LyűNJ2ŘdzŐűλ2y

This guide is designed to support care home organisations who wish to implement bl·Yl·ăűŜ /l·NŜφ Lű ăK2dzfŘ ōŜ NŜl·Ř ű2ƎŜűKŜN ǿλűK λűă LJl·NJűyŜN ƎdzλŘŜY ΨDdzλŘl·yŐŜ ₮2N Namaste Workers: Delivering Namaste /l·NŜΩφ This guide focuses on supporting care home organisations to plan, deliver and evaluate Namaste Care for their residents. The Namaste WorkersΩ guide addresses the details of running Namaste Care sessions.

These guidance documents have been developed following a 3-year research project and as such are based in the experience of care home organisations and practitioners. Selected quotes or examples from their practice are used throughout. To read the full research project report go to: www.worc.ac.uk/dementia

This guidance is not intended to replace the 2NλƎλyl·f ō22ʔY {λY l·NŘΣ W óнлмoú ά¢KŜ ŜyŘ 2₮ fλ₮Ŝ bl·Yl·ăűŜ /l·NŜ LJN2ƎNl·Y ₮2N LJŜ2LJfŜ ǿλűK ŘŜYŜyűλl·φє Ly l·ŘŘλűλ2yΣ {ű /KNλăű2LJKŜNΩă Hospice have developed a toolkit for Namaste Care which is also a valuable resource. It is available at: www.stchristophers.org.uk

The word ψbl·Yl·ăűŜ is a Hindu term which can be translated as meaning ψű2 honour the spirit

Namaste Care: Simard, J. (2013) *Namaste Care: The End of Life Program for People with Dementia* (second edition). Baltimore: Health Professions Press.

US site for Namaste Care: http://namastecare.com/

Association for Dementia Studies, University of Worcester: https://www.worcester.ac.uk/discover/namaste-

Tell everyone you can. It has been shown to be important to involve as many people as possible in your care home community to make Namaste Care a success, not just the care or activities team.

What was most influential in getting Namaste Care off the ground? *ćSLJŃŜaŘƙyƎ bè word of mouth the positivity of Namaste to other colleagues, healthcare professionals, regional managers within űKŜ c2ƳLJayĕƐɛ*

Share information with all staff, families and visiting professionals. Involve different people in making decisions about how Namaste Care will run in your home. This helps different staff groups (such as kitchen staff) to feel valued. It also means they take more ownership and responsibility for making Namaste Care a success. Below are some examples of how the case study care homes shared information.

- Displaying posters
- Designing a flyer
- Holding information evenings for visitors
- Short presentations at staff meetings

In the long run this is more effective than rushing ahead.

ćAă a űŜaƳ ǿŜ ű22ļ aff űKŜ ƙyf2ŃƳaűƙ2y´2y´b2aŃŘ ayŘ ăűaŃűŜŘ ű2 LJfay´ǿKaű ƙűŜƳă we needed for the Namaste room. Our home managers allocated roles to certain people which I thought was a good plan; it allowed us to structure and organise how we were going to execute the LJŃ2ŜcűƐɛ

These people are likely to emerge as you start to plan and communicate within your home. Make sure to celebrate these people and empower them

Before you start

If not clear, seek clarity from community of practice

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The guiding coalition sets a start date (no less than a month ahead) and divides responsibilities between them, thinking about:

Who will prepare the space and find equipment?
Who will be the Namaste Care Workers?
Who will organize the staff team and rota?
Who will identify appropriate residents?
How will you measure its success?

Keeping going

The guiding coalition and NCWs review the first week and problem solve.
Alter resident membership if necessary
Ensure routines are enabling Namaste Care
Support Namaste Care Workers

Is it running all day every day?
What problems do the Namaste Care Workers encounter?
How are the care team feeling about it?
How engaged are families?

What impact is it having?
What success stories can be shared inside the home, with families, or externally?
Who needs to be celebrated for contributing to success?

Namaste Care Workers run sessions with active support of manager and champion.
Who is collecting feedback?
How will you measure success?

For change to happen successfully people have to recognise that it is necessary and timely. If you move too soon without this, it is likely that people will not be on board as they do not understand why it is happening. In time you will become frustrated and demotivated.

Why is doing Namaste Care important for your home?
What Ŏ2dztŘ KI·LJLJŜy˝ƛŦ è2dz Ř2yQú űℕè bI·Y˝I·ăűŜ Care?
What happens currently that Namaste Care might help to avoid or change?
Why is this change needed now rather than later?
Why should a staff member buy into the idea?
What opportunities does Namaste Care give your home?

As you start to explain the necessity for Namaste Care, some key individuals how share your passion are likely to emerge. These people become the guiding coalition. This coalition start to think ahead about the practicalities of making it happen.

Who are the key staff members who will make Namaste Care happen?
What will these key people need to make Namaste Care happen?
Is every part of the team represented, if not, what problems might this cause?
Who in the team is known to be very influential to others?

Are there other people, outside

This stage is about clarifying the end goal and finding a simple way to communicate it

You need to anticipate the likely problems that might occur and pre-empt them. This requires you to űKλy1 l·ō2dzű űKŜ ŎKl·y∃Ŝ ₹₪2Y 2űKŜ₪ăQ LJŜ₪spective. This ensures that your proposed change does not fail straight away. Early success helps to create momentum.

What things do you think might prevent staff from carrying out Namaste Care?
What needs to be done to try and get rid of those barriers before you start?
How will you find out about difficulties when Namaste Care starts?
² K2 ₹₪2Y èzdz₪ Ψ∃dzλŘλy∃ Ŏ2l·fλűλ2yΩ ǿλff ōŜ l·Øl·λfl·ōfŜ ű2 KŜfLJ solve those difficulties day to day?
How will you know that Namaste Care is working well?

bl·Yl·ăűŜ /l·ŊĴŜ LyűŜŊØŜyűƛƨy ¦Y

The following tables illustrate the components of a typical Namaste Care Session within the Namaste Care Intervention UK. This was developed based on a review of the existing evidence from literature and current practice in the UK that relates to

ght level can be altered easily f natural light is not available, d use low lighting, (fairy lights,	Natural lighting will not always be available, a permanent space should be the priority
er, lemon, orange rosemary or a	Use of a diffuser, plug in or room spray that is compliant with health and safety of the home. This is not aromatherapy and should not be described as such.
ate atmosphere, not to provide ·f ŜØŜℕèŘI·è ΨŎI·ℕŜ Ƙ2Ƴ ŜΩ óØ2ʎŎŜăΣ ɔrtant.	Consider which other routines may need to be altered: e.g. housekeeping outside the room, noisy phones or alarm calls carried by staff

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/ℕŜl·ûλyƎ l· bl·Yl·ăűŜ {LJl·ŎŜ

A dedicated space works best, so that it can become known as the ⅄bl·Yl·ăűŜℕ22Yℚ

A quiet space without lots of noise nearby

Enough space to comfortably seat the number of residents who will be attending

If a dedicated space is not available, it could be a space which has another purpose but can be used exclusively for Namaste Care at relevant times

It could be a larger room with a smaller area partitioned off

Sockets for music, diffuser etc.

A screen or projector to play bacq D4T part2cvp-i52 284.33o2284.(ree)3(

One of the surprising outcomes of our research was how significant the Namaste Care space became for residents, even when Namaste Care was not taking place in it. We heard many stories about residents choosing to queue up outside the room and referring to the space in positive terms in their daily life. In one care home, their dedicated Namaste Care Room became known as a space that helped to calm and ℕŜfI·ÈΣ I·yŘ ă2 ǿI·ă dzăŜŘ I·ă I· ΨǑKλtt 2dzűΩ ℕ22Y ǿKŜϒLJI·ℕűűλǑdzfI·ℕ ℕŜăλŘŜyűă ǿŜℕŜ angry and highly agitated.

άI bℕ2dzƎKű a ℕŜăλŘŜyű λϒǿK2 ǿaă ØŜℕè dzLJűλƎKű℗ I ăaű ǿith him, no music or lights e

² Kƨ øλff ōŜ èƨdzℕ bI·Y˙I·ăűŜ / I·ℕJŜ ² ƨℕJ⟧ŜℕJăK

When thinking about who will directly deliver Namaste Care in your home, there are several things to consider. Our research showed that it is important that Namaste Care is not seen solely as an ΨI·ŎűλØλűèℚΦ Lű λă űKŜ ŘŜfλØŜℕè ƨŦ ŜăăŜyűλI·f ŎI·ℕŜΣ simply in a creative way. Therefore, care staff should be the mainstay of your Namaste Care Workers. Nursing staff and Activity Co-ordinators can play a huge role in setting up and supporting Namaste Care, but for the sessions to be sustainable in the long term the involvement of the care team is needed. In our research, where care staff were fully integrated in running the sessions they ran far more smoothly.

áIℚØŜ űℕλŜŘ űƨ Y˙a⟧Ŝ λű aă λyƈfdzăλØŜ aă LJƨăăλbfŜΣ ăƨ ℕŜƎaℕŘfŜăă ƨŦ ØKaű ƎℕaŘŜ èƨdz aℕŜΣ whether èƨdzℚℕŜ in the kitchen or domestics, whatever, and intermittently I do sort of LJdzăK Ŧƨℕ űKaűΦ *AyŘ ØŜℚℕŜ Ǝƨλy Ǝ űƨ λyűℕƨŘdzcŜ űKŜ NaY˙ăűŜ űℕaining as part of the induction process.É*

In addition, consider using the staff rota to formally signify who is responsible for Namaste Care each day/shift. This made a big difference to the implementing care Kƨ Y˙Ŝă I·ă λű Y˙ŜI·yű ăűI·ŦŦ Ψƨ ØyŜŘℚ űKŜ ăŜăăλƨyã I·yŘ LJfI·yyŜŘ Ŧƨℕ űKŜY˙Φ ² KŜy˙ăűI·ŦŦ ØŜℕŜ yƨű ΨℕƨűI·-ŜŘℚ on it led to disagreements and missed Namaste care sessions.

IℚØŜ included it on the ℕƨűaXŜacK day. I think what I would like to do is get them f22⟧λyƎ aKŜaŘ ayŘ űKλy⟧λyƎ Ψƨ⟧ ăƨ űKaű Řaè λă Y˙è ŘaèΣ ăƨ ØKaű aY˙ I ƎƨλyƎ űƨ Řƨ űKaű *day? WKaűℚă ƨyƨdzℕ LJfay˙Ŧƨℕ NaY˙ăűŜ űKŜè ŘaèKℚ*

Finding the right personalities in the team to take on this role can make a big difference to the success of the Namaste Care sessions. Take your time to think about who would be best placed to take this forward. These people will be the ambassadors for Namaste Care. You may also want to consider recruiting volunteers to support the sessions. Namaste Care provides an ideal opportunity for people interested in volunteering to contribute within a defined role.

άTKŜè yŜŜŘ ű2 bŜ cafYΣ caℕλyΞΣ c2YLJaăăλ2yaűŜΣ y2ű ℕdžăKŜŘφ N2ű űaă⟅ 2ℕλŜyűaűŜŘΣ not thinking about what they should be doing. They should go into that room, close the doors and just go with the flow and jusűXayŘ ağ I ăaèΣ IⅭØŜ Ǝ2ű ă2YŜ űKaű aℕŜ bŜűűŜℕ than others at doing it you know. And I think they just need to be open YλyŘŜŘΣε

The job description overleaf was helpful for the care homes when trying to identify the Namaste

bl·Yl·ăűŝ /l·NJŜ ² ƨNJ⅂ŜNJ Wƨō 5ŜăǑNJʎLJúʎƨƴ

The Namaste Care Worker will take a lead role in supporting residents in the care home with more advanced dementia. As part of a team of Namaste Workers, they will prepare for and implement daily sessions of Namaste Care for identified residents.

A Namaste Care Worker will be expected to:

Attend and engage

{ŜfŜŎűƛyƎ wŜăƛŘŜyűă ŦƧℕ bl·Yˇl·ăűŜ /l·ℕŜ

Namaste Care is designed to particularly support people with advanced dementia, but what do we mean by advanced dementia? This is where dementia has progressed to a point where a person is likely to have significant difficulties affecting their thinking, speech, continence and mobility.

Namaste Care supports the people in your home whose dementia is most advanced. This will vary depending on whether the home is primarily residential or nursing and on the individual people in your care. With this in mind, who may be suitable to attend could include those who:

This will depend on two things; the size of your Namaste Care space and how many residents a single worker is expected to support at any time. You will consider this later on in this gETQqat any time1et00888tais gETQqat any time1et054(h)-4(is)11( )-3(gETQq)-3(a)9(

Namaste Care may be appropriate for someone whose dementia is not advanced but who has more complex needs because of mental health issues, a learning disability or because of behavioural and psychological symptoms that make it more challenging for them to engage in care home life.

áI KaØŜ ∃2ű a ₸ℕ⅄ŜyŘ 2₸ Y⅄yŜ ØK2ăŜ Y2űKŜℕ ∃2Ŝă 2y2ccă⅄2yΣ ayŘ ⅄y aŘŘ⅄ű⅄2yűƨ ŘŜYŜyű⅄a ăKŜΩă ∃2ű 2űKŜℕ mental health conditions and so it can be difficult for them to do things with her, like cKay∃⅄y∃ ŘℕŜăă⅄y∃ă ayŘ űK⅄y∃ă f⅄⌊Ŝ űKaűX AyŘΣ űKŜèΩØŜ űa⌊Ŝy her to a Namaste session before doing that and apparently then she will let them do ØKaűŜØŜℕ űKŜè ySŜŘ ű2 Ř2Φ BŜcadžŜ ăKŜΩă ∂dzăűℕŜfaĒŜŘΣε

It may also be appropriate to consider inviting someone to Namaste Care for a short time **during** a period of ill health, where a quieter environment with more one-to-one care could be helpful for them while they are recovering.

Namaste Care provides a nurturing, supportive environment that could appeal to a broad range of people, including those without dementia, or whose dementia is less advanced. However the purpose of Namaste Care is to provide a daily programme of activities

bl·Yl·ăűŝ {ŝăăƛƨyãƴ Cℕŝljʤŝyǒè ɔ ¢ƛYŝ ƨŦ 5l·è

You will need to think about when to run your Namaste Care sessions. Traditionally, Namaste Care is delivered twice daily. However, this can be off-putting for some care homes. In our study, care homes often found it easier to start with one session a day and this still produced benefits for residents. Significantly, when care homes had implemented one session a day and saw the benefits they sometimes moved to two

It is therefore important that when you begin implementing Namaste Care you are committed to making it happen whatever the circumstances. The care homes in our study found that committing to provide one or two sessions a day and knowing that they would be held to account through the research project was helpful. You should consider how you will monitor and record the sessions and their impact. There are some useful resources in the final section of this guide that could help.

The time of day should be ŎK₴ăŜɣōI·ăŜŘ ₴ɣ ǿKI·ú ŦλűăλɣǿλűK è₴dzN NŜăλŘŜyűăQ yŜŜŘă and what is practical for your home. It needs to be a time of day when it is possible to have approximately 2 hours which are not interrupted, so you will need to arrange the session times so that they do not clash with meal times etc.

You may want to run your sessions late morning between breakfast and lunch, in the afternoon after lunch, or in the evening after an evening meal.

You may want to run a session in the evening, involving night staff.

Are there particular times of day where residents with advanced dementia seem more distressed and qn4332/ 171.05s?ETQq93.624 496.03 442.

wŜπ2ℕ∃l·yλăλy∃ {űl·ŦŦ ¢λYˆŜ

Namaste Care is a practical, affordable solution to meeting the needs of residents with advanced dementia. It is an approach which relies on flexibility and a willingness to change how time is organised in your care home, rather than bringing extra professionals in or employing extra staff.

The

áAyŘ you Ř2yℚű want the same people doing it day in day out. You Ř2yℚű want it to get b2ℕλyƎ Ŧ2ℕ ŭKŜY ayŘ Ŧ2ℕ a ŧ2ŭ 2Ŧ ŭKŜYΣ λúℚă yℤŭ b2ℕλyƎ aŭ aff bʠzŭ ŭKŜℕŜ aℕŜ ă2YŜ who ŭKλy⌈Σ Ψ2K Ǝ2ăKΣ I c2ʠzfŘ bŜ Ř2λyƎ ă2YŜŭKλyƎ ŜfăŜℚX AyŘ λúℚă ŭŜacKλyƎ ăŭaŦŦ ŭKŜ bŜyŜŦλŭă and letting them see residents queuing up at the door and ăaè Ψf22⌈ aŭ ŭKaŭΣ è2ʠz ⌈y2øΣ ŭKŜèℚℕŜ øaλŭλyƎ for è2ʠzℚΣέ

Towards the end of a Namaste Care session, any lowered lights should be turned up, livelier music played and activities introduced to energise people before the next part of their day. This could involve activities such as singing, blowing bubbles or throwing a balloon. This is particularly relevant during the day, perhaps where a mealtime follows the session. If the session is being held in the evening, a continuation of more relaxing and soothing activities may be more appropriate.

The music was turned up and became louder. [Resident] sat tapping her feet, looking around the room. Her hands started to move and tap when the next song played. Her hands danced and her body moved to the music. She began dancing, clapping and smiling when the Namaste Care Worker started dancing. She held a tambourine she was given and shook it. She examined it and then tapped it on her leg.

It is important that the end of the session is acknowledged. This gives an opportunity to thank people for being there, to say goodbye individually and to help people with the transition to the next part of their day. Once again all staff in the home should be involved in helping residents to move out of the Namaste space. As with welcoming people, using names, eye contact and touch will help to connect to each individual.

Following the session, time will be needed for the Namaste Care Worker to clear up the space and to make brief notes. These could be rŜŎ2ℕŘŜŘ ƛƴƳŘƛØƛŘdzI·t ℕŜăƛŘŜƴűăℚ notes or in a simple Ŏ2ƳƳdzƴƛŎI·ûƛ2ƴ˜ō2Ƨ1℗ Lű ƛă ƛƳLJ2ℕúI·yű ű2 ℕŜŎ2ℕŘ I·yê ΨƳ2ƳŜƴűăℚ that seemed to have worked for a resident so that the whole team can learn from it.

άL2ØŜfè ăŜăăƛ2yΣ aff űKŜ ℕŜăƛŘŜƴűă enjoyed it. One of the new residents prone to panic attacks came in shaking and upset, but we managed to calm her down by giving her a KayŘ Y˙aăăaƎŜΣ Ř2ƛyƎ KŜℕ yaƛfă ayŘ X a yƛcŜ f2yƎ cdzŘŘfŜ℗ SKŜ ăŜűűfŜŘ Ř2ø˙abƛűΣé Æ

There are a number of tools you can use to assess the impact of Namaste Care, many of which use measures or data that you will already be collecting as a care service. For example, comparing the number of infections, fluid intake, weight or falls a person, can give an indication of the impact of Namaste Care. Also, observations can be a particularly powerful way to capture the difference for people.

Below we list some of the better known and easily accessible validated measurement tools that you could use, these are easily downloadable from the internet if you search the titles through a search engine.

Quality of Life in Advanced Dementia (QUALID)

Cohen-Mansfield Agitation Inventory (CMAI)

Quality of Interactions Schedule (QUIS)

Pain Assessment in Advanced Dementia (PAINAD)

In addition, within the useful resources section of this manual we include the Namaste Short Questionnaire (NSQ). This was a recording form and measurement scale used in the research project that care homes found very useful in tracking what they were doing and what impact it had. For each session, the form asks the Namaste Care Worker some simple questions about the session (time, date, residents attending, activities used etc.). This means you can easily track

hLJLJ2NJűdzyƒλűλŜă ₮2NJ bl·Yˇl·ăűŜ /l·NJŜ ¢NJl·λyƒλyƎ

Some practitioners have implemented Namaste Care in their services without specific training. However, it is worthwhile considering whether training would help in your implementation. Training can be a great way to enthuse staff members and Ŝyãdzℕ Ŝ űKl·ű ŜØŜℕè2yŜ Kl·ă l· ŏfŜl·ℕ λŘŜl· 2yˇűKŜ Ψ∃2l·fΩ űKŜ K2YˇŜ λă úℕèλy∃ ű2 l·ŏKλŜØŜΦ ¢KŜ case study care homes in our study received two training sessions: one for the leaders of the service and one for possible Namaste Care Workers.

ΨTKŜℕŜ λă ă2YˇŜ ăűdz₮₮ 2yˇűKŜ AfÎKŜλYˇŜℕΨă ǿŜbăλűŜ bdzű űKaűΩă λűΣ bdzű y2b2Řè űŜacKŜă è2dz K2ǿ ű2 cKayƎŜ è2dzℕ aLJLJℕ2acKXΦ N2b2Řè űŜacKŜă è2dz K2ǿ ű2 ŜyãdzℕŜ űKŜ bŜăű Ijdzatűë of life ℕaűKŜℕ űKayˇ?dzăű ŜÈλăűλy∃Φ I űKλyl űKaűΩă űKŜ Řλ₮₮ŜℕŜycŜΣ λűΨă ∃λØŜyˇKλY Yˇ2ℕŜ quality of life through the work the home have done but also making me think Řλ₮₮ŜℕŜyűtëΩ

and Aging 47 (i) pp1-22

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¦ ăŜŦdzf 5ƨŎdzϒŜyűă

(PAINAD)

tl·ƛƴ ! ăăŜăăϒŜyű ƛƴ ! ŘØl·yŐŜŘ 5ŜϒŜyűƛl· {Ől·fŜ ót ! Lb ! 5ú

_____Observe the patient for five minutes before scoring his or her behaviors. Score the behaviors according to the following chart. Definitions of each item are provided on the following page. The patient can be observed under different conditions (e.g., at rest, during a pleasant activity, during caregiving, after the administration of pain medication).

PAINAD Item Definitions (Warden et al., 2003)

Breathing
1. *Normal breathing* is characterized by effortless, quiet, rhythmic (smooth) respirations.
2. *Occasional labored breathing* is characterized by episodic bursts of harsh, difficult, or wearing respirations.
3. *Short period of hyperventilation* is characterized by intervals of rapid, deep breaths lasting a short period of time.
4. *Noisy labored breathing* is characterized by negative-sounding respirations on inspiration or expiration. They may be loud, gurgling, wheezing. They appear strenuous or wearing.
5. *Long period of hyperventilation* is characterized by an excessive rate and depth of respirations lasting a considerable time.
6. *Cheyne-Stokes respirations* are characterized by rhythmic waxing and waning of breathing from very deep to shallow respirations with periods of apnea (cessation of breathing).

Negative Vocalization
1. *None* is characterized by speech or vocalization that has a neutral or pleasant quality.
2. *Occasional moan or groan* is characterized by mournful or murmuring sounds, wails, or laments. Groaning is characterized by louder than usual inarticulate involuntary sounds, often abruptly beginning and ending.
3. *Low level speech with a negative or disapproving quality* is characterized by muttering, mumbling, whining, grumbling, or swearing in a low volume with a complaining, sarcastic, or caustic tone.
4. *Repeated troubled calling out* is characterized by phrases or words being used over and over in a tone that suggests anxiety, uneasiness, or distress.
5. *Loud moaning or groaning* is characterized by mournful or murmuring sounds, wails, or laments in much louder than usual volume. Loud groaning is characterized by louder than usual inarticulate involuntary sounds, often abruptly beginning and ending.
6.

bl·Yl·ăűŝ {Ƙƨ₦ŭ vdzŜăűƛƨyƴl·ƛ₦Ŝ ób{vú

This form needs to be completed after each session of Namaste run in your home.

Initials of staff member running Namaste session	
Date of Namaste session	
Time of session (e.g. 10.30-12.30)	
Number of residents in session	
Were any extra people present during any of the session, e.g. relatives? (please state how many)	
If not completing this questionnaire straight after the Namaste session, please tell us the date and time of completion	

(Please circle as many as appropriate)

Physical well-being	¢Kλă ɲyŎťdzŘŜă l·yȅúKλyƎ ű2 Ř2 ǿɲűK űKŜ LJŜ₦ă2y₢ă ō2Řè l·yŘ LJKèăλŎl·f ăŜyãl·ûɲ2yã Ŝ₱Ǝ₱level of comfort; pain; warmth/cold etc.
Emotional well-being	¢Kλă ɲyŎťdzŘŜă l·yȅúKλyƎ ű2 Ř2 ǿɲűK űKŜ LJŜ₦ă2y₢ă ŜY˙2úɲ2yã l·yŘ ŦŜŜťλyƎă₱ Ŝ₱Ǝ₱ fŜØŜf of distress; anxiety or signs of happiness/contentment etc.
Awareness /alertness	This concerns the extent the person is aware of or

Poor

Good

Namaste Care is a programme primarily for residents with advanced dementia. It engages people at a physical, sensory and emotional level using activities such as snacks and drinks, pain management, music, aroma, touch and visual stimulation. It puts a person at the heart of the activity, focusing on their needs and wishes.

We try to deliver Namaste Care sessions

[fill in as appropriate - ŜØŜℕè ŘI·è κ ű ø ƛÖŜ I· ŘI·è κ ƨy˝X¢ I·yŘ X¢ß¢

The aim of Namaste Care is to improve quality of life for residents, helping them to