

Adapting To Complexity In Dementia Care: Measuring Dynamic Capabilities In U.S. Adult Day Services

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1 BACKGROUND

Adult Day Services (ADS) are a critical component of community-based dementia care, yet they operate in environments shaped by rising dementia prevalence, increasing care complexity, and growing population diversity.

While prior research has largely focused on individual-level outcomes, less attention has been paid to the **organizational capacities** that enable ADS to adapt to these challenges. Understanding how ADS sense emerging care needs, seize care opportunities, and reconfigure internal resources is essential for sustaining high-quality, community-based dementia care.

RESEARCH GAP

Building on recently published work developing and pilot-testing a **dynamic capabilities measurement scale for ADS**, this presentation examines how dementia care is operationalized in practice and how organizational adaptations manifest on the ground in U.S. Adult Day Services.

2 DYNAMIC CAPABILITIES FRAMEWORK



- ▶ **Sensing:** Ongoing assessment and reassessment of participant cognitive and behavioral needs
- ▶ **Seizing:** Matching participants with appropriate supervision levels and programming
- ▶ **Reconfiguring:** Structural, staffing, and process adaptations in response to complexity

3 METHODS

STUDY DESIGN

Qualitative component of a mixed-methods measurement development study drawing on interviews from two data sources



- ▶ **Data source:** Semi-structured interviews with ADS directors and administrators across multiple programs
- ▶ **Analysis:** Directed content analysis approach informed by the dynamic capabilities framework
- ▶ **Coding:** Transcripts coded to identify organizational processes related to sensing, seizing, and reconfiguring

4 KEY FINDINGS

Structural Adaptation
Dedicated memory centers, dementia-capable units, and differentiated staffing models

Clinical Processes
Ongoing assessment, staging & reassessment to match cognitive and behavioral needs

Safety-Driven Reconfiguration
Behavioral management, wandering risk, and medication coordination drive organizational change

Workforce Strategies
Specialized training, external partnerships, and adjusted staff-to-participant ratios

Person-Centered Design
Activity design reflecting culturally responsive, individualized approaches

Emerging Innovation
Technology-assisted cognitive activities illustrate uneven but growing experimentation

5 RECURRING PATTERNS ACROSS ADS

DEMENTIA-RESPONSIVE ENVIRONMENTS
Programs systematically reconfigure physical spaces and care units to reflect cognitive and behavioral heterogeneity among participants at varying dementia stages. Dedicated memory care wings and dementia-capable programming reflect intentional architectural and operational responses to escalating care needs.

SAFETY AS ORGANIZATIONAL DRIVER
Safety considerations — behavioral management, wandering risk, and medication coordination — frequently serve as primary triggers for organizational reconfiguration, not just clinical protocols. These pressures cascade into staffing decisions, physical layout changes, and care planning protocols across sites.

CULTURAL RESPONSIVENESS
Workforce strategies and activity programming reflect intentional adaptation for diverse populations, embedded within broader person-centered care philosophies. ADS serving multicultural communities report adapting language access, dietary programming, and cultural activities as core operational competencies.

UNEVEN TECHNOLOGICAL ADOPTION
Emerging innovations such as technology-assisted cognitive activities illustrate growing but unevenly distributed experimentation across ADS. Resource constraints and staff capacity shape which organizations can pilot and sustain technology-based programming at scale.

6 CONCLUSIONS

These findings illustrate how dynamic capabilities are **enacted in real-world dementia care settings** and provide qualitative validation for a newly developed measurement framework.

THEORETICAL CONTRIBUTION
By linking organizational adaptation to dementia care complexity, this study advances understanding of how ADS **sustain care quality under changing conditions**. The dynamic capabilities lens offers a theoretically grounded framework for examining organizational resilience in community care settings.

PRACTICE IMPLICATIONS
Results offer practical insights for providers and policymakers seeking to strengthen the **resilience and responsiveness** of community-based dementia care systems. Workforce development, structural flexibility, and culturally responsive programming emerge as priority levers.

MEASUREMENT ADVANCEMENT
Qualitative findings validate the dynamic capabilities scale developed in the companion quantitative study, reinforcing its utility for ADS program evaluation and future large-scale research.

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KEY TAKEAWAYS

- 1 Challenge:** ADS face mounting organizational pressure from rising dementia prevalence and care complexity, yet organizational-level adaptive capacity remains understudied.
- 2 Approach:** Using directed content analysis grounded in the dynamic capabilities framework, we reveal how ADS leaders sense needs, seize opportunities, and reconfigure resources.
- 3 Impact:** Findings validate a new measurement framework and provide actionable insights for building more resilient, person-centered community dementia care systems.