

Reducing Stress and Distress in Specialist Dementia Units Using Evidence-based Approaches

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Introduction

Focus on Dementia, the national improvement programme for dementia, has been supporting four specialist dementia unit demonstrator sites and a national learning and improvement network, supporting the implementation of commitment 7 of Scotland's dementia strategy¹.

What we did

The programme was developed in partnership with a range of stakeholders. Experience Based Codesign² was selected as the improvement approach as it enables the local experiences and context to shape the selection of improvement priorities.

1. Phase 1 (April 2017-March 2018): Four demonstrator sites worked with people with dementia, their carers and staff using the EBCD method (see Figure 1).
2. Phase 2 (April 2018-March 2019): based on the learning in phase 1 a logic model and measurement plan were developed. Improvements were taken forward using the Model for Improvement³. A evaluation was undertaken.
3. Established the SDU Learning and Improvement Network to engage staff from all SDUs across Scotland.

The impact of this work

In evaluating this work, we identified seven key impacts:

1. improved understanding of the experiences of people with dementia, relatives/carers and staff to inform improvement
2. staff increased quality improvement knowledge and skills and units developed a culture of improvement
3. improved staff resilience as they care for people with dementia
4. improved patient outcomes, e.g. a reduction in stress and distress (figure 3 and 4) and reduction in falls (figure 2)
5. process improvements including use of ABC charts, person centred activity and person centred recording and communication
6. increased network activity and use of digital platforms
7. raising the profile of Specialist Dementia Units

References:

1. Alzheimer Scotland, COSLA, Scottish Government. Scotland's National Dementia Strategy 2017-2020. 2017 [cited 2019 Apr 10]; Available from: www2.gov.scot/Resource/0052/00521773.pdf
2. The Point of Care Foundation. Experience-based co-design toolkit [online]. 2013 [cited 2019 Apr 10]; Available from: www.pointofcarefoundation.org.uk/resource/experience-based-co-design-ebcd-toolkit/
3. Langley et al. The Improvement Guide (2009) p23-25.

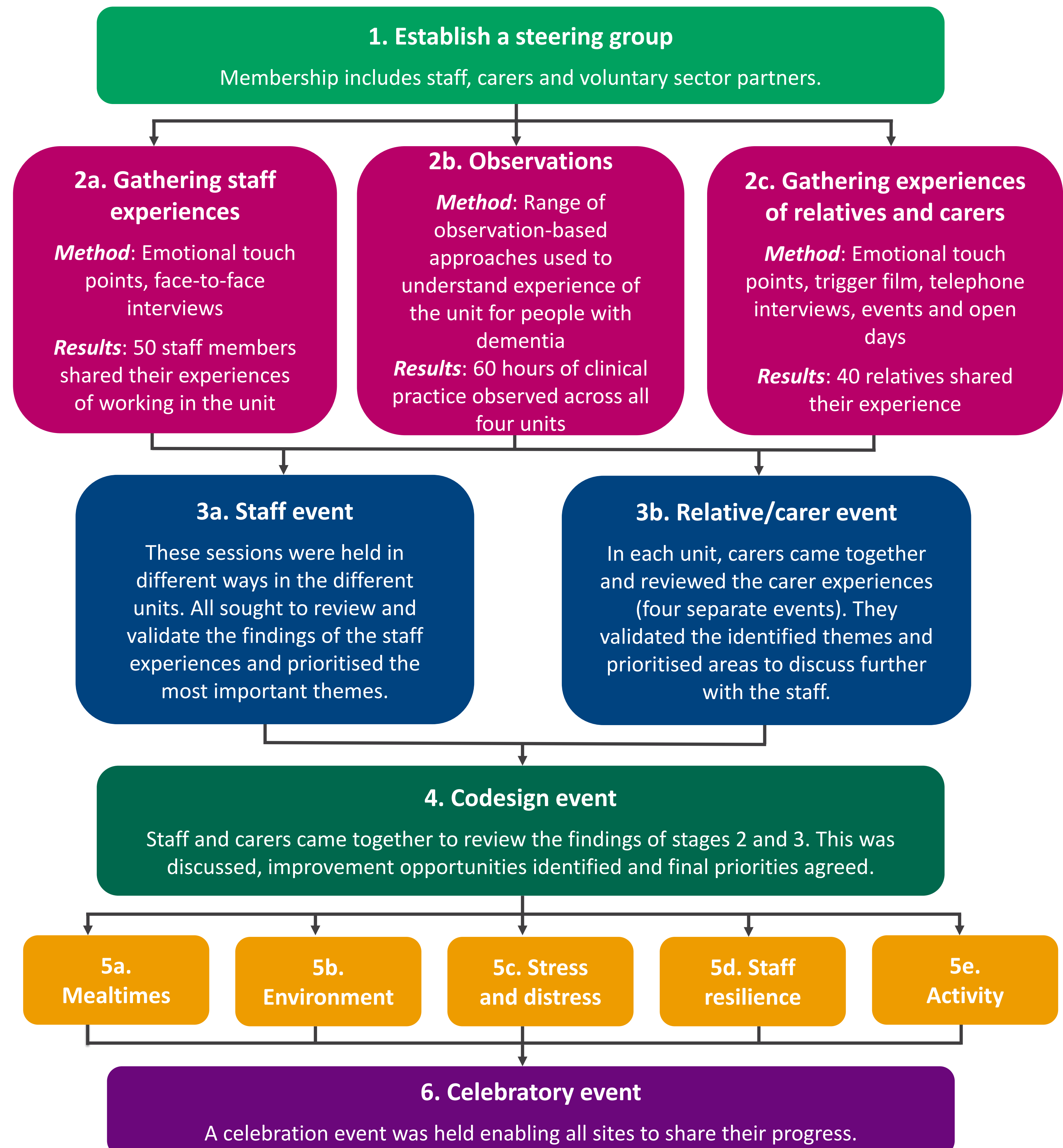


Figure 1: Method incorporating the EBCD improvement methodology

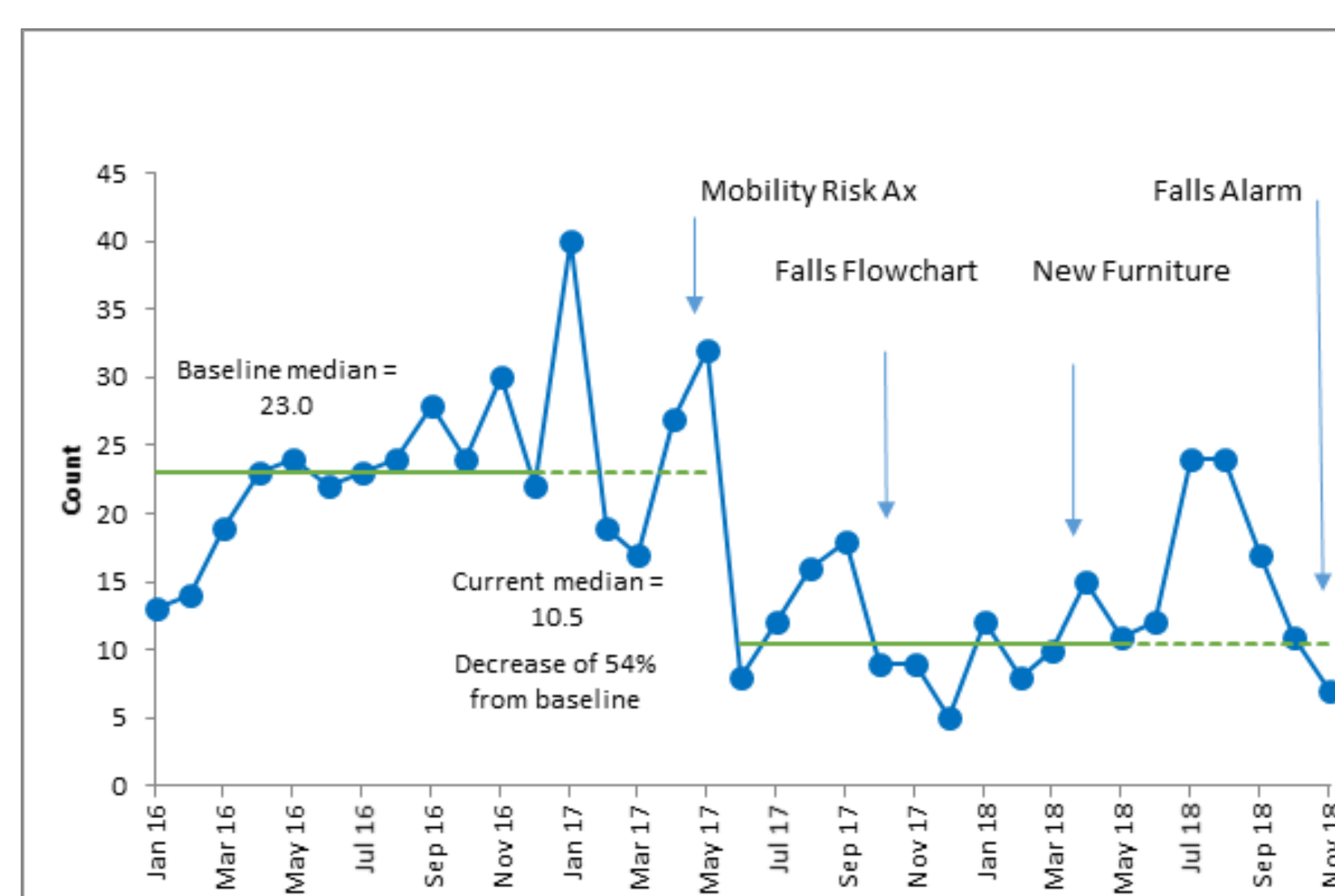


Figure 2: Reduction in falls at one of the units, source: Datix

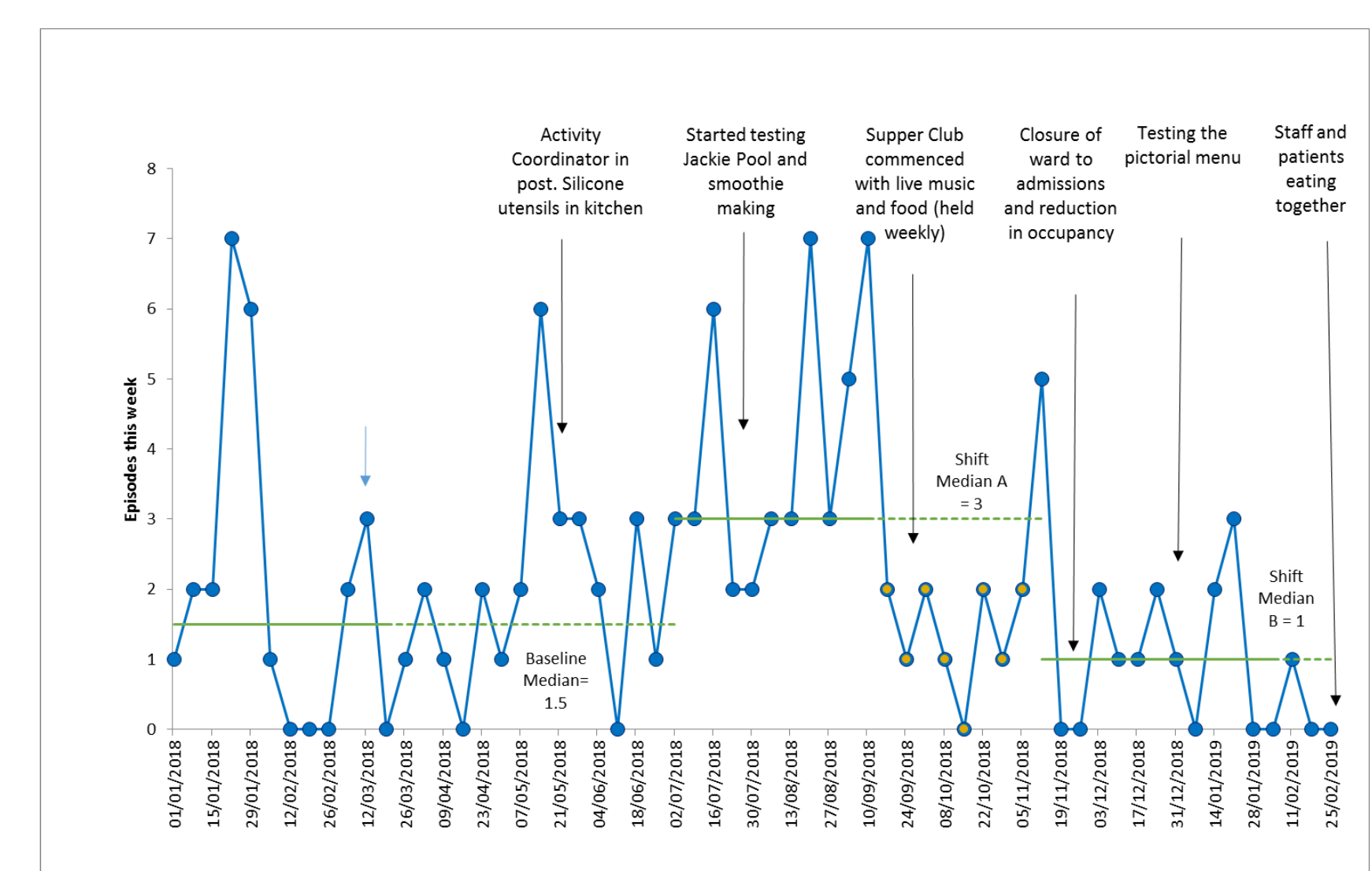


Figure 3: Reduction in episodes of violence and aggression in one demonstrator site, source: Datix (NB: this is a proxy measure for stress and distress)

You can see the clear outcomes in reduced stress and distress. There are fewer medications, more meaningful activities – and the paperwork is higher quality (staff member)

Figure 4: Qualitative feedback

Next steps

1. Spreading the learning from this programme in the Dementia in Hospitals Collaborative – launching autumn 2019
2. Launching an online toolkit to share learning from this work
3. Publishing evaluation findings