



Katherine Abbott, PhD, MGS

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“My goal is that all individuals living with dementia receive preference-based, person-centered care. I believe I have a role to play by partnering with providers to co-create efficient processes that can support their efforts to assess, honor, and communicate individual preferences throughout the care delivery process.”

Katy Abbott, PhD, MGS, is an associate professor at Miami University. Dr Abbott conducts research focused on preference-based, person-centered care for older adults receiving long-term services and supports. She has explored the consistency and stability of preferences, as documented with the evidence-based Preferences for Everyday Living Inventory (PELI). After identifying barriers providers face when implementing evidence-based programs, Dr. Abbott led the development and dissemination of practical training resources, including an online course, videos, tip sheets, and clinical communication tools. These resources can be found on the Preference Based Living website, www.preferencebasedliving.com. Dr. Abbott has also helped develop and test the Individualized Positive Psychosocial Intervention (IPPI). IPPI is an evidence-based program designed to support care partners in engaging people living with dementia in positive ways that enhance well-being and prevent and reduce negative emotional and behavioral responses using non-pharmacological approaches.

Partnering with Providers to Understand the Individualized Positive Psychosocial Intervention (IPPI) Outcomes of Interest for People Living with Dementia (PLWD)

United Church Homes (UCH) is a 106-year old nonprofit national senior living provider that provides services to 5,500+ residents of all faiths in 79 senior living communities based in 14 states and two Native American nations.

As a HCS Scholar, Dr. Abbott will partner with an interdisciplinary team at UCH to enhance her knowledge of nursing home (NH) systems and build capacity to conduct an ePCT of the IPPI program. The IPPI intervention will be implemented into daily care processes within four to eight NHs owned or managed by UCH. The program leverages existing data sources (e.g., MDS 3.0 Section F, Preferences), to tailor IPPI activities to important resident preferences. Together with UCH, Dr. Abbott seeks to achieve the following **Partnering Goals**: 1) Identify potential **barriers and facilitators** to implementing new initiatives in UCH NHs; 2) Collaboratively identify IPPI program process and impact **outcomes** of interest to key stakeholders; 3) Integrate pragmatic process and impact outcome measures into the UCH electronic medical record; and 4) Build a strong foundation of **trust and collaboration** that can support an IMPACT Collaboratory Pilot grant to conduct a pilot study for an ePCT of the IPPI program in PLWD.