

	Approach	Evidence-based Summary	Considerations for Feasibility
High Feasibility	Music Therapy	<ul style="list-style-type: none"> • Music therapy approaches can range from formal activities with a music therapist to listening to recordings on an iPod or in a small group setting. • Individualized music that is calm and at 55-60 beats per minute, which mimics human heartbeat, has shown to be the most effective in alleviating agitation. In selecting proper music, match the ticking of the clock to the beat of the music. 	<ul style="list-style-type: none"> • Several RCTs have reported reduce agitation, anxiety and depression while residents are listening to music or participating in music therapy. • The effects of music therapy are brief, and may dissipate quickly afterwards.
	Massage/Touch Therapy	<ul style="list-style-type: none"> • Hand massage with calming music has been shown to decrease agitation. • Touch combined with verbal encouragement during mealtimes improved intake 	<ul style="list-style-type: none"> • The greatest limitation to massage/ touch therapy is limited staff time to engage in this activity. • Staff may also need additional training and/or incentives to initiate massage/touch therapy.
	Pain Management	<ul style="list-style-type: none"> • A systematic approach to pain management has been shown to significantly reduce agitation in nursing home residents with moderate to severe dementia. 	<ul style="list-style-type: none"> • Improving pain management is both highly feasibly as well as a basic clinical standard of practice. • www.geriatricpain.org provides free resources to nursing home providers, including copies of tools for pain assessment and methods for pain management.
Moderate Feasibility	Serial trial Intervention (STI)	The STI has been shown to reduce discomfort and reduce behavioral symptoms among nursing home residents.	<ul style="list-style-type: none"> • Implementation of the STI requires investment from facility staff including leadership to support adoption of protocols. • It also requires specialized training of nurses to carry out the intervention, which may not be feasible in all NHs.
	Aromatherapy	<ul style="list-style-type: none"> • Most studies that demonstrated positive outcomes included massage with administration of calming essential oils, such as lavender. • Some study results suggested that aromatherapy had adverse effects in a small number of patients. 	<ul style="list-style-type: none"> • Aromatherapy should be discussed with a qualified aroma therapist who can advise on contraindications. • To ensure minimal harm, staff will need to assess whether aromatherapy is likely to be well received by first assessing tolerance of essential oils to be used (including allergies). • Treatment times in different approaches varied, so providers likely need to establish their own treatment protocols.
	Treatment Routes for Exploring	<ul style="list-style-type: none"> • trEA has been shown to significantly reduce agitation among nursing home residents with 	<ul style="list-style-type: none"> • The trEA approach also requires substantial investment from a care system in order for the protocols to be realized. • A large component of the trEA protocol includes information gathering by staff which may be time consuming and resource-intensive.

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	Agitation (TREA)	dementia.	<ul style="list-style-type: none">• Unmet needs were hypothesized based on various data sources that may not be readily available to all nursing homes including physician assessments and observations of behavioral disturbances.