

# Memory Bridge: Supporting Interprofessional Dementia Care

## Introduction

From December 2009 – May 2010 we worked on developing and implementing a dementia workshop involving PSW and RPN students from Durham College. The professors from this college wanted an educational experience for their students that would bring them together in a problem solving framework. Never before had these students been part of an interprofessional classroom experience.

In reality, PSWs and RPNs work very closely together to collaborate and provide quality care, and this teamwork is even more integral when caring for individuals with dementia. This is evident in current best practice educational initiatives such as *U-First!*, *P.I.E.C.E.S.* and *Gentle Persuasive Approaches in Dementia Care (GPA)*. There is a strong emphasis on the need and benefit of team work.

It is expected that within a generation, the numbers of Canadians with dementia will more than double. With that will come increased demands on health care providers to deliver quality person-centered care.



## Actions

- ▶ Initial meeting in person with the instructors from Durham College to gain a better understanding of what they were looking for and the number of students that would be involved. Date, location and length of workshop was established
- ▶ Met with researcher at Ontario Shores to review our plan and to ask questions in regards to consents, confidentiality of results and to whether a Research Ethics Board process (REB) would be necessary
- ▶ Completed a literature search and review of available documents regarding interprofessional care and dementia
- ▶ Developed a pre/post survey and reviewed with ethicist at Ontario Shores
- ▶ Planned and prepared the program using a variety of teaching methods such as didactic, video and group work
- ▶ Implemented the 3-hour workshop in two separate sessions and gathered feedback from a total of 98 participants; this included 69 RPN students and 29 PSW students (a total of 90 surveys were received)
- ▶ Reviewed the feedback and summarized results

## Results

A curriculum was developed entitled Memory Bridge: Supporting Interprofessional Dementia Care.

Based on the pre and post surveys there was an increased confidence level in both the PSW and PRN students. We found more person centered and team oriented language utilized in the responses about their roles in providing dementia care.

### PSW:

- ▶ *"finding out their needs, family, history, life experiences; assisting with care and ADLs"*
- ▶ *"to be part of the team, to focus on the best interest of the client and family"*

### RPN:

- ▶ *"taking into consideration the person as a whole, making sure that if I see anything that needs to change or and changes in the person that they be assessed"*
- ▶ *"assessing the client and collaborate with all other health care providers"*

In the pre survey more RPN students clearly identified that they had a role in care planning. Post survey results showed increased numbers of PSW students indicating that they would have a role in care planning as well. The changes in the Interprofessional Perception Scale (IPS) suggest a better understanding of each others role.

## Challenges

### Literature Availability

We were able to find only three articles that were specific to dementia and interprofessional care. To address this challenge we reviewed literature between 1992 and 2009 and opened up the search criteria to include literature that focused on quality dementia care, interprofessional health care and education, and patient centered health policy.

### Time

The project was more ambitious that we initially realized. To meet the time demands we set goals and established deadlines. Continual open communication was necessary to maintain the continuity and flow of the project.

### Lack of Expertise in Research Methods

When it came to evaluating the results from the survey, we realized our limitations as educators rather than researchers. We thought that by using the IPS that was part of a Canadian Collaborative Mental Health Initiative, we would see clear changes. However it was a tool that was designed for the workplace and by using it with students did not seem to meet the desired results.

We tried to evaluate changes in perception but within our limitations we are not confident that it was accomplished.

## Lessons Learned

Reviewing the literature solidified our beliefs in the importance of interprofessional health care. We also gained even more awareness of how harmful and wasteful the health care system can be.

The process of speaking with the researcher and ethicist enlightened us about quality assurance measures.

From delivering the work shop, we observed discomfort between the students in being asked to work collaboratively. In our opinion, this needs to improved before they finish their respective programs as it is their responsibility to work as a team in the workplace. The curriculum was well received but would need some adjustments if to be given again to allow more time for group collaboration.

Pilot testing the survey tool would have given us a stronger tool to utilize in gathering data.

The challenges we found on working on this project while maintaining our job responsibilities lead us to question the possibility of opportunities that support special projects like this (i.e. through funding, access to research consultation and expertise).

## New Evidence/Best Practices



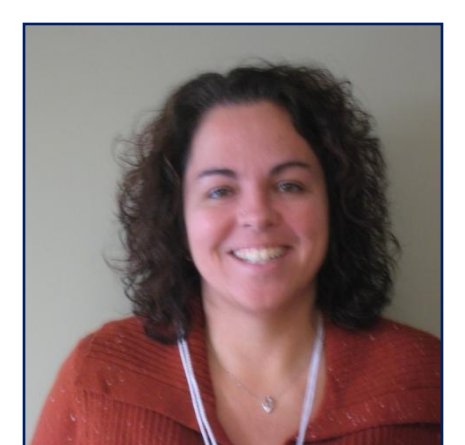
This program provided an opportunity for PSW and PRN students to learn together in the classroom which is supported through the current best practices in interprofessional and dementia care.

## Next Steps

- ▶ We will review curriculum and evaluation based on lessons learned.
- ▶ This workshop can be provided again perhaps including other health disciplines such social service workers.

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