This legislation encourages residents to actively participate in the management and daily activities of EHPAD. Notably, Article L. 311-6 introduced the CVS as a platform for residents to actively contribute to the functioning of the facility. In cases where a CVS is not in place, alternative forms of participation must be implemented to ensure that residents have a meaningful voice in the operations of the facility ⁵⁴.

The CVS is designed to be a place where residents can voice their opinions and actively engage in facility's daily life. However, in practice, CVS often falls short of being a truly representative voice for residents within EHPAD. According to a survey by the DREES, when residents encounter a problem, they are more likely to turn to the staff (60% of the time) or their family (20%), with only 2% of residents choosing to approach the CVS ⁵⁵. This data suggests that the majority of residents do not view the CVS as the appropriate venue for sharing their opinions and suggestions.

Several challenges hinder the effectiveness of the CVS, despite its potential to enhance resident participation. High turnover among residents leads to frequent changes in elected representatives, disrupting continuity and stability within the council. Additionally, families often struggle to represent residents effectively due to limited availability and a lack of strong connections with other residents' families. Furthermore, some residents are hesitant to serve as CVS representatives, fearing criticism or backlash for voicing their concerns. Adopting a narrative approach in EHPAD could help address these challenges by fostering a more inclusive and supportive environment for resident engagement ^{55,56}.

Other than the CVS, some EHPAD have implemented suggestion boxes or held preparatory meetings for residents, providing an effective way for them to voice their opinions. These methods can be limited to participants being able to express their opinions and not fearing that their opinions may affect their relationship with the caregivers or administrations. However, the NA approach, like SQI, for example, where the narrative interviewer does not have a direct care relationship with the interviewees, allows residents to feel comfortable sharing their experiences of care.

Another way to enhance residents' participation and care in EHPAD is through committees, like the Menu Committee. The establishment of such a committee is recommended by the Direction Générale de la Santé (DGS) or Directorate General of Health and the Direction Générale de Action Sociale (DGAS) or Directorate General of Social Action. This committee focuses on improving quality meal quality by considering residents' nutritional needs, preferences, and expectations ⁵⁷. However, the committee approach, though effective for specific tasks like meal planning, may not fully capture all the residents' need and experiences as thoroughly as narrative approach do. Both methods can complement each other, with committees addressing practical, immediate concerns and NA providing, broader person-centered view of care.

The literature review also highlights the importance of the narrative approach in improving communication between caregivers and residents in nursing homes ^{37,38,45}. In EHPAD, residents often share their thoughts and concerns through informal conversations with daily staff ⁵⁵. To increase residents' social lives and provide centered care, staff must listen attentively to even the smallest details during routine interactions. The close relationships formed during simple tasks, like cleaning a room, can lead to meaningful conversations about family and loved ones, strengthening bonds. Recognizing these interactions is essential for preventing isolation and promoting a sense of belonging and purpose among residents.

In France, where the care sector faces workforce training and retention challenges, narrative methods provide a valuable tool for continuous professional development ^{58,59}. By enhancing empathy, communication skills, and understanding of residents' needs, narrative methods contribute to improved job satisfaction, employee's retention, and care quality.

Equally important, the literature review highlighted that NA success also depends on a clear vision, managerial support, staff competencies, and a culture that values reflection, learning, and the subjective experiences of residents ^{38,41}. Thus, for French nursing homes, integrating narrative approaches requires a shift in organizational culture. These changes need to be formalized in various institutional tools such as the institution project, the rules of operation, and CVS in accordance with Articles L.311 and following of the code of Social Action and Families (CASF). This formalization is essential to ensure a consistent and systematic adoption of the narrative approach at all levels of the organization.

Additionally, support from ethical committee, if it exists within the EHPAD or the parent association, can play a crucial role in promoting and supporting narrative approach in EHPAD. It is essential to ensure that this approach aligns with France's National Health Strategy, or Stratégie Nationale de Santé, which prioritizes person-centered care and quality of life. Furthermore, adherence to guidelines from the Agences Régionales de Santé (ARS) or Regional Health Agencies is crucial. Compliance with confidentiality and data protection regulations is also important. Additionally, engaging with local authorities, such as the Conseils Départementaux or Departmental Councils, can further enhance the implementation and effectiveness of the narrative approach in these settings.

In EHPAD, care should be holistic, addressing both the physical and mental needs of residents, with person-centered and medical care given equal importance. The World Health Organization defines health as complete physical, mental, and social well-being, not merely the absence of disease or infirmity ⁶⁰. Therefore, alongside traditional checklist-driven approaches, EHPAD should adopt the NA, which focuses on the individual stories and specific needs of residents. This approach requires the allocation of adequate resources, including sufficient time for staff training and the conducting of narrative interviews, to ensure comprehensive and effective care.

Suggestions for Further Research on Narrative Approaches in EHPAD

The literature review indicates that most narrative methods are implemented in one or more locations, with authors advocating for the application of these approaches in various settings, leveraging learned processes and essential preconditions. Existing studies offer valuable insights

into optimal participant profiles, including strategies to adapt the approach for residents with cognitive impairments or dementia and even elevate their involvement ^{39,45,53}. However, it is equally important to extend the focus beyond individual care organizations to explore the broader societal implications.

Future research should consider the role of policy actors and aim to shift from a local to a societal change perspective. This broader approach would help in understanding the impact of narrative approach on public health policies and societal attitudes towards aging and dementia.

Moreover, the issue of time and training within EHPAD presents several challenges. Currently, there are no provisions within these organizations for the time required to analyze narrative data effectively. This gap raises important questions about how to accommodate the time-intensive nature of narrative approaches, especially given the general consensus among care professionals about their limited availability.

To address these challenges, future studies could explore potential support systems. One avenue could be collaborations with academic institutions, such as the French National Centre for Scientific Research (CNRS), which could provide expertise in data collection and analysis. Engaging university researchers could help bridge the gap between theoretical approaches and practical implementation, facilitating effective data use and contributing to the improvement of care practices.

Recommendations for NA Implementation in EHPAD

To effectively integrate narrative approaches in French care settings, the following strategic recommendations are proposed:

- Comprehensive Training Programs: Implementing narrative approaches necessitates
 training for staff. This involves developing targeted training programs that equip caregivers
 with the necessary skills for conducting effective narrative interviews and utilizing narrative
 data for quality improvement. Techniques like "Stories as Quality Instruments" and
 "connecting conversation" methods should be foundational to these training modules.
 French public health agencies could take the lead in initiating these programs.
- Stakeholder Engagement: It is essential to involve residents, their families, and care
 professionals in the development and execution of narrative approaches. Their active
 participation not only facilitates acceptance and successful integration of NA but also
 enriches the process by providing valuable data for analysis and quality improvement.

Clear communication of NA's objectives and its benefits is essential to ensure all parties feel valued and integral to the process.

- Resource Allocation: Successful implementation of narrative methods requires adequate
 resources, including time and personnel. Management support is crucial to maintain
 commitment and address the complexities of these initiatives. Organizations must be
 prepared to allocate necessary resources and prioritize these activities to ensure success.
- Pilot Projects: Launching a pilot project in a select nursing home to test and refine
 narrative methods can be highly beneficial. This allows for adjustments shaped to the
 specific needs of the French elderly care context and helps identify and mitigate potential
 risks. Feedback from this pilot project can inform improvements, ensuring efficient
 resource allocation and building stakeholder confidence.
- Ongoing Evaluation: Continuous evaluation is essential to monitor the effectiveness of
 narrative approaches within care settings. This evaluation should involve feedback from
 all stakeholders to refine practices continually. Key evaluation metrics should include
 assessing residents' satisfaction to ensure care remains centered on individual needs and
 preferences and evaluating job satisfaction among professionals to inform care planning
 and resource allocation.
- Learning from International Examples: Drawing on international examples, such as the Netherlands' use of narrative approaches, can provide valuable insights. The Dutch experience shows a strategic shift towards narrative methods not merely for compliance but as a responsive and adaptive care approach. Collaborations involving institutions like the Erasmus School of Health Policy Management and the Leyden Academy on Vitality and Ageing illustrate the benefits of a multi-organizational effort supported by governmental bodies like the Dutch Ministry of Health.

Strengths and Limitations of the Literature Review

A strength of this literature review is its comprehensive analysis of narrative approaches in enhancing quality of care through diverse methodologies and settings. The review examines multiple studies, providing a broad perspective on how narrative methods like "Connecting Conversations" and the use of tools like the "Doodle Me" help in capturing detailed, personal feedback directly from services users in residential living facilities. This feedback is essential for understanding residents' needs and experiences, which can greatly influence care practice

development. Some limitations include the limited number of databases used and the restriction of the research period to ten years, which may have excluded additional relevant articles on the narrative approaches.

Conclusion

The demographic shifts in France, characterized by an aging population and the subsequent increase in the elderly with diminished autonomy, underscore a critical need for evolving care model in EHPADs. Narrative approaches to improving quality of care, offer a promising way that aligns closely with the needs of this changing demographic. The introduction of narrative approaches in French EHPADs could change the way care is perceived, delivered, and evaluated, making it not only more person-centered but firmly established in the actual experiences and voices of the residents.

Narrative approaches, as demonstrated through the reviewed literature, facilitate a more compassionate understanding of the residents' experiences and needs. They enable care professionals to capture the nuanced, often overlooked aspects of elderly care that traditional quantitative assessments miss. By prioritizing the voices of the elderly and those directly involved in their care, these approaches promote a culture of respect, dignity, and genuine engagement. This is particularly essential in a context like France's, where the aging population is substantial and the demand for quality, personalized care is on the rise.

While not requiring complicated logistics, the narrative approach holds significant potential benefits for nursing homes. It primarily relies on the expertise of trained individuals proficient in training techniques and communication adapted for the elderly, who understand the narrative method's capabilities. These individuals play an essential role in dictating what should be told to the residents and what should not and pointing out the limitations.

For instance, the narrative approach does not mean fulfilling every resident's request, as there are other factors to consider, such as the co-elaboration with residents and their families as outlined in article L.111 and following the CASF outlines the legal framework for such collaborative practices. This means that it is essential to involve both residents and their families in the decision-making process and the development of care, aligning with the narrative approach principles. However, the potential benefits of this approach are vast, offering a promising future for nursing homes.

Despite the challenges, the narrative approach is not just a theoretical concept but indeed feasible. Countries like the Netherlands have already invested in facilitating these procedures in nursing homes, demonstrating its potential success. This feasibility, backed by real-world examples, should instill confidence in the narrative approach's potential success in nursing homes.

References

- 1. World Health Organization (WHO). Ageing and health [Internet]. 2022 Oct 1 [cited 2024 Jul 14]. Available from: https://www.who.int/news-room/fact-sheets/detail/ageing-and-health
- 2. Population aging is accelerating in France and most developed countries [Internet]. Ined Institut National D'études Démographiques; [cited 2024 Jul 14]. Available from: https://www.ined.fr/en/everything_about_population/demographic-facts-sheets/focus-on/population-aging-is-accelerating-in-france-and-most-developed-countries/
- Macron E, Buzyn A. Dossier de presse 28 mars 2019 [Internet]. By Mutualité
 Française; 2019 [cited 2024 Jul 14]. Available from:
 https://sante.gouv.fr/IMG/pdf/dp_rapport-grand-age_280319.pdf
- DDD_rapport_droitsehpad_20210500.Pdf Bing [Internet]. Bing; [cited 2024 Jul 14].
 Available from:
 - https://www.bing.com/search?pglt=41&q=Ddd_rapport_droitsehpad_20210500.Pdf&cvid=5140a8afe21f4b39b79bfdc554c878da&gs_lcrp=EgZjaHJvbWUyBggAEEUYOTIGC AEQRRg80gEHNzY4ajBqMagCCLACAQ&FORM=ANNTA1&PC=HCTS
- Défenseur Des Droits. Les droits fondamentaux des personnes âgées accueillies en EHPAD [Internet]. 2021 [cited 2024 Jul 14]. Available from: https://www.defenseurdesdroits.fr/sites/default/files/2023-03/ddd rapport droitsehpad 20210500.pdf
- 6. Barrett D, Twycross A. Data collection in qualitative research. Evid Based Nurs [Internet]. 2018;21(3):63-4. Available from: https://doi.org/10.1136/eb-2018-102939
- 7. Demoustier S, Priou J. Les lois de 2002 et la participation des usagers dix ans après. Contraste [Internet]. 2013 Apr 4 [cited 2024 Jul 14];37(1):73-92. Available from: https://www.cairn.info/revue-contraste-2013-1-page-73.htm
- Gonthier R, et al. Rapport 22-02. Après la crise COVID, quelles solutions pour l'EHPAD de demain? Bull Acad Natl Med [Internet]. 2022 Apr [cited 2022 Aug 2];206(4):457-65. Available from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8857757/
 - https://www.ncbi.nlm.nin.gov/pmc/articles/PMC8857757/doi:10.1016/j.banm.2022.02.010
- 9. Motte S. DOSSIER. Scandale Orpea: un an après, qu'est-ce qui a changé dans les Ehpad? [Internet]. ladepeche.fr. 2023 Jan 30 [cited 2024 Jul 14]. Available from:

- https://www.ladepeche.fr/2023/01/30/dossier-scandale-orpea-un-an-apres-quest-cequi-a-change-dans-les-ehpad-10953175.php
- 10. Cnsa. Être actif pour renforcer son autonomie [Internet]. 2024 Apr 18 [cited 2024 Jul 14]. Available from: https://www.pour-les-personnes-agees.gouv.fr/preserver-son-autonomie/preserver-son-autonomie-et-sa-sante/etre-actif-pour-renforcer-son-autonomie
- 11. Le Point.fr. Dans les Ehpad, seuls 25 % des résidents finissent leur assiette [Internet]. Le Point. 2023 Oct 26 [cited 2024 Jul 14]. Available from: https://www.lepoint.fr/societe/dans-les-ehpad-seuls-25-des-residents-finissent-leur-assiette-26-10-2023-2540845_23.php
- 12. HAS | guide pour recueillir la satisfaction et l'expérience des personnes hébergées ou accueillies en EHPAD [Internet]. 2023 [cited 2024 Jul 14]. Available from: https://www.has-sante.fr/upload/docs/application/pdf/2023-09/recueillir_le_point_de_vue_des_personnes_hebergees_et_accueillies_en_ehpad_d iaporama_2023-09-20_15-57-46_545.pdf
- 13. Sion KYJ, Verbeek H, Zwakhalen SMG, Odekerken-Schröder G, Schols JMGA, Hamers JPH. Themes related to experienced quality of care in nursing homes from the resident's perspective: a systematic literature review and thematic synthesis. Gerontol Geriatr Med [Internet]. 2020;6:233372142093196. Available from: https://doi.org/10.1177/2333721420931964
- 14. Enquête « Démarches de recueil de la satisfaction des personnes hébergées ou accueillies en EHPAD: résultats » [Internet]. In: Document de Travail. [cited 2024 Jul 14]. Available from: https://www.has-sante.fr/upload/docs/application/pdf/2023-12/enquete__demarches_de_recueil_de_la_satisfaction_des_personnes_hebergees_ou_accueillie s_en_ehpad_-_resultats.pdf
- 15. Castle NG, Ferguson JC. What is nursing home quality and how is it measured? Gerontologist [Internet]. 2010;50(4):426-42. Available from: https://doi.org/10.1093/geront/gnq052
- Weldring T, Smith SM. Article commentary: Patient-Reported Outcomes (PROs) and Patient-Reported Outcome Measures (PROMs). Health Serv Insights [Internet].
 2013;6.S11093. Available from: https://doi.org/10.4137/hsi.s11093

- 17. Buckley C, McCormack B, Ryan A. Working in a storied way—Narrative-based approaches to person-centred care and practice development in older adult residential care settings. J Clin Nurs. 2018;27(5-6). doi:10.1111/jocn.14201.
- 18. Hyvärinen M. Narrative and sociology. Érudit [Internet]. 2016 [cited 2024 Jul 14].

 Available from: https://www.erudit.org/en/journals/nw/2016-v6-n1-nw6_1/nw6_1art02/
- 19. Dubois CA, Singh D. From staff-mix to skill-mix and beyond: towards a systemic approach to health workforce management. Hum Resour Health [Internet]. 2009;7(1):87. Available from: https://doi.org/10.1186/1478-4491-7-87
- 20. ANESM. Droits et libertés des résidents en EHPAD [Internet]. 2017 [cited 2024 Jul 14]. Available from: https://sante.gouv.fr/IMG/pdf/droits_et_libertes_des_residents_juin_2017.pdf
- 21. World Health Organization (WHO). Quality of care [Internet]. 2020 Jul 21 [cited 2024 Jul 14]. Available from: https://www.who.int/health-topics/quality-of-care#tab=tab_1
- 22. Parse RR. Nurses and person-centered care. Nurs Sci Q [Internet]. 2019;32(4):265. Available from: https://doi.org/10.1177/0894318419864335
- 23. Sion KYJ, Verbeek H, Zwakhalen SMG, Odekerken-Schröder G, Schols JMGA, Hamers JPH. Themes related to experienced quality of care in nursing homes from the resident's perspective: a systematic literature review and thematic synthesis. Gerontol Geriatr Med [Internet]. 2020;6:233372142093196. Available from: https://doi.org/10.1177/2333721420931964
- 24. Psychology Today. Narrative therapy [Internet]. Psychology Today. 2019 [cited 2024 Jul 14]. Available from: https://www.psychologytoday.com/us/therapy-types/narrative-therapy
- 25. APA PsycNet [Internet]. [cited 2024 Jul 14]. Available from: https://psycnet.apa.org/record/2008-08725-000
- 26. Hineline PN. Narrative: why it's important, and how it works. Perspect Behav Sci [Internet]. 2018;41(2):471-501. Available from: https://doi.org/10.1007/s40614-018-0137-x
- 27. The role of narratives in sustaining organizational innovation on JSTOR [Internet]. [cited 2024 Jul 14]. Available from: https://www.jstor.org/stable/25614643

- 28. Puto G, Zurzycka P, Musiał Z, Muszalik M. Narrative in older people care—concepts and issues in patients with dementia. Healthcare (Basel) [Internet]. 2022;10(5):889. Available from: https://doi.org/10.3390/healthcare10050889
- 29. Menkin ES. Go Wish: a tool for end-of-life care conversations. J Palliat Med [Internet]. 2007;10(2):297-303. Available from: https://doi.org/10.1089/jpm.2006.9983
- 30. Mitchell P, Koch T. An attempt to give nursing home residents a voice in the quality improvement process: The challenge of frailty. J Clin Nurs. 2019;6(6). Available from: https://pubmed.ncbi.nlm.nih.gov/9526351/. Accessed 2024 Aug 20.
- 31. HAS. Recueillir le point de vue des personnes hébergées et accueillies en EHPAD [Internet]. 2023 [cited 2024 Jul 14]. Available from: https://www.has-sante.fr/upload/docs/application/pdf/2023-09/recueillir_le_point_de_vue_des_personnes_hebergees_et_accueillies_en_ehpad_d iaporama_2023-09-20_15-57-46_545.pdf
- 32. Staff C. 10 common nursing interview questions to help you practice and prepare. Coursera. 2023 Nov 29. Available from: https://www.coursera.org/articles/nursing-interview-questions
- 33. Murphy J, Oliver T. The use of Talking Mats to support people with dementia and their carers to make decisions together. Health Soc Care Community [Internet]. 2012;21(2):171-80. Available from: https://doi.org/10.1111/hsc.12005
- 34. Tishelman C, Lindqvist O, Hajdarevic S, Rasmussen BH, Goliath I. Beyond the visual and verbal: using participant-produced photographs in research on the surroundings for care at the end-of-life. Soc Sci Med [Internet]. 2016;168:120-9. Available from: https://doi.org/10.1016/j.socscimed.2016.09.012
- 35. King T, Miller E. Where were you during the Queen's visit? Using photographs to facilitate collective storytelling, resident identity and positive care relationships in aged care. Australas J Ageing [Internet]. 2021;40(3). Available from: https://doi.org/10.1111/ajag.12979
- 36. Van Delft E, Scheffelaar A, Janssen M, Luijkx K. The feasibility of the story as a quality instrument as a narrative quality improvement method. J Nurs Educ Pract [Internet]. 2022;13(4):29. Available from: https://doi.org/10.5430/jnep.v13n4p29
- 37. Huijg J. Personal stories improve standard of care and resident wellbeing. Nurs Res Care. 2019 Sep;21(9):505-509.

- 38. Sion K, Verbeek H, Aarts S, Zwakhalen S, Odekerken-Schröder G, Schols J, Hamers J. The validity of Connecting Conversations: a narrative method to assess experienced quality of care in nursing homes from the resident's perspective. Int J Environ Res Public Health [Internet]. 2020;17(14):5100. Available from: https://doi.org/10.3390/ijerph17145100
- 39. Walker H, Paliadelis P. Older peoples' experiences of living in a residential aged care facility in Australia. Australas J Ageing [Internet]. 2016;35(3) Available from: https://doi.org/10.1111/ajag.12325
- 40. Van Hoof, J., Verbeek, H., Janssen, B. M., Eijkelenboom, A., Molony, S. L., Felix, E., Nieboer, K. A., Zwerts-Verhelst, E. L. M., Sijstermans, J. J. W. M., & Wouters, E. J. M. (2016). A three-perspective study of the sense of home of nursing home residents: the views of residents, care professionals and relatives. *BMC Geriatrics*, 16(1). https://doi.org/10.1186/s12877-016-0344-9
- 41. Scheffelaar A, Janssen M, Luijkx K. Learning as a way of achieving quality improvement in long-term care: a qualitative evaluation of The Story as a Quality Instrument. Nurse Educ Pract [Internet]. 2023;70:103659. Available from: https://doi.org/10.1016/j.nepr.2023.103659
- 42. Murphy J, Gray CM, Van Achterberg T, Wyke S, Cox S. The effectiveness of the Talking Mats framework in helping people with dementia to express their views on well-being. Dementia [Internet]. 2010;9(4):454-72. Available from: https://doi.org/10.1177/1471301210381776
- 43. Mysyuk Y, Huisman M. Photovoice method with older persons: a review. Ageing Soc [Internet]. 2020;40(8):1759-87. Available from: https://doi.org/10.1017/S0144686X19000242
- 44. Hewitt G, Draper AK, Ismail S. Using participatory approaches with older people in a residential home in Guyana: challenges and tensions. J Cross Cult Gerontol [Internet]. 2012;28(1):1-25. Available from: https://doi.org/10.1007/s10823-012-9182-1
- 45. Sion KYJ, Heerings M, Blok M, Scheffelaar A, Huijg JM, Westerhof G, Pot AM, Luijkx K, Hamers JPH. How stories can contribute toward quality improvement in long-term care. Gerontologist [Internet]. 2023;64(4). Available from: https://doi.org/10.1093/geront/gnad084

- 46. Hamers J. S19: Using narratives to improve quality of long-term care for older people. Int Psychogeriatr [Internet]. 2023;35(S1):54-55. Available from: https://doi.org/10.1017/s1041610223002302
- 47. Scheffelaar, A., Janssen, M., & Luijkx, K. (2021c). The Story as a Quality instrument: Developing an instrument for quality improvement based on narratives of older adults receiving Long-Term care. International Journal of Environmental Research and Public Health/International Journal of Environmental Research and Public Health, *18*(5), 2773. https://doi.org/10.3390/ijerph18052773
- 48. Sion KYJ, Rutten JER, Hamers JPH, De Vries E, Zwakhalen SMG, Odekerken-Schröder G, et al. Listen, look, link and learn: a stepwise approach to use narrative quality data within resident-family-nursing staff triads in nursing homes for quality improvements. BMJ Open Qual [Internet]. 2021;10(3) Available from: https://doi.org/10.1136/bmjoq-2021-001434
- 49. Buckley C, McCormack B, Ryan A. Working in a storied way—Narrative-based approaches to person-centred care and practice development in older adult residential care settings. J Clin Nurs [Internet]. 2018;27(5-6). Available from: https://doi.org/10.1111/jocn.14201
- 50. Sion K, Verbeek H, De Vries E, Zwakhalen S, Odekerken-Schröder G, Schols J, Hamers J. The feasibility of Connecting Conversations: a narrative method to assess experienced quality of care in nursing homes from the resident's perspective. Int J Environ Res Public Health [Internet]. 2020;17(14):5118. Available from: https://doi.org/10.3390/ijerph17145118
- 51. Sion K, Hamers J. The implementation of the narrative assessment method 'Connecting Conversations.' Int Psychogeriatr [Internet]. 2023;35(S1):56-57. Available from: https://doi.org/10.1017/s1041610223002338
- 52. Buckley C, McCormack B, Ryan A. Valuing narrative in the care of older people: a framework of narrative practice for older adult residential care settings. J Clin Nurs [Internet]. 2013;23(17-18):2565-77. Available from: https://doi.org/10.1111/jocn.12472
- 53. Milte R, Shulver W, Killington M, Bradley C, Ratcliffe J, Crotty M. Quality in residential care from the perspective of people living with dementia: The importance of

- personhood. Arch Gerontol Geriatr [Internet]. 2016;63:9-17. Available from: https://doi.org/10.1016/j.archger.2015.11.007
- 54. Mahout C. Des conseils d'établissement aux conseils de la vie sociale. Gérontologie et Société. 2003;26(106):235-247. DOI: 10.3917/gs.106.0235. Available from: https://www.cairn.info/revue-gerontologie-et-societe-2003-3-page-235.htm
- 55. ANESM. Qualité de vie en Ehpad (volet 3): La vie sociale des résidents.
 Recommandation de Bonnes Pratiques Professionnelles programme Qualité de vie en EHPAD. Haute Autorité de Santé; 2023.
- 56. Direction de la recherche, des études, de l'évaluation et des statistiques. Des résidents de plus en plus âgés et dépendants dans les établissements d'hébergement pour personnes âgées [Internet]. [cited n.d.]. Available from: https://drees.solidarites-sante.gouv.fr/publications-communique-de-presse/etudes-et-resultats/des-residents-de-plus-en-plus-ages-et
- 57. GUIDE. Proposition de structuration des commissions de menus en EHPAD [Internet]. 2022 [cited 2024 Aug 16]. Available from: https://cerenut.fr/sites/cerenut.fr/files/2022-11/G01%20-%20STRUCTURATION%20CM.pdf
- 58. Direction de la recherche, des études, de l'évaluation et des statistiques (DREES). Le personnel et les difficultés de recrutement dans les EHPAD. Available from: https://drees.solidarites-sante.gouv.fr/publications/etudes-et-resultats/le-personnel-et-les-difficultes-de-recrutement-dans-les-ehpad. Accessed 2024 Aug 20.
- 59. Guillot-Soulez, C., & Soyer, C. R. (n.d.). Et si les Ehpad travaillaient leur marque employeur pour recruter et fidéliser? The Conversation. https://theconversation.com/et-si-les-ehpad-travaillaient-leur-marque-employeur-pour-recruter-et-fideliser-160731
- 60. World Health Organization. "Constitution of the World Health Organization." World Health Organization, 2024, www.who.int/about/governance/constitution.

Appendix 1

Procedures of 'The Story as a Quality Instrument' for Quality-of-Care Improvement

| Steps | Description |
|-------------------------|--|
| Narrative Interviews | Participants: 3-4 care professionals per field site (e.g., care aides, nurses, social workers) who do not have a direct care relationship with the interviewee. Process: Begins with an open invitation for the older adult to share their care experiences freely. Follows with a natural conversation flow, with a second part including probing questions for more details. Documentation: Interviews are audio-recorded, transcribed verbatim, and used to create a holistic portrait of each interviewed older adult. |
| Quality Improvement | Planning: Consists of a quality meeting and a follow-up meeting, cocreated with stakeholders to match care practice needs. Quality Meeting: Involves reading and discussing three portraits to identify areas for improvement. Small group discussions, thematic clustering of feedback, and prioritization of issues to form an action plan with SMART goals. Follow-up Meeting: Evaluates implemented actions, discusses successes, and plans further steps if necessary. |

Detailed methodological descriptions can be found in the following study: Scheffelaar, A., Janssen, M., & Luijkx, K. (2021). "The Story as a Quality Instrument: Developing an Instrument for Quality Improvement Based on Narratives of Older Adults Receiving Long-Term Care." International Journal of Environmental Research and Public Health, 18(5), 2773. Available at: https://doi.org/10.3390/ijerph18052773

Appendix 2

Implementation of 'Connecting Conversations' for Quality Improvement

The steps involved in implementing the 'Connecting Conversations' method for quality improvement in nursing homes:

| Steps | Description |
|-------------------------|---|
| 1. Conversations | Semi-structured questions guide interviews conducted by trained care |
| Initiation | professionals who do not have a direct care relationship with the |
| | interviewee. Family and caregivers answer as they believe the resident |
| | would. Questions are adapted to focus on improving communication |
| | between the resident, family, and caregivers. |
| 2. Training for | Interviewers undergo mandatory three-day training to ensure the quality |
| Interviewers | and reliability of the interviews. The training focuses on connecting, |
| | practicing, and sharing experiences and includes the use of an app for |
| | capturing conversations and adopting an appreciative inquiry approach. |
| | Successful attendance results in a certificate. |
| 3. Data Capture | An app supports interviewers in performing, registering, and reviewing |
| and Registration | the conversations. It features tools for informed consent, demographic |
| | collection, question presentation, audio recording, and data viewing. |
| | Conversations are transcribed for detailed analysis. |
| 4. Analysis | Two researchers perform content analysis on the interview transcripts, |
| | identifying key themes and discrepancies within and between triads. This |
| | helps in understanding areas of strength and those needing |
| | improvement. |
| 5. Reporting and | Results are reported back to nursing homes at the ward level, highlighting |
| Improvement | successes and areas for improvement. Reports include direct quotes and |
| | are discussed in meetings with care teams to plan actionable |
| | improvements. Follow-up meetings evaluate the impact of implemented |
| | actions and discuss necessary adjustments. |
| Detailed Methodological | Descriptions on: Sign K Verhook H. De Vries F. Zwakhalen S. Odekerken-Schröder G. |

Detailed Methodological Descriptions on: Sion K., Verbeek H., De Vries E., Zwakhalen S., Odekerken-Schröder G., Schols J., Hamers J. (2020). "The Feasibility of Connecting Conversations: A Narrative Method to Assess Experienced Quality of Care in Nursing Homes from the Resident's Perspective." International Journal of Environmental Research and Public Health, 17(14):5118. **Available from:** https://doi.org/10.3390/ijerph17145118

Abstract in French (Résumé)

Titre: Exploration des approches narratives pour améliorer la qualité des soins aux personnes âgées dans les EHPAD (Établissements d'hébergement pour Personnes Âgées Dépendantes) en France : Une revue de la littérature

Contexte: Le vieillissement de la population en France pose des défis significatifs aux systèmes de santé, en particulier dans les Établissements d'hébergement pour Personnes Âgées Dépendantes (EHPAD). Ces changements démographiques et les problèmes de qualité des soins dans les EHPAD nécessitent une révision des approches pour évaluer les besoins et la satisfaction des résidents en faveur d'une prise en charge centrée sur la personne âgée. Les questionnaires traditionnels échouent souvent à saisir les expériences et préférences nuancées des résidents, conduisant à une planification des soins inadéquate. Ce mémoire explore le potentiel des approches narratives pour répondre à ce besoin en améliorant la qualité des soins par des interactions plus personnalisées dans les établissements de soins de longue durée.

Méthodes: Une revue de la littérature sur les études qualitatives a été réalisée, se concentrant sur les approches narratives utilisées comme instrument pour comprendre les expériences des résidents dans les établissements de soins pour personnes âgées. Des bases de données telles que Medline, Embase, et Emcare ont été consultées, en incluant uniquement les études qui captaient les perspectives des résidents. La revue examine l'impact des approches narratives sur la qualité des soins des résidents, la satisfaction du personnel et les résultats dans les établissements de soins de longue durée. Elle identifie également les facteurs structurels et procéduraux essentiels à une mise en œuvre réussie, tels que la culture organisationnelle, et explore l'adaptation potentielle de ces approches en France, en s'appuyant sur les facteurs clés de succès et les enseignements internationaux.

Résultats: Cette revue de la littérature portant sur 16 publications a révélé que les approches narratives améliorent significativement la qualité de vie des résidents en augmentant leur engagement et en permettant des soins plus personnalisés. Ces approches permettent aux résidents d'exprimer leurs besoins, influençant ainsi les pratiques de soins et améliorant la réactivité du personnel. De plus, elles contribuent au développement professionnel en offrant aux soignants une meilleure compréhension des préférences des résidents et en améliorant la compréhension organisationnelle des soins. La mise en œuvre efficace nécessite un fort soutien de la direction, une formation complète, et un engagement envers des soins centrés sur la personne, parmi d'autres facteurs.

Conclusion: La revue de la littérature suggère que les approches narratives, si elles sont correctement mises en œuvre, peuvent transformer les pratiques de soins dans les EHPAD français en les rendant plus centrées sur le résident et plus réactives.

Mots-clés: Narratif, storytelling, qualité des soins, personnes âgées, maison de retraite