DEMENTIA COMMUNICATION SKILLS: AN IOWA MODEL EVIDENCE-BASED PRACTICE (EBP) PROJECT

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PROBLEM: Staff were feeling stressed and uncomfortable when communicating with patients with dementia.

SOLUTION: Dementia communication education program to help lower stress levels.

Problem Identified Staff on the geriatric unit at MedStar Washington Hospital Center were feeling stressed and uncomfortable when communicating with older adult patients with dementia. The question for nursing staff on the geriatric medical/surgical unit was: “what would be the effect of implementing dementia communication education on nursing satisfaction with the identified problem?”
The nurses believed that lowering stress levels would increase staff satisfaction and improve patient outcomes. A dementia communication education program helped achieve this goal.

Dementia patients have specific communication needs. Research by the project team uncovered strategies demonstrating positive effects on communication with dementia patients. The education program included a “Do’s” and “Don’ts” tool for communication with dementia patients. Staff integrated strategies from this tool into daily practice. Also, posters with helpful tips were placed throughout the unit.

The NICHE Geriatric Resource Nurse (GRN) core curriculum is designed for use by those at NICHE sites who train nurses in best practices for hospitalized older adults. GRNs are the foundation of system-wide improvement to achieve positive outcomes for hospitalized older adults. The NICHE program, available to hospitals internationally, offers evidence-based, interdisciplinary approaches to promote improved care for the hospitalized older adult. GRNs can perform assessments similar to the one described in this Solution story to understand the characteristics of the older adults at their hospitals.

Pre- and post-surveys were conducted gauging perceptions on communication with dementia patients. The post-survey data revealed an increase in comfort level and staff satisfaction. Also, there were increases in “would recommend” and “overall rating” of the geriatric medical/surgical floor in HCAHPS scores.