Improving Patient- and Family-Centered Care for Hospitalized Persons with Dementia: Partner with Me

Cynthia Barton, RN, MSN
Jennifer Merrilees, RN, PhD

October 5, 2012
Background

- Hospital stays for people with Alzheimer’s disease are more frequent, longer and more expensive (Alzheimers Assoc Facts and Figures, 2011)
- Hospitalization results in adverse outcomes due to atypical presentation, inability to adhere to therapy, difficulty reporting symptoms (Gill, 2004; Doraiwswamy, 2002, Mukadam, 2010, Sullivan-Marx, 1994)
- Nurses lack knowledge in acute setting (Nolan, 2006) and report being afraid to care for these patients (Eriksson and Saveman, 2002)
Background

• Active role of family members reduces delirium and depression (Li, 2003)

• Implementation of specific interventions can reduce delirium, restraint use, depression and improve satisfaction with care and staff understanding (Inouye, 2000; Inouye, 2004; Li, 2003)
Inspiration

• Collaboration between inpatient and outpatient advanced practice geriatric nurses working with cognitively impaired patients

• Outpatient
  – Decline in patients after hospitalization
  – New referrals after hospitalization
  – Caregiver distress with hospital experience

• Inpatient
  – Delirium superimposed on dementia
  – New revelation of cognitive deficits
  – Staff challenges in caring for this population
Opportunity

- Picker Foundation *Always Events* Funding

- The *Always Event* will be that patients with dementia and their families receive care that is targeted to the patient’s type and stage of dementia.

- Funding matched by the UCSF Department of Nursing
Partner with Me

• Patient/family preparation
  – Educational video
  – Education packet

• Targeted Care
  – Focused screening assessment
  – Dementia specific careplan

• Staff training
  – Alzheimer’s Association Training
  – Volunteer Team
Patient/Family Preparation: Video

• “Partnering with Family Caregivers – A Guide for Hospitalization When Your Loved One has Dementia”
  • On hospital channel 24hrs/day
  • On UCSF MAC website (with ordering information)
  • Distribution to clinics and pre-operative service
Video

Partnersing With Family Caregivers

Chapters
1. The Need for Partnering
2. Defining Dementia
3. Defining Delirium
4. Identifying Problems with Cognition
5. How Health Care Providers Can Help
6. Important Information for Family Caregivers to Share
7. What Family Caregivers Can Do to Prepare For a Hospital Stay
8. Preparing for Discharge
9. Looking Ahead
10. Resources

A Guide for Hospitalization When Your Loved One has Dementia

University of California San Francisco
Picker Institute
Kathaka Films
UCSF Medical Center
Video Clip
Patient/Family Preparation: Information Packet

- Introductory letter
- *Hospitalization Happens & Hospital Hints (NIA)*
- Video
- Schedule for family supervision
- List of items to bring to hospital
- Handouts about behavioral symptoms and caring for someone with memory problems
- Post hospital resources
Targeted Care: Focused admission assessment

- Adapted from Nurses Improving Care for Health System Elders (NICHE) tool
- On admission by a trained volunteer with the family caregiver
- Questions specific to:
  - Communication
  - Functional abilities
  - Sleep and nighttime behaviors
  - Current strategies for managing behaviors
Information for the Hospital Team
About a Patient with Memory Problems

Personal Info:
What does patient like to be called? ____________________________

I like to:
Does the patient usually watch TV or listen to the radio? _____Yes _____No
If so, what shows or type of music or TV shows? ____________________________

What are some favorite topics to discuss with patient? ____________________________

Nutrition:
Patient usually eats these foods best: ____________________________
Patient eats best if he/she:
  Is helped with tray set up _____
  Is given smaller portions _____
  Is shown how to use spoon or fork _____
  Is given finger foods _____
  Is reminded to chew and swallow _____
Patient usually drinks these liquids best: ____________________________
Patient usually drinks from a cup or glass: _____With a straw? _____Without a straw?

Medications:
Does that patient take his/her medications easily? _____Yes _____No
# Targeted Care Plan

## Partner With Me

### Personal Info

- **Call Me:**
- **Former occupation:**
- **Language Spoken:**
- **Best to avoid a lot of questions? Yes No**
- **I'm able to use a call light? Yes No**

### Hygiene

- **Observe Assist**
- **Cues**
- **Shower Bath Q days**
- **AM PM**
- **Dentures**

### Sleep

- **To bed at:**
- **Up at:**
- **Daytime naps: Yes No**
- **Problems:**
- **Comfort measures:**

### Activity

- **Walks independently**
- **Needs help**
- **Walker**
- **Cane**
- **Wheelchair**
- **Dresses:**
  - **self w/ assistance**

### Nutrition

- **Meals/day**
- **Mug Glass**
- **Straw**
- **Feed Utensils Prep Tray**
- **Finger Food Snacks**

### Toileting

- **Independent Depends**
- **Cues**
- **At night times**
- **Daytime times**

### Behavior/Mood

- **Happy Sad Irritable Impatient**
- **If I'm upset, I get**
- **What helps me to calm down is**

### I like to

- **Watch TV**
- **Favorite shows**
- **Listen to radio**
- **Look at magazines**
- **Have books/magazines read to me**
- **Socialize**
- **My Favorite Topics**
### Care Plan

**Personal Info**  
- **Name:** Stella  
- **Occupation:** Business Woman  
- **Language Spoken:** Cantonese  
- **Best to avoid questions:** Yes  
- **I am able to use a call light:** Yes

**Hygiene**  
- **Cues:** Observ. Resp.  
- **Shower:** Bath  
- **Every:** every day

**Sleep**  
- **To bed at:** 8:00 pm  
- **At night:** every 2 hours  
- **Daytime naps:** Yes

**Nutrition**  
- **Meals/day:** 5  
- **Snacks:** 1  
- **Finger Foods:** 1  
- **Utensils:** Spoon  
- **Favorited:** Yogurt, Cheese, Crackers

**Toileting**  
- **Independent:** Yes  
- **Every:** every 2 hours

**Behavior/Mood**  
- **Happy**  
- **Sad**  
- **Irritable**  
- **Impatient**  
- **If I'm upset, I get:** Angry  
- **What helps me to calm down is:** Talking, Snacks

**Activity**  
- **Walks independently:** Yes  
- **Needs help:** Walker  
- **I like to:** Operate, Listen to radio, Look at magazines, Have books/magazines read to me  
- **My favorite things:** Cartoon, Music, Movies
Staff Support: Training

• “Dementia-Friendly Hospitals: Care Not Crisis” curriculum by the Alzheimer’s Association
  – Developed by St. Louis Chapter in collaboration with Washington University ADRC
  – Offered to staff on pilot units, volunteers
  – 8 hour class
    • Medical overview
    • Communication
    • Behavior
module 2
medical overview:
Recognition and Management of Hospitalized Patients with Cognitive Impairment

In Partnership with:
Alzheimer’s Association, St. Louis Chapter
Washington University Alzheimer’s Disease Research Center, St. Louis
Staff Support: Volunteer Team

- Recruited 13 volunteers
- Classroom training (8 hours)
- Competency Based Orientation (4 hours, 1:1 with Project Coordinator)
- Interview families and complete careplan
- Provide diversion activities for patients and family/caregiver support
- Created a volunteer communication system
# Partner With Me

## Dementia Project

### Volunteer Sign-up Form

<table>
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<th>Week of:</th>
<th>Sunday</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
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<td>Dorla</td>
<td>Dorla: 10-2 pm</td>
<td>Amanda: 9-11:30</td>
<td>Dorla: AM</td>
<td>Al:</td>
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<td>Julie Shen-</td>
<td>Victoria Yoon-MZ</td>
<td>Divine: 1:30-7 pm</td>
<td>Samantha/MZ 1-5 pm</td>
<td></td>
<td>10-11</td>
<td>Jia Yu: UC all day</td>
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<td>All day</td>
<td>Julie Shen AM-2 pm</td>
<td>Sarah/MZ 5-7</td>
<td>Amanda: 9-11:30</td>
<td>Samantha/MZ 1-5 pm</td>
<td>1:30-3</td>
<td>Julie Shen-</td>
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<td>Amanda: 9-11:30</td>
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<td>Jia Yu: UC after 12</td>
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Questions/Comments: Contact Cecilia Alagappan; Project Coordinator 925-818-5634 or Carla Graf; CNS X3-8791
Results

• 37 patients enrolled during pilot study
  – Average age 85, LOS = 5 days, 20 discharged to SNF
  – Twenty-four women, 40% Caucasian

• Evaluation tools:
  – Interview tool for families
  – Web based ‘Survey Monkey’ for staff feedback
  – Web based journal for volunteer updates and feedback
PWM Evaluation Results
Family Caregivers

• Was the PWM project clearly explained to me: 79%
• Was the individualized care plan helpful: 79%
• How often did the hospital staff refer to care plan: 53%
• Did you view the DVD: 26%
• How much participation improves communication: 63%
• How much did participation improve care: 63%
• Overall, how much did your family member benefit: 63%
• Would you recommend this project: 68%
Family Caregiver Comments

• “Everything was good because my mother has a tendency to wander and I believe it helped her a good amount especially to keep her safe”

• “I definitely feel it helped my mom, and was beneficial to her understanding of what was going on”

• “The staff and doctor’s were very caring and concerned with my grandmother’s health. We got well trained to help care for her; feeding, bathing, etc.”

• “Your project helps a lot of elderly people. Keep up the good work”
Feedback from Nursing Staff (via Survey Monkey)

• Was the PWM project clearly explained to me: 55%
• How often did the hospital staff refer to care plan: 88%
• How much participation improves communication: 75%
• How much did participation improve care: 80%
• Overall, how much do you think the family members benefits: 86%
• Would you recommend this project: 81%
Comments by Nursing Staff

• “I think its great they are doing this. I am sure it means a lot to the families to just have some extra support”

• “Great program, lets continue and get the word out to staff about the project so that this project can be utilized better :)'thanks!”
Volunteer Comments

- Even though the two patients were in somewhat different situations, I was really blessed that I was able to meet them and be able to reach out to their families. What you said is really true, that small things does matter.
- Told the nurse that if she has any troubles interacting or communicating with Mrs MS, to bring a male nurse, which is a preference of Mrs. MS.
- More I’m involved in PWM, the more I think it was just the best thing that could have happen for volunteers like me with medicine in mind for career. Thank you for everything!
- According to daughter-in-law she loves to sing and pray, also likes to listen to gospel music played softly. Is very sensitive to medications, daughter-in-law thinks that this is why she sleeps so much.
Dissemination

- Video/project shared with Alzheimer’s Association
- Video/project shared with other acute care hospitals via San Francisco City and County Dementia Task Force
- Expand to other patient care units
- Explore partnership with local skilled nursing facilities
Shared Resources

- MAC website
  [http://memory.ucsf.edu/caregiving/hospitalization](http://memory.ucsf.edu/caregiving/hospitalization)
- Picker website (webinar)
  [http://alwayssevents-pickerinstitute.org/?p=1402](http://alwayssevents-pickerinstitute.org/?p=1402)
  - Video
  - Patient packet (checklist, visitor schedule)
  - Admission Assessment
  - Care plan
  - Volunteer documents (training, schedule)
Acknowledgements

• Picker Institute
• UCSF Medical Center
• Victoria Kleeman, Director of Volunteer Services at UCSF
• Alzheimers Association
• Our volunteers