



Dementia Care in Hospital

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Hospitals

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- Hospitals or acute care settings provide **short-term health care for an episode of illness or injury**.
 - Patients are expected to be discharged once they have been treated and their condition is improved.

Dementia and hospitals



- People with dementia have acute health needs
 - Exacerbation of chronic conditions
 - Emergencies and accidents
 - Admissions for tests or procedures
 - May require surgery or medical management
- Longer lengths of stay and other adverse outcomes (Dewing & Dijk, 2016; Moyle, Olorenshaw, Wallis, & Borbasi, 2008)

Several countries have national dementia strategies that include **improving care for people with dementia in hospital** (Department of Health Australia, 2006; English Department of Health, 2009; Scottish Government, 2011; Welsh Assembly Government, 2011)

Objectives



1. To discuss the importance of cognitive function in hospital settings
2. To highlight some of the complexity in understanding cognitive function in hospital
3. To explore innovative strategies to support people with dementia in hospital



Key characteristics of hospitals that affect the experience of people with dementia



1. Focus on acute care needs and safety



- Focus on the issue that brought the person to hospital
 - Care for chronic conditions secondary
- Safety
 - Keeping patients, staff and visitors safe from harm
 - Falls, bed sores, pulling out tubes, violence, etc.

Moyle, Borbasi, Wallis, Olorenshaw, & Gracia, 2011

2. Hospital environments are not suited for people with dementia

- Bright lights, lots of noise
Busy and impersonal; little time for one-on-one interactions
- Intense monitoring but little emphasis on interactions that might be calming or comforting

Need for:

- Improved signage
- better lighting
- minimising clutter
- purposeful activity
- Access to headphones and music and
- personal objects

Dewing & Dijk, 2016; Moyle, Borbasi, Wallis, Olorenshaw, & Gracia, 2011; Moyle, Olorenshaw, Wallis, & Borbasi, 2008

3. Challenges understanding cognitive function

- There are many conditions with cognitive symptoms similar to dementia
 - Delirium and depression
- Individuals can experience more than one of these conditions at a time
 - For example delirium with dementia



Delirium in hospital

An acute condition with a sudden onset, is often reversible

Can be:

- Result of physiological conditions such as dehydration or urinary tract infections
- Response to medical interventions such as anesthesia or particular medications

Like dementia, delirium is more common with advanced age

American Psychiatric Association, 2013; Cole, 2004; Freter & Rockwood, 2004; Saxena & Lawley, 2009

Distinguishing dementia from delirium

- The hallmark symptom of delirium is an acute change in cognition from previous function (American Psychiatric Association, 2013)
- Often the key is understanding the patients' baseline function
 - Notes in medical chart (often limited)
 - Caregivers present to tell staff about baseline function

The nuances of each person's experience with dementia are quite different and take time to understand



What can we do?

*People with dementia,
caregivers, care providers,
policy makers*

People with dementia and caregivers

Make a plan

Tools from Alzheimer's Society

<http://alzheimer.ca/en/Home/Living-with-dementia/Caring-for-someone/Hospital-visits>



Be Ready for an Emergency Department Visit

1. About me
2. Who Knows Me Best
3. My Medications
4. My wishes
5. My Ready-to-Go Bag
6. Plan Ahead for Going Home

Ready-To-Go Bag

Personal items

- Clothes and toiletries
- Slippers

For caregiver

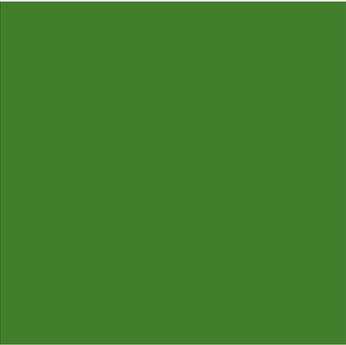
- Snacks
- Reading material, or other things to pass time
- Change for parking

For hospital staff

- Medication list
- Advanced directives
- Family doctor's contact information

Other

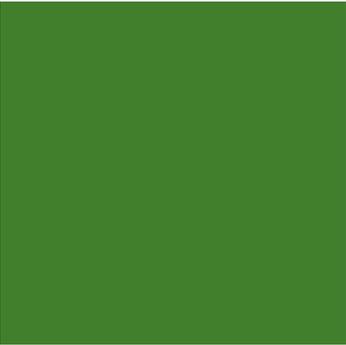
- Name tags for personal items
- Assistive devices



Community care providers

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- Support people with dementia and caregivers with tools such as above
 - Support respite and advocacy while person with dementia is in hospital
 - Caregivers do not necessarily get a break when a person with dementia is in hospital
 - Often an added stress

Porock, Clissett, Harwood, & Gladman, 2015



Healthcare providers in hospital

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- Improve understanding of dementia and delirium,
 - Including how to differentiate
 - Address relational needs of people with dementia,
 - Including communication
 - Recognize importance of caregivers and provide support

Dewing & Dijk, 2016; Moyle, Olorenshaw, Wallis, & Borbasi, 2008

Nurses in hospital

Have a central role in affecting the experience of people with dementia in hospital

Recognize the need for more knowledge and education around caring for people with dementia

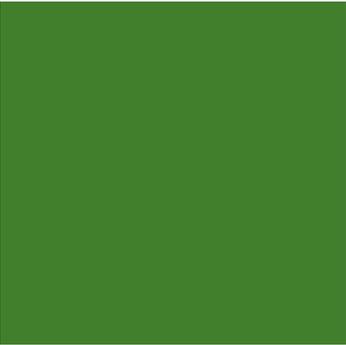
- Including how behavioural communication signals unmet needs in some people with dementia

Dahlke et al., 2018; Dewing & Dijk, 2016; Moyle, Borbasi, Wallis, Olorenshaw, & Gracia, 2011; Porock, Clissett, Harwood, & Gladman, 2015

Important nursing interventions



- Ensuring adequate sleep, nutrition, pain control and mobility
- Monitoring medications for potential complications
- Decreasing sensory stimuli



Policy makers and hospital administrators



Systemic changes

- Address the environmental challenges for people with dementia
- Develop procedures for Involving and supporting caregivers
- Support resource allocation by need (explore ways to provide more staff time for people with dementia)
- Provide routine education for healthcare providers

Gentle Persuasive Approach in hospital

- There are many educational programs for supporting healthcare providers in hospital
- GPA is an established method of enhancing care for people with dementia in long-term residential care through staff education
- Vancouver General Hospital implemented in sub-acute and mental health units

<https://ageinc.ca/>



Final thoughts

Growing numbers of people with dementia, and that is expected to continue

- Need to make acute settings dementia focused

Research exploring experiences of people with dementia in hospital

- How do they define good hospital care?

Clarifying what person-centered care means in hospital

- Currently no consensus on definition or operationalization



Questions

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