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"In My Shoes" Can wearing an age-suit increase person-centred practices for the hospitalised older adult?

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Abstract

Abstract presented at the 11th International Association of Gerontology and Geriatrics Asia/Oceania Regional Congress, 23-27 October 2019, Taipei, Taiwan

Keywords

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Oral/ Poster Abstract “In My Shoes” Can wearing an age-suit increase person-centred care practices for the hospitalised older adult?

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Background

Empathy is a critical component of person – centred practices and positive patient outcomes. When patients experience empathy it is shown that their satisfaction and treatment compliance increases. Healthcare professionals who have not experienced the aging process or age-related challenges can have greater difficulties in understanding and empathising with the older person. Simulation, specifically age-suits are a valued method in which to improve healthcare professionals’ empathy levels towards older people. The purpose of this study was to explore the influence of the age-suit educational intervention on healthcare professionals’ empathy levels and person-centred care practices.

Methods

A mixed method pre-post-test design: surveys (Safety Attitudes, Empathy), debriefing interviews and focus groups were used to evaluate the age-suit education in which participants experienced typical activities of an older person during a hospital stay. The setting was a 52-bed aged care hospital, Australia. The staff who participated had a wide range of skill and educational levels, and career experiences. Permanent staff were invited to complete pre-post surveys (control), staff on one ward were invited to participate in the simulation (intervention). Quantitative data was collected pre-intervention, quantitative and qualitative data were collected immediately post intervention, and at 8-12 weeks.

Result

The quantitative survey results will be presented using simple descriptive statistics. The qualitative analysis explores themes of intervention participants’ enhanced empathy levels, increased perceptions of compassionate care, greater safety awareness and increased staff satisfaction.

Discussion

The age-suit increased staff’s insights into the experiences of hospitalised older people. The results and overwhelming positive feedback about the experience of participating in the age-suit simulation resulted in management within the local health district supporting the research team with further funds to implement the intervention across other hospitals. This research clearly demonstrated the positive role simulation educational interventions can play in promoting person-centred practices.