

SECTION TWO :

USING eLEARNING TO EDUCATE ALL STAFF

BACKGROUND BITES

- Regardless of their role in an organisation, people come to the residential aged care work environment with preconceived ideas and beliefs about dementia, people with dementia and what their role and limitations are in providing quality dementia care.
- Australian trials of Dementia Dynamics™ eLearning have demonstrated it is a viable format to deliver education for the critical mass of staff needed as a foundation for sustaining person-centred practice.
- Education and training must be meaningful, pertaining to real life situations outside of the learning experience in order to promote fruitful outcomes in practice.
- Adult learners need regular, frequent repetition of information in order to learn it, adopt and sustain change.
- Reflective practice such as thinking about what you are doing and how it might have been done differently, is central to person-centred dementia care.
- The role of education and training has been recognised as a key component of changing practice but education alone will not facilitate the necessary shift in practice to achieve sustainable change.
- RAC facilities need to foster a person-centred culture across all levels of the organisation and educating a critical mass of staff is essential.

UNDERSTANDING THE EDUCATIONAL TOOLS AVAILABLE TO YOU IN THIS TOOLKIT

Given that the daily work routines in many RAC facilities are often restricted by organisational elements and time constraints, the personhood of those in leadership and staff at all levels can be diminished. If your own personhood is diminishing, it is difficult to be person-centred in your everyday work routines and support the personhood of residents in your care.

So why are the educational resources available in this toolkit a good way for an RAC home to provide education to a large number of their staff?

- It demonstrates an organisational commitment to the core messages of person-centred care, just as annual education on manual handling and other skills dictates the importance of these aspects of the workplace to the organisation;
- The flexibility of eLearning as individual or small group learning experiences offers a cost-effective way for RAC homes to meet the different types of learning needs of staff and educates a higher percentage of staff;
- The micro-training in the POP DVD allows the organisation to embed reflective practice to support the translation of knowledge into practice and develop a learning culture.
- The education and evidence-based practice ideas incorporate methods of meeting responsive behaviour that:
 - *develop leadership and staff skills, and,*
 - *confidence to innovate and respond to the residents in their care in order to ensure sustainability in person-centred practice.*

The main aims of the education contained in the eLearning DVD are:

- to improve general knowledge about dementia,
- confirm existing good practice, and
- provide new ways of thinking about and being person-centred in all efforts to meet unmet needs, with a particular focus on those expressed as responsive behaviour.

WHO SHOULD USE THE EDUCATIONAL RESOURCES IN THE TOOLKIT?

The DDT DVD's are designed for anyone working in residential aged care. This includes care staff, hospitality, cleaning staff, maintenance personnel, volunteers and facility managers. For those who have expertise and previous dementia care education, the content is likely to be familiar.

It does not mean that these experienced staff members will not benefit:

- Adults benefit from refresher learning experiences, if only to confirm to them that their practice continues to be evidence-based and current.
- These may be the very people who will be or have the potential to be champions and role models. It would be important for them to complete the eLearning DVD to support other, less experienced staff in both completing the education and using the knowledge in practice.

Support staff, such as those in hospitality or domestic roles, often do not get the opportunity to participate in dementia care education as both organisations and the support staff themselves do not see the relevance to their role. However, given that support staff are integral to everyday living in an RAC, a better understanding of how they do contribute to the lives of people with dementia can be a revelation to them and others.

The education contained in this toolkit:

- Draws on the latest evidence about best practice dementia care;
- Uses video scenarios, interactive learning activities and case studies to frame and support the learning experience;
- Is presented in an accessible format that can be worked through at a pace that suits each individual.

THE BENEFITS OF eLEARNING AND POP EDUCATIONAL RESOURCES

A major focus of the education is to enable staff to be better prepared to meet unmet need expressed as responsive behaviour. The benefits of this are significant to residents and staff in that:

- Reducing responsive behaviour improves the quality of life for the person with dementia and makes the social environment in residential aged care less stressful for other residents.
- Changing the way we understand and react to responsive behaviour will also significantly improve the workload and workplace environment for people caring for the person with dementia.

In supporting the implementation of this education and the principles it puts forward, leaders and potential leaders – champions for person-centred dementia care – can refresh existing understanding of dementia care and develop new skills in teamwork and supporting work colleagues.

Organisations will gain benefits by utilising the toolkit to further develop leadership capacity in the organisation and assist in developing a learning culture.

Micro-training (as contained in the Personalising Our Practice DVD) has been identified as a framework based on the concept that learning is an active process and that new knowledge is best acquired in a working and learning environment.

Ensuring staff are using current evidence-based practice is best achieved through a range of educational activities. Quality Managers we have worked with previously have found the resources and structure of the education a most valuable support in capturing activity and tracking the outcomes in a continual process to support their evidence base for accreditation. All four standards, although covering different dimensions of the organisation, have common first and third outcomes; that of demonstrated continuous improvement, and education and staff development.

In addition, there are several other obvious accreditation outcomes which documented use of the toolkit resources would support:

2.13 Behavioural Management: Expected Outcome - The needs of residents with challenging behaviours are managed effectively;

3.4 Emotional support: Each resident receives support in adjusting to life in the new environment and on an ongoing basis;

3.5 Independence: Residents are assisted to achieve maximum independence, maintain friendships and participate in the life of the community within and outside the residential care service, and

4.1 Living Environment: Management of the residential care service is actively working to provide a safe and comfortable environment consistent with residents' care needs.

WHAT WILL STAFF LEARN AND HOW WILL THEY LEARN IT?

The eLearning DVD provides an interactive process of learning that, while approximately 6 hours of study, can be spread over several weeks.

It involves reflective problem solving and the application of learning to specific cases. This is supported by regular exposure to brief, focussed micro-training messages from the Personalising Our Practice (POP) DVD.

The POP DVD maximises the likelihood of reinforcing the new understanding, perception and knowledge gained and provides the basis for encouraging staff to think about what they learn in the context of everyday practice.

CONTENTS OF THE eLEARNING DVD

Box 1 presents an overview of the contents of the eLearning DVD. The six sections provide education developed to enhance staff understanding of dementia and being person-centred in care provision, with a particular focus on meeting unmet needs expressed in responsive behaviour. The activities aim to deepen knowledge and provide practice opportunities in the workplace. The activities are a variety of:

- Direct learning tasks incorporating video clips, short case studies or external web links to information that require the learner to listen, read and respond briefly to specific questions;
- Tasks that require the learner to study video clips and/or readings and reflect on the issues raised within the context of their own work routines, environment or practice applications;
- Activities that require the learner to apply specific learnings to their own care practices and residents in their care.

Throughout the DVD, 'Marion' provides a first-hand account of what it feels like to enter residential aged care and live with dementia on a daily basis. The Learning Actions and case studies will encourage staff to reflect on their workplace and how they might play a role in improving the environment at their facility and in the lives of residents with dementia for whom they provide care.

BOX 1: CONTENT OUTLINE OF DEMENTIA DYNAMICS™ TOOLKIT eLEARNING DVD

MODULE & TOPIC	ACTIVITIES
Module 1: Introduction to the eLearning DVD The Person-centred approach to care Defining Responsive Behaviour	Exploring resources Learning Learning
Module 2: Who is the Person with dementia? The VIPS Model of Person-centred care The Enriched Model of the Person Brain Impairment Personality Physical Health Life Story Physical Environment Social Environment	Learning Learning Learning Reflective Learning; Reflective Reflective; Practice Learning; Practice Reflective; Learning
Module 3: Achieving Wellbeing Wellbeing and the 5 Essential Needs Introducing the DAPIR problem solving cycle Comfort Attachment Inclusion Identity Occupation Signs of wellbeing and ill being	Learning; Reflective Learning Reflective; Learning Learning; Reflective; Practice Learning; Reflective; Practice Learning; Reflective; Practice Learning; Reflective; Practice Learning; Reflective
Module 4: Positive Physical and Social Environments Living Experiences Private spaces: Bedroom and Bathroom In the Dining Room Public Spaces: Inside and Outside Friends, family and Community End of Life	Reflective Learning; Reflective; Practice Learning; Reflective; Practice Learning; Reflective; Practice Reflective; Learning Reflective; Learning
Module 5: Tools to Tackle Responsive Behaviour The 5 Cs Concentrate on the Person, Communicate, Context, Consistency & Changes	Learning Learning, Reflective; Practice
Module 6: Putting it all Together Learning from Marion and Tom	Learning, Reflective; Practice

CONTENTS OF PERSONALISING OUR PRACTICE DVD

The second educational resource is the POP DVD which aims to provide staff with repeated, regular contact with the core ideas from the eLearning DVD.

It enhances the way staff can approach personalising practice and supports the implementation of best practice principles through organisational routines such as handover, 'Resident of the Day' and 'care planning'.

It provides 20 short video messages emphasising core messages of best practice in dementia care covered in the education.

Each message is followed by a question for a group of staff to answer in discussion for about another couple of minutes – these questions are listed in Box 2 against the 20 message topics.

BOX 2: PERSONALISING OUR PRACTICE (POP) MESSAGE TOPICS

TOPIC MESSAGE	QUESTION / STATEMENT FOR REFLECTION
Comfort	Take a moment now to discuss among yourselves what you as a team can do today to satisfy the need for comfort in the people you care for.
Identity	Take a moment now to discuss ways you as a team can sustain the identity of the people on your care during your shift today.
Inclusion	Take a moment now to discuss how you can do things differently today so that people in your care are included at every opportunity as you go about your work today.
Attachment	<ol style="list-style-type: none"> 1. Take a moment now to consider one or two people in your care who are grieving over lost attachments that have been important to them. 2. Problem solve together for a moment about how you as a team can make a difference to their feelings today by focussing on their need to be connected to others and feel loved.
Occupation	Take a moment now to talk among yourselves about the ways you can offer opportunities for engagement in something meaningful for one or two of the people in your care today. Remember to keep it simple and achievable.
Accept don't label	Take a moment now to identify as a group what language you might try to avoid today in your speech to the people in your care, and what you could say instead.
Avoid talking like a parent	Take a moment now to talk among yourselves about some statements you might try to avoid today in your speech to the people in your care, and what you could say instead.
Give care when it is asked for	Take a moment now to talk together about the people in your care who frequently require attention and discuss ways you could provide regular and brief attention.
Validate	Take a moment now about opportunities today for you to be validating in your conversations with the people in your care.
Be genuine	Take a moment now to discuss this among your team. Which people in your care have required such an approach recently and how could you try the best practice person centred approach to this situation?
Empower for success	Discuss now how you can improve the way you empower the people you care for today during this shift.
Get to know someone today	Take a moment now to talk together about sources of information about your residents and times in your caring when knowing something about a person has made a positive difference to the care you could offer.
Have fun	Share with each other now some of the more enjoyable moments that have happened recently in your workplace.
Work together	Have a discussion now about the ways each of you can work cooperatively with the people you care for. You might briefly problem solve about a difficult situation you have at the moment and how it can be handled differently to achieve a best practice outcome.
Know what is on the lifestyle program	Go through the lifestyle program for your facility or area for this week so that all of you know what is on offer and can remind and prepare people to participate. How can you cooperate more fully with the lifestyle staff during this shift and work together to make it a more enjoyable experience for the people you care for?
Be warm	Take a moment now to discuss where you have seen warmth given to the people you care for recently and how each person could provide warmth in the way they go about their work today on this shift.
Create a home	<ol style="list-style-type: none"> i. Which aspects of your physical environment can you do something about and which can't you change? ii. What can you do today and what can you do over the next month or so to improve the experience of people in your care by improving their environment? Think of all the senses when you look around your workplace.
Work at a relaxed pace	As a group discuss now how you have seen signs of confusion or upset from someone in your care recently and how that can be turned round by working at a relaxed pace.
Think about the way you come across	Take a moment now to discuss some of the issues your team has in the way you come across to the people in your care. What are three priorities you can focus on today in this shift?
Have respect	What do you know about a person in your care that will help you to remember that they are worthy of respect? Each person tell the others one thing about one of the people in your care that helps you to treat them with respect.

WHY IS MICRO-TRAINING AN IMPORTANT PART OF THE EDUCATION PROCESS?

Micro-training has been very successful in other industries and contexts but it is relatively new to aged care. It is a concept that, over time, has aimed to give structure to informal blended learning. Learning is a social process and people learn best when they are actively engaged in explaining their ideas to one another, discussing their disagreements, and co-operating in the solution of complex issues (Colón-Emeric, Pinheiro, Anderson et al, 2014).

The micro-training in the POP DVD is a very practical tool that complements the Dementia Dynamics™ eLearning DVD.

- The training is on-the-job and may be presented at the beginning of, or anytime in the work day;
- Each message is focused on a single issue or concept that has practical applications that can be implemented immediately following presentation in the context of care delivery.
- The immediate implementation and immediate feedback to the learner in the real-world of their working-day, maximises the likelihood of sustained take-up of new care practices.

The flexibility of the tool means that it can be used as appropriate to the organisational structures. In RAC facilities where micro-training has been trialed, staff identified a broad range of options for micro-training to be used to support and sustain good practice. These include:

- Providing a framework for collaboration and sharing of information about particular residents;
- Embedding in the annual education calendar, providing supporting evidence for outcomes in the accreditation process;
- As points for consideration during initial 21 day assessments for collecting more individualised information about the person;
- Use opportunistically to identify practice issues in specific situations and support staff to personalise or improve their practice;
- Being considered in individual resident's care plan review.
- To guide policy development and quality improvement plans to support and enhance person-centered dementia care practices.

The core messages are linked to the 44 outcomes in the four accreditation standards and it has been shown to be especially beneficial for some facilities, creating a forum for refocusing priorities of care back to the individual residents.

RECOMMENDATIONS FOR USING EDUCATIONAL RESOURCES

There are many ways to introduce the educational resources in the Dementia Dynamics™ Toolkit into your RAC facility. The following recommendations come out of previous trials of eLearning resources introduced into RAC homes in Australia.

Keep in mind that different approaches will work for your facility depending on the staffing profile, the physical resources to accommodate technology, level of leadership development, and need for comprehensive dementia education to underpin evidence-based person-centred dementia care practice.

THINGS TO DO	WHY
If less than 60% of staff have completed dementia care education in the past 12 months we suggest a program of eLearning for all staff.	It is important to have all staff "on the same page" – trials have demonstrated that those educating 60% of staff or more had better resident outcomes, sustained over time.
<p>If the majority of your staff have completed dementia care education <i>recently</i>:</p> <ul style="list-style-type: none"> • review the eLearning sections that will complement and reinforce previous learning; • utilise the components that further education, particularly in relation to responsive behaviour. 	<p>Research shows that:</p> <ul style="list-style-type: none"> • Adults need regular, frequent repetition of information in order to learn it, adopt and sustain change. • Sustainable person-centred dementia care is more likely when refresher education opportunities are provided.
Identify a group of existing and potential leaders & champions that will be the first to complete the eLearning.	Leaders and champions will be essential as role models and supporters of staff in both participating in education and using the knowledge in everyday practice.
Start an information campaign to tell staff about the education being offered.	<p>You want to strike a balance between overwhelming people with information that might not pertain to them and making sure everything is communicated to the right people.</p> <p>They are more likely to participate if they feel they have made an informed decision.</p>
Make copies of the eLearning disk to loan or provide to staff so they can upload and complete the eLearning disk in their own time at home.	<p>Blank disks are cheap so minimal investment is required to provide those wanting to learn at home with a disk.</p> <p>Your RAC can have a loan system or copy disks on demand or as part of the program for individual staff.</p>
If your organisation has learning spaces for staff, upload the eLearning and provide them with opportunities to complete sections of the education at work either in their own time or as part of your education program.	<p>In addition to providing opportunities for them to improve their skills at work, this demonstrates to staff that the education is important and their participation important to the organisation.</p> <p>It also enables leaders and champions to provide direct support.</p>
Identify timelines for completion (e.g. three or six months from commencement) and monitor progress in a supportive manner through existing structures (e.g. line supervisors, team leaders, champion and support team).	Putting completion times in place emphasises the need to do the learning and allows the organisation to set strategic goals and objectives in relation to the translation of knowledge into practice.

THINGS TO DO	WHY
Develop a program of in-service education sessions in small groups over a time period that fits with organisational needs using the Dementia Dynamics DVD.	<p>Staff at all levels will have different learning styles and learning needs. Offering a small-group in-service for completing education provides opportunities for:</p> <ul style="list-style-type: none"> • those who are not confident with technology • a familiar learning context • give leaders/champions an additional forum for workplace reflection on practice • may encourage the use of eLearning when they can see that it is not complex
When offering small group sessions, make the times convenient, allowing staff on all shifts to take advantage of small group learning.	Accessibility to the different delivery methods will make the use of educational resources more inclusive across the workplace.
Provide incentives and/or recognition for participating and completing the eLearning.	To demonstrate the importance of dementia care education to all staff, RAC facilities have found even small incentives can increase uptake. Those who complete the eLearning will be able to download a certificate of completion from our website, but you could recognise staff completing in a monthly or quarterly 'ceremony of recognition', a bi-annual morning tea or other special event.
As staff begin to complete the eLearning, commence the introduction of the POP DVD to support the learning process and the use of knowledge in practice.	Evidence from use in Australian residential aged care facilities to date shows that better sustainable practice outcomes are achieved if eLearning is complemented with the use of the micro-training provided in the POP DVD.
Even staff who have not completed the eLearning DVD can participate in POP but DO NOT rely on micro-training as the only source of education to reach the targeted critical mass required.	<p>POP is valued by staff because:</p> <ul style="list-style-type: none"> • it is short, • it can be used as part of existing routines (e.g. handover) or opportunistically (as required), • it provides a reminder of key principles and, • affords an opportunity to relate the knowledge to particular residents and to discuss with others. <p>Evaluation from trials shows that staff participating in POP only showed lower levels of improved knowledge of appropriate staff-based practices than staff completing eLearning only.</p>
Build eLearning into your organisations new staff induction program.	Ongoing use of eLearning as part of induction for any new staff members has proved a successful strategy.

TEN TIPS FOR “DRIVING” THE DEMENTIA DYNAMICS™ DVDS: INDIVIDUAL USERS

1. THE BASICS

The Dementia Dynamics™ Toolkit is comprised of an introduction and six learning modules and includes a range of videos, learning actions, images and resources. You are encouraged to complete the modules in order from 1 to 6 but you can move around within the program at any time.

2. GETTING TECHNICAL

The Dementia Dynamics eLearning DVD is compatible with PC and Mac computers. Multiple copies can be made and participants can complete the program in the workplace or elsewhere but all modules must be completed on the same computer. The DVD requires only basic computer skills and is designed as an accessible and easily navigable learning experience.

DDT eLearning DVD

Installation Instructions for Windows and Mac

1. Before installing, please ensure your computer meets the Standard System Requirements (see below) and if relevant, that you have permission to install the software.
2. Insert the DVD into your DVD drive.
3. Click on the eLearning DVD on your desktop.
4. Click on the PDF or text file named Installation Guide and follow the instructions to install the eLearning program.

3. REGISTRATION

Before commencing the learning program, you will be instructed to register your details and each time you return to the program, you will be required to login as a Returning User.

4. FINDING YOUR WAY AROUND THE DVD

The **Home** and **Modules** icons in the **top left menu** indicate the two main ways to navigate through the program.

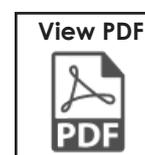
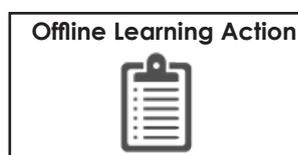
Simply click on the **Next** or **Back** tabs at the bottom right of the screen to move through each Module. You can return **Home** or access the **Modules** at any point in the program.



You can also track your progress through the program via the **View Progress** tab on the bottom right of the screen. **View Progress** allows you to identify the content within the module including the learning actions (indicated by icons) in addition to monitoring your progress.

5. WHAT TO DO AND WHEN TO DO IT

The Dementia Dynamics™ Toolkit is designed to be completed in order from Module 1 to Module 6 but you can move around within the modules and the program at any time. There are icons within each module that indicate which actions you need to take.



If you need assistance at any time, select the **Help** tab at the bottom of the screen.

6. LEARNING ACTIONS – ONLINE AND OFFLINE

There are a variety of Learning Actions throughout this program and completing these will assist in consolidating your learning. You will notice above that there are different icons to represent the different ways to complete these Learning Actions:

- Some Learning Actions are interactive and need to be completed while you are in the DVD eLearning program, indicated by the icon shown above “Online Learning Action”.
- For other Learning Actions, you are able to write down your answers in your workbook or worksheets when you are not active in the DVD eLearning program, indicated by the icon above under the title ‘Offline Learning Action’.

A Dementia Dynamics™ Workbook or individual Workbook sheets can be downloaded at any point in the program for recording your answers to Learning Actions and for general note taking. The Workbook also includes key graphics and models encountered throughout the program.

7. HOW LONG WILL IT TAKE?

The modules vary in length. The shorter modules will take up to 15 minutes to complete and the longer modules approximately 60 minutes but this will depend on individual learning styles and preferences.

8. RESOURCES

All printable resources are provided in a PDF format and located via the **Resources** tab on the bottom right of each screen.

If the computer you are using does not have Adobe Reader Software, go to the **Help** tab to locate the link to download the program.

The **Acknowledgements** tab on the bottom right of every screen gives source details for the images, quotations and other content that appears in the program.

Additional resources that complement the Dementia Dynamics™ DVD content, including recent publications, are available on our dedicated website:

www.dementiadynamics.com.au

9. TROUBLESHOOTING

If you are unclear about how to proceed at any point or encounter other difficulties during the program, go to the Help tab on the bottom right of each screen.

You can also direct any technical or other enquiries to our website:

www.dementiadynamics.com.au

10. WHAT DO I GET WHEN I COMPLETE THE DEMENTIA DYNAMICS DVD?

Certificate of Completion

Simply click on the Course Complete link to download a personalised Certificate of Completion from the Dementia Dynamics™ website.

If you are not connected to the internet, return to the **Completing the Course** section at the start of the DVD program for instructions on how to obtain your Certificate of Completion.

For Registered Nurses, undertaking all the Learning Actions will confirm that the program has been completed and qualify you for 6 Continuing Nurse Education points.

Whether your RAC facility has a dedicated educator or education portfolio, you can use the eLearning DVD to facilitate a series of in-service sessions to contribute to educating a critical mass of staff. All you need is a space that will enable you to run the DVD for a group of staff members.

As a small group facilitator, you can tailor discussions and learning outcomes to specific demographics (i.e. a care staff cohort) or small multi-disciplinary groups. All components of the DVD, including the module aims, video scenarios, case studies and learning actions, can be utilized in different ways to explore and expand on issues relating to the planning and delivery of person-centred, best practice dementia care.

We are not trying to tell you 'how to teach' – rather, the following guidelines have been developed to assist you in using this educational DVD in different ways for small group work. Once again, we ask you to keep in mind that different approaches will work for your facility depending on staff demographics, the philosophy of the organisation, leadership capacity and physical resources available.

As with all components of the Dementia Dynamics™ Toolkit, you can use the DVD content in a way that best suits the learning environment and staff demographics in your facility. If you find alternative ways to use the DVD in training staff please do share by contributing to the blog on the Dementia Dynamics website.

FIRST UP FOR FACILITATORS

Small group facilitators are advised to complete the Dementia Dynamics™ eLearning DVD and familiarise themselves with the "Ten Tips" outlined in this section of the manual.

It is important that any small group session start by viewing the Introduction and Module 1. The DVD is designed to be worked through sequentially, but depending on the makeup of your group, you may choose to move around within the program (for example, Registered Nurses may wish to bypass basic information about dementia in Module 2).

Modules can also be broken down, with information and learning actions divided into smaller sections for shorter learning sessions or discussions focussed on specific issues.

Utilise Module Aims

The learning aims at the start of each module provide a useful framework for structuring small group learning sessions. Revisiting the aims at the conclusion of your small group sessions will consolidate learning and ensure that all participants have understood the key concepts and content.

Make Marion Matter

The video scenarios featuring 'Marion' provide a powerful first person perspective. These scenarios are designed to illustrate the experience of living with dementia in a residential aged care setting and explore the consequences of different approaches to dementia care. Many of these videos can be used as 'stand-alone' scenarios to discuss issues in more depth in the small group setting.

EXAMPLE A

Show your small group the 'Feeling Excluded' video in Module 3 and ask the group to consider the following questions:

- What do you think is wrong in this scenario?
- How do you think Marion feels during this interaction?
- What changes could the two staff members make that would ensure Marion felt included?
- How might being person-centred have produced a different outcome here?

Case Studies and Care Outcomes

'Marion' and 'Tom' and the details of their respective life stories are featured throughout this program. The impact of their developing friendship provides a complex case study in Module 6. The Learning Actions in Module 3 featuring 'Aunty Ivy', 'Mavis' and 'Cheerful Charlie' also provide useful case studies that deal with dementia-related symptoms, including responsive behaviour.

EXAMPLE B

With your small group, review the scenario featuring 'Mavis' in Module 3.

As the Learning Action requires, ask your small group participants to identify all the indicators of ill-being in this scenario.

Ask your participants to think about the 'invisible' (or internal) and 'visible' (or external) triggers that might be responsible for causing these signs of ill-being.

Get your group to consider the idea of unmet needs in this scenario and discuss which of these might be the most significant in restoring Mavis' sense of well-being.

Now select a resident from your facility who displays signs of ill-being and ask participants to discuss the potential triggers and unmet needs that may be relevant for this resident.

A Picture Tells a Thousand Words

A variety of images are used throughout this program, and as with the video scenarios, these images can be used to generate small group discussions and expand on key concepts and issues raised in each module.

EXAMPLE C

Following the completion of Module 4, show your small group the image of the bedroom in 'Creating a Connection' and encourage a discussion of the following issues:

- Would this room appeal to you and if not, why?
- If this room was allocated to an individual on their first day in residential care, how might it make them feel?
- How could you improve this room for a resident living in an aged care facility?
- If a resident with dementia moved into this room, what other specific changes would you make to the environment?

Learning Actions Lead the Way

The online and offline Learning Actions in the Dementia Dynamics™ eLearning DVD are designed as engaging and stimulating activities that consolidate learning throughout the program. They can be used in a small group setting:

- where participants in the group could be asked to respond to individual components of a multi-part Learning Action.
- as the basis for small group discussions – the Offline Activities are particularly appropriate in this context.

EXAMPLE D

In Module 3, locate the Learning Action 'Making Marion Comfortable'.

Ask the small group to think back over all Marion's stated preferences and the things she has described that make her feel good about herself.

Encourage the group participants to make suggestions about how they might ensure all her comfort needs are met in the residential care setting.

Now select a resident from your facility and discuss the resident's profile with your group. Ask them to identify the resident's specific needs and preferences.

Now ask the group to suggest all the ways in which this resident's comfort needs can be met.

All of these examples can be used as the basis for small group discussions to explore a range of issues covered in the program, from recognising signs of ill-being and well-being and identifying triggers for responsive behaviour to the impact of the social and physical environment on the person with dementia.

PROVIDING A LEARNING EXPERIENCE USING A NEEDS-BASED CYCLE

In addition to the suggested guidelines and examples outlined above, small group sessions could also be based around implementing the DAPIR tool in relation to resident issues in your facility.

Using the DAPIR as a practice learning experience

Select a resident in your facility with a specific responsive behaviour.

Use the DAPIR, to assess a resident's behaviour.

- What is really going on?
- What are all the possible triggers?
- Think about reactions and responses.
- What can you learn about the situation?
- Would it help to involve other staff or family as you assess the behavioural symptom?

Think about possible interventions.

- What IS a reasonable behavioural goal?
- How could you change the triggers?
- What about the reactions and responses to the behaviour?

Write down everything that you "know" about the resident, just from experience. Look at the responses to DAPIR, examine the behaviour, and think about "what else" there is to consider. Use that as an illustration -- good or bad!

Be prepared to discuss the case(s) that you explored and offer personal examples of how the assessment questions can be used.

At the same time, listen carefully to the STAFF'S PERCEPTION of what is going on (e.g. what they think about the resident, the resident's behaviour, their own behaviour, etc.). Their interpretation of the person and the situation may give you some important clues about ATTITUDES OR BELIEFS that may interfere with effective care management.

CREATE YOUR OWN LEADERSHIP LEARNING EXPERIENCE FROM FACILITATING A NEEDS-BASED CYCLE

Before using the DAPIR, first explore the needs of a selected resident. Get some butcher's paper or just A4 sheets and get the small group participants to write down their perceptions of what is going on.

Take this back to the group of leaders and champions in your facility who are supporting staff in learning and putting knowledge into practice, or your 'dementia care working group' if it has been established.

You and your colleagues can discuss the participants' perceptions and where they might need guidance and support.

Some questions you may wish to consider:

- What will help them pause and look "beyond the responsive behaviour?"
- What kind of reminders can you place in their environment?
- What kind of reinforcement can you offer them?

INTRODUCING 'PERSONALISING OUR PRACTICE' IN YOUR FACILITY

This form of education needs minimal leadership – but someone has to take responsibility to implement it. For many organisations, it fits well as part of the quality improvement or education program so staff with those portfolios can readily action this as part of their role. Champions can facilitate sessions or delegate to team leaders and others as is most convenient.

Leading the very short session requires no training or preparation other than to remember to open the computer program, click the button on the message you want to use on that occasion and keep the discussion following the message to a designated time limit of 2 to 3 minutes.

To introduce POP:

- A.** Consider where it best fits within existing structures with minimal disruption and maximum impact and coverage. Most facilities find that handover/shift changes are the best time as this is when small groups of staff are already communicating.
- B.** The flexibility of the tool means that it can be used as appropriate to the organisational structures. In RACs where it has been trialed, staff identified a broad range of options for POP to be used to support and sustain good practice. These include:
 - Providing a framework for collaboration and sharing of information about particular residents;
 - Embedding in the annual education calendar, providing supporting evidence for outcomes in the accreditation process;
 - As points for consideration during initial 21 day assessments for collecting more individualised information about the person;
 - Use opportunistically to identify practice issues in specific situations and support staff to personalise or improve their practice;
 - Being considered in individual resident's care plan review.
 - To guide policy development and quality improvement plans to support and enhance person centered dementia care practices.

- C.** Start POP within 6 weeks of commencing eLearning. Although many staff may not have completed the eLearning DVD at this point, the micro-training will provide needed repetition for learning and a framework in which they can put their knowledge into practice. The short messages can also stimulate others into commencing eLearning.
- D.** Be sure to provide advice to team leaders and others in key positions on how to use POP opportunistically to support practice change.
- E.** If there are areas that do not have a computer in their immediate work area (i.e. If you work in environmental or food services, or maintenance) you can consider making an audio version for staff in those areas so they too can use it to suit their needs.

HOW TO USE THE POP DVD

Installation Instructions for Windows and Mac

1. **Insert the POP DVD** into your DVD drive.
2. **Click on the POP DVD** on your desktop.
3. **Double-click the setup.exe** from the DVD to install the software.
4. **Follow the Installation Wizard** to complete the installation.
5. The DDT Personalising Our Practice Micro Training **shortcut icon will appear on your desktop.**
6. **Double-click the icon** to run the application.

Autoplay:

Each day at handover open it up and the next piece of video will play if you click **AUTOPLAY.**

Choose own message:

If you prefer to have more control over the sequence of messages, you can select your own topic from the menu by clicking **CHOOSE.**

KEY MESSAGES

- ★ To sustain person-centred dementia care at least 60% of all staff should have dementia care education. This should be updated as with other mandatory training schedules.
- ★ eLearning is a viable way to provide dementia care education to the critical mass of staff needed to sustain person-centred dementia care.
- ★ Offer staff the option of an individual learning experience or small group in-service sessions to complete their learning experience.
- ★ The use of micro-training, as contained in the Personalising Our Practice DVD, will complement recent dementia care education (e.g. Dementia Dynamics eLearning) and improves practice outcomes.
- ★ Staff must be able to translate the information into the context in which the responsive behaviour arises and within the policies and procedures of the organisation.
- ★ People learn best when they are actively engaged in explaining their ideas to one another, discussing their disagreements, and co-operating in the solution of complex issues.

