

# SECTION THREE: CREATING A LEARNING CULTURE

## BACKGROUND BITES

- Person centred care is not a “model of care” but rather, it is the way in which care is provided through respectful interaction by staff who value the person first, knows him or her as an individual, and understands their role as a person of significant influence in the life of the person with dementia.
- Person-centred dementia care requires learning about individuals whose needs change continuously so the development of a learning culture is crucial to sustainable practice. This requires staff to be sensitive, responsive and flexible.
- For an organisation to support staff to be person-centred and to foster a learning culture, leadership should exist across the different levels of the organisation.
- Providing dementia care education and supporting the use of that knowledge in everyday work routines may help to reduce work-related stress and physical assault of staff.
- A learning culture incorporates unlearning long held beliefs, attitudes and outdated or inappropriate practices.
- Fundamental to the learning culture is understanding that each person with dementia can achieve a high quality of life and that staff are instrumental in supporting or undermining this occurring.
- Creating a learning culture is an ongoing process that incorporates education and training, workplace observation, reflective practice, validation and constructive feedback as opportunities for learning.

## WHY IS A LEARNING CULTURE IMPORTANT?

To maintain person-centred care, an active learning culture is required. An active learning culture requires good education and training in an organisational context that understands the importance of learning from daily experiences.

All staff members, regardless of their position, should feel that they are an important part of the team, are important to the people in their care, and feel good about their work.

Providing all staff with opportunities to learn more about residents with dementia and their role in the everyday lives of residents is essential to person-centred dementia care.

- > Reflective practice is central to person-centred dementia care.
- > We do not actually learn from experience – we learn from processing the experience.
- > Person-centred care requires sensitivity, responsiveness and flexibility.

For staff to respond to a residents' need at the appropriate moment, they need to develop the ability to 'reflect and action' (Loveday, 2013). The educational resources contained in the Dementia Dynamics™ Toolkit address the three key domains of learning:

<b>Knowledge</b>	Staff will have an understanding of dementia and how residents with dementia in long term care experience the physical and social environment.
<b>Skill</b>	Staff will be able to demonstrate being person-centred in meeting the needs of people with dementia in their care and actions that support personhood.
<b>Attitude</b>	Staff will be able to demonstrate they value residents through the language they use and appreciation of the impact of responsive behaviour on the person with dementia.

## LEADERSHIP ROLES SUPPORTING PERSON-CENTRED DEMENTIA CARE

Leadership in dementia care comes in many forms – it is not just the domain of senior management or staff in existing leadership positions. Leadership is an interactive process that occurs throughout all levels of the organisation.

In this manual we refer to this leadership as champions – terminology that has been used widely but is not prescriptive. It refers to a tested model of leadership practice that has been successful in facilitating and supporting person-centred dementia care.

In the Dementia Dynamics™ eLearning DVD, staff will learn that person-centred care has four fundamental elements (V.I.P.S.). Dawn Brooker (2007) linked those elements to the leadership required across the organisation.

PERSON-CENTRED CARE ELEMENT	LEADERSHIP LEVEL
<b>V = Valuing People</b>	Requires leadership from those responsible for managing the organisation at the senior level.
<b>I – Individualised Care</b>	Requires leadership from those responsible for setting care standards and procedures within the facility.
<b>P – Personal Perspectives</b>	These two elements require leadership from those responsible for the day to day management and hands-on provision of care.
<del>S – Supportive Social Environment</del>	

Senior management need to select Champions that have the capacity to create and utilise a team approach to providing a learning culture and implementing changes in practice.

It is appropriate to consider identifying champions at each level who can provide this whole of organisation leadership to support person-centred dementia care.

## SUPPORTING PERSON-CENTRED DEMENTIA CARE IS NOT THE ROLE OF A SINGLE PERSON IN THE ORGANISATION.

Differences in size and staff profiles across organisations will determine the number of champions needed to provide strong leadership but even very small RAC facilities should consider three lead champions an absolute minimum (one from each leadership level in the table above).

**It is important for these lead champions to work together to develop a team of key individuals across the facility, including representatives from hospitality and support services, who can also:**

- **act as champions and support staff in learning, and**
- **mentor staff to use what they learn in everyday practice.**

This wider, multidisciplinary group of champions have been used successfully as a special interest group, working group or reference group who are able to develop and support good practice in dementia care to:

- Bring a range of perspectives to discussions in which they share ideas and observations that can inform the development of good practice in all areas of the facility.
- Broaden the scope of needs-based problem-solving and the use of non-pharmacological approaches by identifying how the use of tools such as the DAPIR can be implemented and supported as standard practice.
- Developing and actioning strategies and goals which prioritise developing person-centred practice through building on strengths and developing areas of weakness as identified through organisational assessment, including the physical environment.

### **SELECTING AND DEVELOPING CHAMPIONS**

The key characteristics to consider in selecting lead champions are:

- Active support from and inclusive of senior management;
- An understanding of / existing knowledge relevant to person-centred dementia care;
- Experience with caring for people with dementia;
- Good communication skills;
- Commitment to person-centred principles;
- Demonstrated leadership skills;
- Good team worker who can delegate responsibilities;
- Essential links to other groups/key staff members to support change

The key characteristics to consider in selecting organisation-wide champions or potential lead champions for the future are:

- Respect of co-workers
- Commitment to person-centred principles
- Good team worker
- Can be a role model for good practice
- Potential to develop leadership skills

***It is important that champions are the first ones to complete the eLearning so that they can support their colleagues to use the knowledge in everyday practice.***

Some organisations will already have champion programs; others will have more traditional leadership roles in place. In developing champions in your organisation, ensure that they are provided opportunities to get further education and support over time.

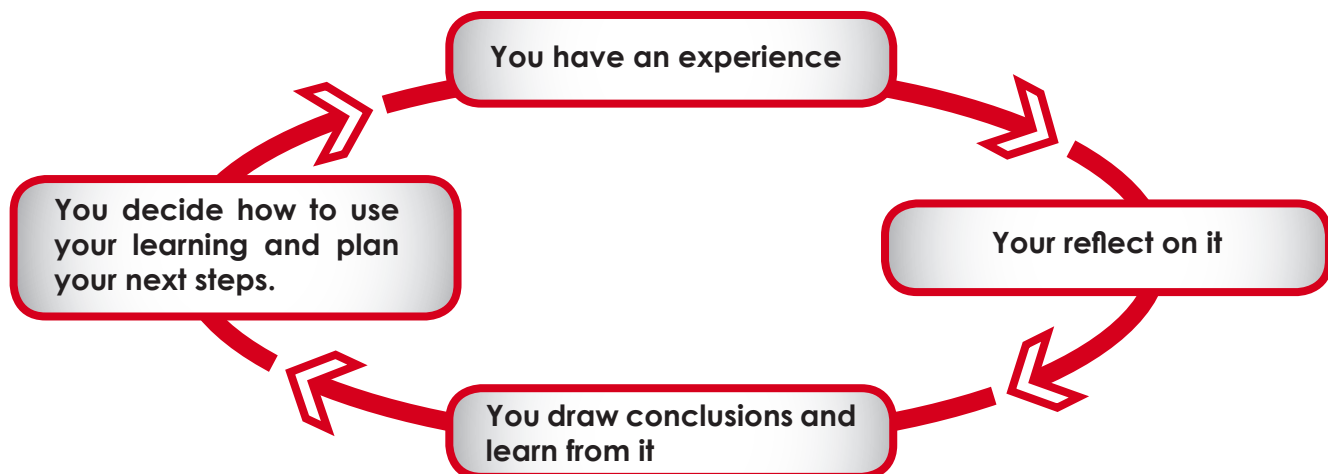
In the first instance, through the Dementia Dynamics™ Toolkit National Rollout, the following may be useful:

- Participate in one of the National Workshops in your area. If they are unable to attend or the workshops have finished, a workshop video will be available on the Dementia Dynamics support website from September / October 2014.
- Get potential champions or existing leaders to register and log into the Dementia Dynamics™ support website, and explore the information and resources. There will be information specific to the champion role which will be updated regularly.
- Support selected champions to take up additional education that builds their capacity in the role of dementia champion. The Dementia Dynamics™ National Rollout will be offering competitive scholarships to take one of two dementia topics offered through the Applied Gerontology postgraduate degree at Flinders University.
- Support selected champions to develop and apply for one of 30 Dementia Training Study Centre Fellowships through the Dementia Dynamics™ project. One Fellowship will be awarded for each of the workshops held nationally. This will provide 12 months mentorship from experts affiliated with the DTSC (Vic/Tas) to support a project aimed at improving dementia care in the facility in which they work.

There is more information in Section Six of this manual about the role of champions and leadership practices.

## REFLECTIVE PRACTICE: HOW TO USE IT AS A WORKPLACE LEARNING EXPERIENCE

Reflective practice is a process by which staff can be encouraged to think about their experience and learn from it. It has been described as a learning cycle in which:



Sometimes the learning cycle can be blocked by existing misconceptions about people with dementia, underlying attitudes and beliefs about the people in our care or perceptions about what is possible in the organisational culture.

An important role for leaders and champions is to support staff to work through the learning cycle. When people express their thoughts out loud and are listened to, they are more likely to apply their learning in everyday practice.

The process itself develops key skills for staff that can enable them to think on their feet and be more responsive 'in the moment'.

Some tips to help leaders and champions guide staff through this process include:

### A. Use questions to guide the reflection component

- It could start with just an open question that encourages the staff member to share their thoughts on a situation.
- If more direct questions are required to move the reflection forward, phrase the questions in a non-threatening, non-judgemental context.
- Questions could provide possible hints as to what they might want to consider (e.g. do you think Marion understood that you were trying to help her? How might you get Marion to trust you to help her?).

### B. Validation

Validation of good practice is fundamental to put staff in the right frame of mind to develop reflective practice.

- Make staff feel appreciated – a simple thank you can go a long way or praise a specific interaction that you have witnessed between a staff member and a resident or just letting staff know that their efforts have been noticed.
- Validation plays a key role in improving practice – and it can come from peers as well as leaders. For example, some organisations have things like a “Thanks Team” board that allows all staff to recognise good practice by pinning up short messages to colleagues.

### C. Constructive Feedback

- When mistakes are made obviously they need to be mentioned – but there is little point to simply telling someone they have done something wrong.
- The aim of constructive feedback is to help people become more effective, but it must be fair, balanced and non-judgemental.

**A good framework for constructive feedback is WHAT WENT WELL and EVEN BETTER IF...**

#### **EXAMPLE - Constructive Feedback**

It is likely that most of us have seen an all too common scenario at mealtimes where a staff member is sitting assisting someone to eat, shovelling food in without conversation except to another staff member across the room.

Buz Loveday (2013) gives a very good example of this framework and how to provide constructive feedback where in this case, the person can feed himself with prompts but is actually being fed. Loveday (2013: 105) suggests that constructive feedback might look something like this:

*“I was really pleased to see that you stayed with Clive for the whole of lunch today. And it was good that you were sitting down – being on the same level as someone you’re helping conveys respect. I though you could show Clive even more respect if you give him more of an opportunity to use his own abilities next time – help him to pick up his cutlery and then all he’ll need are some gentle verbal prompts. Try to keep focused on him – instead of talking to your colleagues, you could try chatting to Clive about the cricket. It might a little longer but I know you’re really patient by the way I saw you make sure you waited until he’d swallowed before you offered him more...Let me know how it goes....”*

This example demonstrates the importance of communication between staff and how even when there are poor practice habits, some positive elements can be drawn on, to make it a potential positive learning experience.

#### D. Dealing with Bad Practice

There are many poor practices that are not disciplinary issues but that have far reaching effects on residents and other staff.

- Leaders can use validation and constructive feedback as a way to start this process.
- Peer pressure can also be influential and it can be useful to put those who continue to

### TIPS FOR CREATING A LEARNING CULTURE

- Provide opportunities for different types of learning experiences. For example, Dementia Dynamics™ eLearning DVD can be offered as an individual learning experience, a workplace supported individual learning experience or a small group in-service learning experience.
- Encourage staff to talk through their new learning and develop their thoughts on some of the things they could do differently as a result. Encourage staff to share any new ideas they have as a result of participating in learning activities. The Dementia Dynamics™ Toolkit provides the POP DVD to help facilitate this.
- Staff are more likely to use new ideas from education and training if there is clear evidence that the organisation is prepared to support new ideas and different ways of doing things. The introduction of dementia champions can play a significant role in demonstrating organisational commitment by guiding, coaching and role modelling person-centred dementia care practice.
- Observation is an important way for staff to learn through experience. For example, when staff are involved in observing residents' well-being, they can become more aware of people's needs, see behaviour differently and notice both positive and negative effects of their work practices.

Embedding opportunities for observation to be part of practice can be highly beneficial for staff and care routines. Resources provided in the Dementia Dynamics Toolkit such as the PANSiS and the DAPIR can provide opportunities for staff to engage in observations and reflection.

- Provide pathways for individual staff insights to be fed back to the team in appropriate ways. This is especially important for staff who do not have a role in existing systems such as handover at shift changes.
- Encourage staff to reflect on their everyday work routines and practices. Champions can use the simple four stage process of reflective practice to assist a staff member or group of staff either formally or opportunistically.



## KEY MESSAGES

- ★ Acknowledge that while all staff need ongoing education and training in dementia care, their needs will be different. This may be especially important for experienced staff who may feel undervalued or threatened by being asked to participate in education that all staff are completing.
- ★ A learning culture is more than just providing programs of education. Caring for people with dementia requires an organisational learning culture that infuses a range of learning experiences that are ongoing and naturally part of every day work.
- ★ A good framework for supporting person-centred dementia care is to have multiple champions at different levels of the organisation that can involve others in modelling good practice and empower staff to meet the needs expressed in responsive behaviour in insightful and innovative ways.
- ★ Reflective practice is an essential tool in creating a learning culture.
- ★ Make knowledge sharing an organisational habit. Embed knowledge sharing by incorporating incentives and opportunities into every learning and performance management process.

