

King's College Hospital 
NHS Foundation Trust



DELIVERING DIGNITY AT KING'S COLLEGE HOSPITAL

Supported by the Burdett Trust for Nursing '*Delivering Dignity through Empowered Leadership*' Programme

Final Project Report to the Burdett Trust for Nursing

10th January 2015

Report prepared by:

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Executive Summary

The 'Delivering Dignity' project at King's College NHS Foundation Trust was funded for one year by the Burdett Trust for Nursing. It aimed to:

- Enhance dignified, compassionate care for older people with dementia in hospital
- Empower staff to incorporate therapeutic activities in to patient care
- Demonstrate the value on patient experience and outcomes

We partnered with local reminiscence arts experts Age Exchange to develop and deliver a bespoke therapeutic activities training program for staff. Bucks New University provided academic support for action learning and project evaluation.

The project completed in January 2015, on time and on budget. Key result areas:

- Fifty seven members of staff and volunteers across Denmark Hill and Princess Royal Hospital sites trained and supported
- Activity boxes and resources introduced on eleven wards across both sites
- Positive training outcomes demonstrated, with 97% of participating staff meeting learning outcomes in delivering activities
- Staff empowerment demonstrated through personal and professional gains such as increased motivation and improved communication skills
- Patient experience explored, and further work identified to capture the value and outcomes for patients.

Recommendations for King's College Hospital:

- Provide activities training for staff especially HCAs and one-to-one carers
- To develop the role of Kings Volunteers in promoting meaningful activities
- To identify opportunities for future research and evaluation of the introduction of therapeutic activities for people with dementia

Recommendations for NHS hospitals:

- To promote dignity for people with dementia in hospital through use of therapeutic activities. Hospitals should offer training, resources and support to HCA's, one-to-one carers, other selected staff and volunteers in developing and using activities as part of planned, person-centred care. Dementia awareness training should also be provided.

Recommendations for the Burdett Trust for Nursing

- Consider supporting further development and evaluation of therapeutic activities in acute care, such as testing of sustainability and support models, developing patient experience measures, and exploration of care giver needs

1. Background

King's College Hospital NHS Foundation Trust is a large teaching hospital in South London. There are 829 inpatient beds at its main site at Denmark Hill and 525 beds at the Princess Royal University Hospital Bromley site. It also delivers services at Orpington Hospital, Queen Mary's Hospital Sidcup and Beckenham Beacon. It is part of King's Health Partners Academic Health Sciences Centre. King's is a tertiary referral centre in certain specialities both nationally and internationally.

Up to one quarter of hospital beds are occupied by people with dementia, and delirium is present in at least 30% of all older patients admitted to hospital. At King's we recognize that when acutely ill, people with dementia can find the acute hospital experience disorientating and distressing, which can manifest as agitated or disturbed behaviour. Our project proposal was based on the premise that provision of person-centred activity for people with dementia on our wards would help them to retain a sense of identity and reduce distress reactions and disturbed behaviour.

Our Occupational Therapy department and activities organiser, with support from nursing staff, provides therapeutic, structured activity for patients on our Health and Ageing wards. We aimed to extend activities training to all staff groups, wards and departments where people with dementia are cared for, empowering them to incorporate the approach into planned, person centred care. We planned to build on and embed practice within existing initiatives at Kings such as Kings Dignity Champions Network, Enhancing the Healing Environment, Dementia and Delirium Training and the SMILE project (a multidisciplinary forum to promote activities on the Health and Ageing Unit wards).

King's application for a one year project was submitted in April 2013 and in May 2013, £62 000 funding was awarded for the 'Delivering Dignity' project at Kings.

2. Aims

By provision of training, resources and support for staff to incorporate meaningful activities into planned care for people with dementia, the project aimed to:

- Enhance dignified, compassionate care for people with dementia in hospital
- Empower staff to incorporate therapeutic activities in to patient care
- Demonstrate the value on patient experience and outcomes.

A further implicit aim of the project was that therapeutic use of activities would also assist staff to develop effective and caring relationships with older people

3. Project Governance

A project steering group was set up to oversee the project. The group met quarterly throughout the project. The Consultant Nurse for older people provided overall project leadership. A part time project manager was appointed to take responsibility for day to day project management. Group members are listed in Appendix B

4. Method

The 'Delivering Dignity' project partnered with local reminiscence arts charity Age Exchange to establish a bespoke training programme and to create resources. Bucks New University provided academic consultation, evaluation methodology and data analysis. For further information about our project partners please see Appendix A. The project was primarily based on the Denmark Hill site.

4.1 Training programme and action learning

The training programme was based on three core principles:

1. Dignity through care
2. Dignity through communication
3. Dignity through activity

The content taught incorporation of meaningful activity and reminiscence in to planned care based on individual patient preferences, and use of the 'This is Me' document (see Appendix C)

The training opportunity was open to multidisciplinary, administration and volunteer staff. A prerequisite of the training was that staff had basic dementia awareness and that staff members were motivated to improve dementia care.

An action learning approach was used to deliver training and to consolidate learning through action learning sets. A pre and post training evaluation questionnaire was developed to test staff knowledge and skills relating to delivering meaningful activity with people with dementia. Staff focus groups were then carried out to explore the impact of the training on practice. Participating staff were also invited to attend a confidential, facilitated session for reflection and support, and to develop a personal action plan. A structured patient questionnaire was developed to explore patient views and experience of activities.

4.2 Activity box resources

Working with our expert advisors from Age Exchange, activity boxes were created for staff, volunteers and visitors to use for therapeutic activities, either on a one to one or group basis. The contents were developed to meet a variety of patient's needs including engagement, stimulation, distraction from medical procedures, assessment, discharge planning and to support 1:1 specialling.

The boxes included resources for activity themes, including London life, working life, market life and holding objects. Other items included games such as dominoes, quizzes, postcards, and conversation prompts. The box is a portable resource with bedside guidance on how to use and maintain the contents of the box. Each box cost approximately £50 to produce and all items are infection control friendly.

Results

Five half day training sessions were delivered from April 2014- September 2014. Fifty seven members of staff attended from a range of clinical areas and teams including the Health and Ageing unit wards, stroke unit, dementia team, orthopaedics, surgery, medicine, falls team and outpatients.

Table 1: Training attendance by staff group

Staff Group	Number of staff who attended training
Nursing staff	13
Health Care Assistants	20
Specialling Team	5
Occupational Therapists	5
Occupational Therapy Assistants	3
Assistant Practitioner	1
Speech and Language Therapist	1
Activities Team	1
Volunteers	4
Ward administrator	1
External Visitors	3

5.1 Training Outcomes

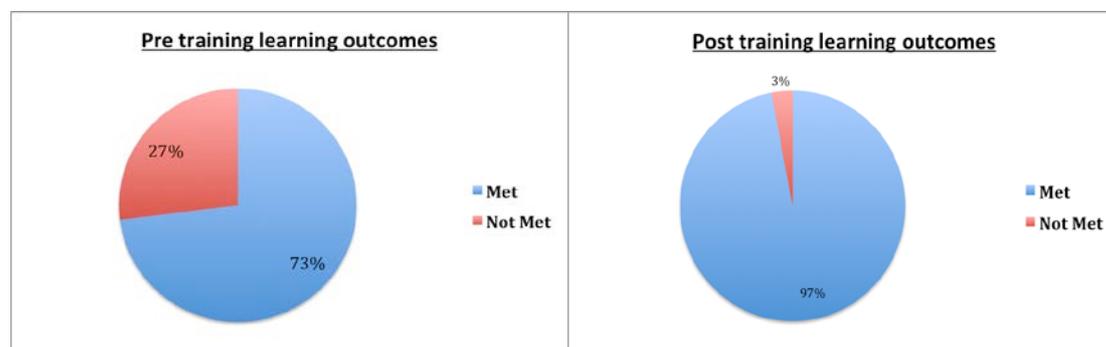


Figure 1: Pre and post training learning outcomes as reported by staff

Figure 1 shows that prior to training, 73% of staff felt that they met the learning outcomes i.e. that they had the knowledge and skills to use therapeutic activities as part of planned care. This increased to 97% of staff post training.

Staff gave positive feedback on the format and content of the training session:

'I liked the discussions, exercises and the video clips, very appropriate'

'I found the training very interesting and informative and enjoyed the way it was delivered in an interactive way'

5.2 Activity boxes

From August 2014, boxes were introduced on the following wards; Byron, Donne, Marjorie Warren, Mary Ray, Matthew Whiting, Friends Stroke Unit, Betty Alexander Suite, Critical Care, and two older people's wards at the Princess Royal Hospital. 7 further boxes have been created for the new hospital wide specialising team and 1 for shared use between our dementia and Older People's Assessment and Liaison teams.

5.3 Staff empowerment

Key aims of the project were to enhance dignified, compassionate care for older people with dementia in hospital by empowering staff to incorporate therapeutic activities into patient care. We held focus groups to explore the staff outcomes using qualitative methods. A model of empowerment through personal and professional gains emerged:

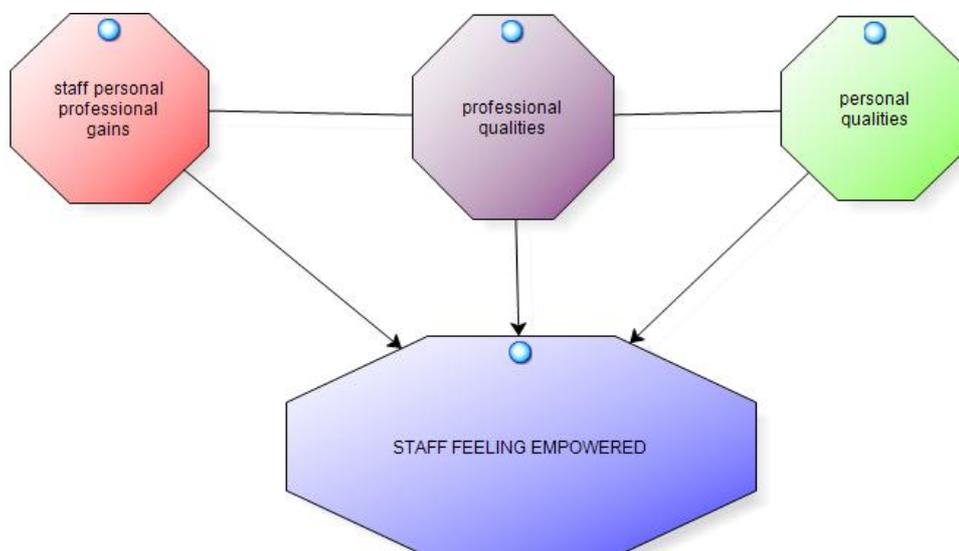


Figure 2: Model of staff empowerment

Staff demonstrated overwhelmingly positive experiences of undertaking the Dignity in Care Training and they were able to articulate how the training had made a difference to their practice, culture change and recognition of opportunities for engaging in activities with people with dementia, for example:

“ Patient picture was very helpful. Sat with patient and spent time asking about their past which really made a difference.”

“I have improved my communication skills and found that I have got closer to my patients. Some of the items are interesting and will motivate you to care for your patient. It helped to improve quality of care.”

5.4 Patient outcomes

A random sample of 8 patients was selected across three wards where staff had received training, and approached for interview using the structured questionnaire. None of these patients had received activities interventions but their responses provided a rich picture of their experience and views of dignified care overall. Constraints on project time and resource prevented further exploration of patient outcomes, therefore it is recommended that further work be undertaken.

5. Sustainability and dissemination plan

All staff who attended *Delivering Dignity* training have been recruited as dignity champions, and will take responsibility for maintenance of their area's resources, and to promote the therapeutic use of activities. The King's Dignity Champions network meets on a monthly basis for support. King's Volunteers were included in the training and their role in supporting sustainability is being explored. Intranet / KWIKI dignity pages will be used to link staff to resources and to ensure the project profile is maintained.

A dissemination event was held in December 2014 at Kings College Hospital to share the project findings. It was attended by approximately 80 people from both King's and other organisations. Members of the project team also attended a Burdett Trust sponsored seminar for participating teams, at the King's Fund on 14th December.

Further dissemination plans include:

- Report to King's Governance Committees, Conferences, Bulletins and website
- Project report sharing through Burdett Trust website and events
- Poster at British Association of Occupational Therapists, June 2015 (accepted)
- Symposium Presentation at British Geriatric Society and Royal College of Nursing conference, March 2015 (accepted)
- Oral Presentation at International Institute of Qualitative Methodology Qualitative Methods Conference, April 2015 (accepted)

6. Conclusions and recommendations

The Delivering Dignity project was completed on time and on budget. Through provision of bespoke training, resources and support, using an action learning approach, it demonstrated a significant impact on staff empowerment, knowledge and skills in using therapeutic activities as part of planned care. The project identified a sustainability and dissemination plan that will support both local practice and wider sharing of the project aims and outcomes. As an organization we have identified benefits of collaboration with our project partners, which will continue to inform and support future service and practice development work.

Recommendations for local, and wider NHS hospital practice, evaluation and support were identified.

Recommendations for King's College Hospital:

- Provide activities training for staff especially HCAs and one-to-one carers
- To develop the role of Kings Volunteers in promoting meaningful activities
- To identify opportunities for future research and evaluation of the introduction of therapeutic activities for people with dementia

Recommendations for NHS hospitals:

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Recommendations for the Burdett Trust for Nursing

- Consider supporting further development and evaluation of therapeutic activities in acute care, such as testing of sustainability and support models, developing patient experience measures, and exploration of care giver needs

7. Acknowledgments

King's College Hospital is grateful to the following organisations for their partnership and support for *Delivering Dignity*

The Burdett Trust for Nursing
Age Exchange Centre for Reminiscence Arts
Bucks New University

Appendix A:

The Burdett Trust for Nursing

The Burdett Trust for Nursing was established in 2002 with the aim of making charitable grants to support the nursing contribution to healthcare. The Trustees target their grants at projects that are nurse-led and that empower nurses to make significant improvements to the patient care environment. The Trustees regularly review their grant-making policies and procedures to ensure that their grants achieve positive outcomes for patients, nursing and healthcare practice.

<http://www.btfn.org.uk/what-we-do/>

Age Exchange Centre for Reminiscence Arts

Age exchange has over 30 years' experience using reminiscence arts to improve well-being and combat loneliness and isolation in older age. With work spanning over three decades Age Exchange is leading in the field of improving the well-being of people with dementia through the development of an evaluated reminiscence arts intervention alongside delivering intergenerational arts and running a vibrant community hub.

Using their experience of the impact that reminiscence and activity can have on the wellbeing of older people, Age Exchange worked with KCH to develop a training programme and activity boxes that would empower staff and patients to engage in meaningful relationships.

<http://www.age-exchange.org.uk/>

Bucks New University

Bucks New University was founded in 1893 as the School of Science and Art. It now offers education to over 9,000 students studying on a range of courses linked to the creative and cultural industries, the management and information management sectors, and the public sector

Bucks New University vision is to be a leading professional and creative influence, shaping higher education for the benefit of people and employers. Within a caring and supportive environment, the University delivers high-quality scholarship, as well as focused research and professional practice.

http://bucks.ac.uk/about_us/

Appendix B

Project governance: Steering group members

Nicky Hayes Consultant Nurse for Older people (chair)
Sarah Bartlett (Project Manager)
Geraldine Walters (Executive Director of Nursing and Midwifery) Project sponsor
Rachel Thompson (Honorary Dementia Adviser)
Paula Harvey (Older People's Specialist Nurse, Dignity Champions Lead)
Lisa De Jonge (Matron)
Emma Ouldred (Dementia Specialist Nurse)
Graeme Groom (Orthopaedic Surgeon) Chair of Older People's Committee
Paran Govender (Director of therapies)
Michelle Mote (Senior Occupational Therapist)
Fiona Clarke (Governor)
Pam Cohen (Governor)
Debbie Mazhindu (Reader in Clinical Nursing Practice & Innovation, Buckinghamshire
New University & Imperial Healthcare NHS Trust)
Jacqueline Ede (Trainer, Age Exchange Centre for Reminiscence Arts)
Suzanne Lockett (Director of Operations, Age Exchange Centre for Reminiscence
Arts)

Appendix C

This is Me

This is me is a tool developed to support people with dementia who are receiving professional care in any setting – at home, in hospital, in respite care or a care home. It was originally developed for people with dementia who were going into hospital.

This is me is a simple and practical tool that people with dementia can use to tell staff about their needs, preferences, likes, dislikes and interests.

It enables health and social care professionals to see the person as an individual and deliver person-centred care that is tailored specifically to the person's needs. It can therefore help to reduce distress for the person with dementia and their carer. It can also help to prevent issues with communication, or more serious conditions such as malnutrition and dehydration.

This is me was first developed by the Northumberland Acute Care and Dementia Group and is supported by the Alzheimer's Society and the Royal College of Nursing