SECTION ONE: INTRODUCING THE DEMENTIA DYNAMICS™ TOOLKIT

BACKGROUND BITES

- The Dementia Dynamics[™] Toolkit is grounded in a philosophy of person-centred care based on the VIPS definition which encompasses four major elements (May, Edwards and Brooker, 2009: 15):
 - **Valuing** people with dementia and those who care for them; promoting their citizenship rights and entitlements regardless of age or cognitive impairment.
 - I Treating people as **individuals**; appreciating that all people have a unique history and personality, physical and mental health and social and economic resources.
 - P Looking at the world from the **perspective** of the person and listening to their 'voice', recognising that each person's experience has its own psychological validity, that people act from their own perspective, and that empathy with the individual's perspective has its own therapeutic potential.
 - S Recognising that all human life is grounded in relationships and that people need to live in a **social** environment which both compensates for their impairment and fosters opportunities for personal growth.
- Behaviour associated with dementia has been referred to as everything from Behavioural and Psychological Symptoms of Dementia (BPSD) through to behaviours of concern. Most of the terms used reflect an approach to understanding the experience of people living with dementia that focuses on the condition and its outcomes, not the person.
- People often think that there is nothing that can be done because it is the 'dementia'.
 Even health care professionals and others working with people with dementia can have a sense of hopelessness that nothing will help. These attitudes can influence how care is provided without us even realising it.
- Language reflects underlying attitudes and conceptions of dementia, people with dementia and dementia care. Verbs used to describe the care process/approach commonly reflect a task-oriented approach that locates the person with dementia in a passive or disempowered context (e.g. I've fed Tom; You can let Marion go outside).
- In this toolkit we encourage the use of the term responsive behaviour to recognise that such behaviour is a response to unmet needs AND consequently, there is something that can be done.
- Depending on the source of information, the rates of responsive behaviour in Australian residential aged care have been identified as anywhere between 29% and 90%. Staff frequently identify behaviour as the most significant challenge in their work.
- Everyone in an aged care facility has a part to play in making everyday life better for people with dementia. Every interaction has the potential to enhance or diminish residents well-being.
- Non-pharmacological approaches are a first priority for addressing responsive behaviour due to the high risks and limited effectiveness of antipsychotic medications.

These points outline why it is so important for aged care facilities to provide all staff and management with a better understanding of dementia care and empower staff to develop and sustain environments that not only help to address responsive behaviour, but which can also impede such behaviour from developing in the first place.

DEVELOPING ENVIRONMENTS THAT SUPPORT PEOPLE WITH DEMENTIA

There are four fundamental components necessary for RAC facilities to create a practice culture that will generate environments which support staff to be person-centred and foster well-being in residents with dementia.

- SELECT THE RIGHT CHAMPIONS TO PROVIDE STRONG LEADERSHIP AT ALL LEVELS OF THE ORGANISATION.
- EDUCATE A CRITICAL MASS OF STAFF TO ENSURE THERE IS A FOUNDATION OF KNOWLEDGE AND UNDERSTANDING ACROSS ALL THOSE WORKING IN YOUR RAC FACILITY.
- REVIEW PROCESSES AND PROCEDURES FOR ADDRESSING RESPONSIVE BEHAVIOUR AND POLICIES THAT SUPPORT STAFF TO BE PERSON-CENTRED IN ALL ASPECTS OF CARE.
- DEVELOP AND REINFORCE FACILITY-SPECIFIC GOALS AND STRATEGIES TO EMPOWER STAFF AND ENSURE THAT ANY POLICIES AND PROCEDURES DO NOT CONFLICT WITH OR MAKE IT DIFFICULT FOR STAFF TO BE PERSON-CENTRED.

The Dementia DynamicsTM Toolkit provides a range of resources that have been developed to assist Australian RAC facilities in working through these processes so they can develop a facility-specific model of care for supporting sustainable evidence-based, quality dementia care.



WHAT IS THE DEMENTIA DYNAMICS™ TOOLKIT?

The aim of the Dementia DynamicsTM Toolkit is to support you and your organisation to work smarter, and advance your continuous improvement in working with responsive behaviour, which in turn, enhances the care environment for your staff and residents. The Dementia DynamicsTM Toolkit comprises four major components:

An eLearning DVD that can be uploaded to a computer:

The purpose of this disk is to provide an aged care facility with ways to provide basic dementia care education to a critical mass of staff, with a particular focus on addressing responsive behaviour.

The 'Personalising Our Practice' DVD

This is a form of 'micro-training' comprising very short messages that facilitate reflective practice and reinforce the principles of person-centred dementia care identified in the eLearning DVD;

• The manual:

A guide to using the various educational and practice related resources the toolkit provides to get maximum value. It is designed to be used by residential aged care managers, dementia champions and dementia care working groups in the facilities;

• A dedicated website – www.dementiadynamics.com.au

The Dementia DynamicsTM website is your first port of call for more information and support from our team. The 'public' page provides some basic information on dementia in Australia and information and registration for the series of workshops across the country. Anyone working for an Australian aged care facility can register and login to a members section to get additional existing and new resources, access to 'ask the experts' and up to date evidence-based practice information in 'bite-size' pieces.

There are a number of key tools that will be identified and provided in the various components of the kit:

- The PANSiS can be used as a clinical indicator of resident well-being. A simple tool that is easy to use and incorporate into practice.
- **Person-centred Policy Lens** a tool to use or adapt to audit and review policies in your organisation to ensure they support staff in being person-centred in the delivery of dementia care.
- **DAPIR** a tool to guide staff in identifying the needs expressed in responsive behaviour and strategies to address them.
- The E.A.T. an environmental audit tool developed by Richard Fleming and Ian Forbes that allows leaders and staff to evaluate the physical environment against evidence-based principles of environments that support people with dementia.
- > The Individualised Care Inventory (ICI) which enables organisations to gather staff-based perceptions of care practices to guide the targeting of resources to areas of need.

Additional tools will be introduced through the Dementia Dynamics™ website as leaders and staff from Australian aged care facilities identify what other tools and resources would be helpful to them in addressing responsive behaviour and meeting the needs of people with dementia in their care.

HOW TO USE THE TOOLKIT

Every organisation will be different in many ways; location, the makeup of resident population and staff, the physical buildings, and the features of care that are prioritised.

You can utilise any of the components of the Dementia Dynamics $^{\text{\tiny{TM}}}$ Toolkit in ways that best suit your organisation.

We do however, have some suggestions that may help you to maximise the value of the contribution the toolkit could make in your facility.

RECOMMENDATIONS FOR INITIAL USE OF THE TOOLKIT

THINGS TO DO	WHY	RELEVANT TOOLKIT COMPONENTS
Senior staff should thoroughly review the toolkit, including working through the eLearning.	Good understanding of toolkit and education enables management to make recommendations for use of resources.	eLearning/POP DVDs Manual Workshop dates DDT Website
	Better able to select appropriate champions/potential leaders to facilitate use of toolkit.	
Identify key leaders and potential champions to complete the eLearning and use POP before rolling out to the larger staff group.	These are the people who will support other staff to participate in education AND, more importantly, support them to use what they learn in everyday practice.	Manual Section 3 eLearning/POP DVDs Workshops
This group of people can form a 'dementia care working group' or 'special interest group' to support this and other quality improvements in dementia care.		
Educate a critical mass of staff.	Get everyone on the same page to maximise the impact of education on everyday practice.	Manual Section 2 Manual Section 3 eLearning/POP DVDs
	This is the first step in developing the learning culture so important to personcentred care.	
Rollout Personalising Our Practice to support use of knowledge and reflective practice.	This provides reinforcement of learnings and opportunities for staff to apply learnings to their workplace/practice.	POP DVD Manual Section 2 Manual Section 6
	It demonstrates commitment of organisation/management to support staff to improve practice.	
	Another step in developing a learning culture.	
Do some simple assessments to provide a snapshot of staff and residents while education is being rolled out.	This provides a baseline from which you can monitor progress over time of person-centred practices and resident well-being.	Manual Section 4 ELearning DVD

THINGS TO DO	WHY	RELEVANT TOOLKIT COMPONENTS
Encourage staff to register on the Dementia Dynamics™ website to access other information and resources.	This will foster learning culture and provide staff with options for reflective practice and to contribute ideas as RAC develops facility-specific model of care.	DDT Website Manual Section 3 Manual Section 5 Manual Section 6
	Builds capacity to further develop ways to address responsive behaviour.	
Dementia care working group/champions can implement a range of ways to trial/use tools and learnings in practice.	It provides structured opportunities for staff to develop practice.	Manual Section 5 Manual Section 6 DDT Website
	Another step in developing a learning culture – workplace learning is highly valued by staff under the right conditions.	
	Staff more likely to change everyday practices if they can see benefits (i.e. initial small wins).	
Demonstrate organisational/ management support for person-centred dementia care.	Empower champions/leaders to facilitate and embed practice changes in every day work routines.	Manual Section 3 Manual Section 4 Manual Section 6 DDT Website
	Facilitate a policy audit to ensure policies empower and support staff to be personcentred in the delivery of care.	
	Plan and action the revision of non- compliant policies.	
	Acknowledgement of the importance of the education by providing encouragement for staff to complete eLearning and supporting the use of POP as part of facility routines.	
Check the Dementia Dynamics™ Website regularly.	Any aged care staff in Australia are eligible to access and use the website.	DDT Website
	The information on the website will be regularly updated. New evidence, tools and resources will be available if you are a registered member.	

KEY MESSAGES

- * Many things can be done to address responsive behaviour and increase well-being in residents with dementia.
- * Everyone in an aged care facility has a role to play in meeting the needs of people with dementia.
- \star Language used in the care context both reflects and influences attitudes and practices.
- There are four fundamental elements needed to create the necessary practice culture for quality dementia care: have champions across staff positions, educate a critical mass of staff, have a specific policy that guides staff to be person-centred in meeting unmet needs and develop facility-specific goals and strategies that empower staff, supported by policies that support staff to be person-centred.
- ★ The Dementia Dynamics[™] Toolkit provides a range of tools and resources that can help management and staff develop a facility-specific model of care built on the principles of person-centred dementia care.