

# The effect of the work system on nursing staff capacity for relational care with people with dementia

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# Background

- 1 in 4 hospital beds (WHO 2014)
- Relational care is seen as "gold standard" for people with Dementia (Nolan 2007)
- Ongoing failures in care provision despite policy and research (Bridges 2010, Hall and Maslow 2008, Lakey 2009, Francis 2010, Maben, Adams et al. 2012, Featherstone 2019)
- Ward contextual factors are thought to have greatest impact but not explored in detail particularly on medicine for older persons wards (Cowdell 2010, Clissett, Porock et al. 2013, Dahlke, Phinney et al. 2015, Baumbusch, Leblanc et al. 2016, Featherstone 2019)





# Methodology

	Phase Two		
Unstructured		Analysis	
Observations	Semi-structured		
Reflexive notes	interviews		
N=125 hours	Reflexive notes	Thematic	
	N=26		
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# Systems Engineering Initiative





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#### Results







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## Effect on patient care

• Patients are expected to fit into a routine

"The patient requests to go to the toilet, she looks at the clock, sighs and reluctantly goes to get the commode. She comes back with the commode and pulls the curtain around him and leaves"

Interactions only occurred when tasks occurred

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Allocated Interaction Time

Unmet Needs

04/09/2019





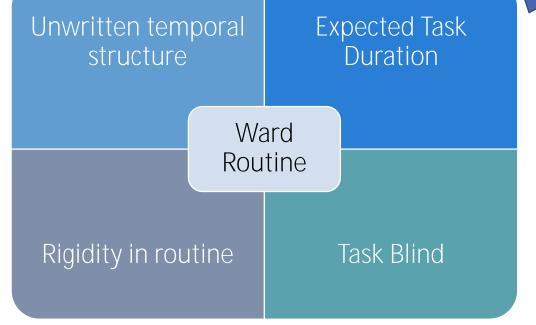






" Everything fitting into a time. The medications have to be done at this round; washes have to be done" "One of the nurses comes into

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"I do my drug round but I usually get interrupt usually requests for the toilet; - confused patients asking you questions, the same questions over and over again, about wanting to go home"

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#### **Emotional Demand**







# Team dynamics









Interventions

Team Dynamics

Emotional Demand and Autonomy

# Organisational priorities and ward routine







# Implication for practice

- Relational care needs to be an organisational priority for MOP
- National/organisational benchmarks for relational care
- Nursing teams need more clarity in their job roles
- Nursing teams need more emotional support
- Nursing staff need more autonomy in their role
- Nursing staff need more flexibility in their work







# Thank you



Oliver E, Work system influences on nursing staff capacity for relational dementia care on medicine for older people wards: An e





#### References

• Bridges, J., Flatley, M. and Meyer, J., 2010. Older people's and relatives' experiences in acute care settings: Systematic review and synthesis of qualitative studies.

, (1)<sup>,</sup> pp.89-107.

- Dewar, B. and Mackay, R., 2010. Appreciating and developing compassionate care in an acute hospital setting caring for older people. , (4), pp.299-308.
- Nolan, M.R., Brown, J., Davies, S., Nolan, J. and Keady, J., 2006. The Senses Framework: improving care for older people through a relationship-centred approach. Getting Research into Practice (GRiP) Report No 2.
- World Health Organisation (2012). "Dementia: A public health priority." <u>Geneva: World Health Organisation and Alzheimer's</u> <u>Disease International</u>.

