

Building staff capacity to provide responsive care

One of the most pressing issues in the care of people living with dementia is that of behavioural changes associated with multiple and complex factors. These factors include, for example, those related to the progression of dementia, such as changes in the ability of the person to adequately express their own thoughts and feelings.

Of equal importance are the legibility and comfort of the person's physical environment, the effects of psychotropic medications they have been prescribed, the extent to which their expressed preferences and needs are well understood and met, and the way that staff and family involved with the person relate to them.

Paradigm shift

The philosophy of person-centred care has contributed to a major paradigm shift in the way we think about the care of people living with dementia. An understanding by staff of how their own behaviour can be a powerful influence – both positive and negative – in determining the way in which people living with dementia respond to and experience care is central to improving care. Yet, as noted in the recent Australian Government Aged Care Workforce report (Kostas *et al* 2017), considerable ongoing attention to staff training is required in the aged care sector for us to match care aspirations with care realities.

Intensive support

The Responsive Behaviours Consultancy (RBC) is a staff training program offered to residential aged care organisations or other providers by Dementia Training Australia (DTA) as



part of a DTA Tailored Training Package. (DTA is funded by the Australian Government to deliver a range of dementia training opportunities to the aged and health care sectors.)

The RBC is offered after a DTA training needs analysis and discussion with a representative from the interested organisation has identified a need for intensive support to improve the way staff address the responsive behaviours of people living with dementia.

Education and mentoring

The consultancy offers a comprehensive education and mentoring experience fitted to the needs of an organisation and focused on personal awareness, skill and confidence-building in staff. Organisations can directly approach DTA or may be referred to DTA following a consultation with the Dementia Behaviour Management Advisory Service (DBMAS) or the Severe Behaviour Response Teams (SBRT).

The RBC is not designed as a knee-jerk reaction to individual events such as a poor accreditation report, a formal complaint or a specific concern about an individual

resident. Rather, it is a service in which DTA partners with an organisation over a period of time to develop sustainable care practices.

The RBC team helps staff understand the triggers for behaviour changes in residents, identify their attitudes and responses to residents and understand how their own behaviours can contribute to resident responses. They will also help staff identify and consider their own unique capabilities and how to use these to transcend a task approach to care.

When an organisation undertakes a RBC, DTA works with the management team and staff to assess the organisation policies relevant to the specific issues of concern and to evaluate the staff's level of dementia knowledge. This is an essential first step in all DTA Tailored Training Packages and is how DTA and the organisation agree on what is to be achieved and how to achieve it.

Lead And Learn

Once a RBC plan is agreed, DTA will deliver the Lead And Learn Education Program, a core element of the consultancy.

The program is delivered to

Elizabeth Beattie introduces Dementia Training Australia's new Responsive Behaviours Consultancy – a staff training program to help residential aged care organisations address and reduce dementia-related responsive behaviours

care champions nominated by their organisation. It's designed to help create a sustainable capacity-building education framework for addressing and reducing dementia-related responsive behaviours and to build a small group of care champions in a facility.

Throughout the program the champions are closely mentored by DTA staff and supported to develop as leaders in responsive behaviour care. The program content is delivered by a DTA consultant who remains the ongoing contact throughout the program.

Components of the Lead And Learn Education Program include:

- An introduction to the concept of responsive behaviours within DTA's salutogenic framework. The salutogenic approach looks beyond problems and symptoms and focuses on factors that support health and well-being, rather than pathogenic factors that cause disease.
- An exploration of several models to assist with understanding the factors underlying responsive behaviours, for example the Need-Driven Dementia Compromised Behaviour Model (Kolanowski 1999) and the Progressively Lowered Stress Threshold Model (Hall & Buckwalter 1987).
- An exploration of individual behaviours, including assessment processes, strategies and evaluation

that can be used to reduce the impact of behaviour changes on the person living with dementia. Case study scenarios are used to show how this is applied in practice.

The education involves input from experts in the assessment of the older person and dementia-related behavioural changes, stimulating video clips and realistic case study discussion sessions. Specific sessions on workplace leadership and mentoring and managing staff who are providing daily care to people living with dementia are included.

Delivery

The Lead And Learn Education Program is delivered nationally using an interactive web-based conferencing system. Each eight-week intake comprises 10-15 'champions' identified by the participating organisations. They may come from one or more organisations.

The program consists of eight one-hour, self-directed modules, supported by several interactive case study workshops and online support sessions. This provides a structured approach and gives facilities time to schedule and plan for the program requirements and develop readiness to engage.

DTA can also help each cohort to develop and build its own community of champions who can motivate and support each other throughout the

DTA Responsive Behaviours app

Dementia Training Australia's (DTA's) new Responsive Behaviours app provides a quick guide to responsive behaviours for health professionals and care staff in all settings.

The app features prompts on what to consider and tips on how to respond to 10 common responsive behaviours: agitation, apathy, anxiety, aggression, depression, disinhibition, psychotic symptoms, sleep disturbance, vocally disruptive behaviour and wandering. There is also a section on delirium.

Links to recommended tools for assessing each behaviour are embedded, and frameworks for addressing responsive behaviours (eg Need-Driven Dementia Behaviour Model (NDB) and the PIECES mnemonic) are included.

The app is based on DTA's Behavioural and Psychological Symptoms of Dementia (BPSD) Quick Reference Cards. The app incorporates the 'lanyard card' checklists: how well am I communicating?; getting to know the person living with dementia; and understanding the behaviour.

The Responsive Behaviours app is free to download for phone or tablet from the App Store or Google Play Store.



program and in the future.

The champions will be responsible for planning and delivering whole-of-staff training at the end of the Lead And Learn program, supported by their DTA consultant and additional DTA resources throughout. Each staff member will receive a certificate after completing the program and champions will receive special recognition as a valuable asset to their organisation.

Champion model

DTA is using a champion model, supported by mentoring, because research has made clear that education alone is not sufficient for

effective and sustainable practice change. Developing champions as leaders via a mentoring relationship with DTA staff is a critical part of their growth and building excellence in dementia care.

More information

Organisations interested in more information and accessing the Responsive Behaviours Consultancy through the Tailored Training Package program can inquire via the DTA website at www.dementiatrainingaustralia.com.au/services/reducing-responsive-behaviours/. ■

■ Professor Elizabeth Beattie is Professor of Aged and Dementia

Care School of Nursing, QUT, Director, Dementia Training Australia, QUT, and Director, Dementia Centre for Research Collaboration: Carers and Consumers, QUT.

References

- Hall G, Buckwalter K (1987) Progressively Lowered Stress Threshold: A Conceptual Model Of Care Of Adults With Alzheimer's Disease. *Archives of Psychiatric Nursing* 1(6) 399-406.
- Kolanowski A (1999) An Overview of the Need-Driven Dementia-Compromised Behaviour Model. *Journal of Gerontological Nursing* 25(9) 7-9.
- Kostas M, Knight G, Isherwood L et al (2017) 2016 National Aged Care Workforce Census and Survey – The Aged Care Workforce, 2016. Canberra: Australian Government, Department of Health.



CST - Cognitive Stimulation Therapy: what you must know and why

21st February 2018
9:15am registration for 9:45am start

Mercure Sydney Hotel, Railway Square, George Street, Sydney



Calling all clinical leaders, supervisors and care managers
Do you care for people with mild to moderate dementia?

Haven't heard about CST? You need to ... DRTA's Toni Wallwork is hosting this keenly priced seminar with international CST Experts Dr Gary Cheung and Dr Kathy Peri.

Find out what you REALLY need to know and why. How to empower staff to deliver this practical, effective, research-based intervention tool favoured in UK, Canada and now NZ and Australia.

Register NOW!

enquiries@diversionaltherapy.org.au | diversionaltherapy.org.au/CST_Training | 1300 113 395