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Evaluation of ‘Dementia Friends’ Programme for Undergraduate Nursing Students: Innovative Practice

Abstract

The ‘dementia friends’ programme was launched by the Alzheimer’s Society in the UK two years ago with the purpose of educating members of the public about the things they can do which can enhance the lives of people living with dementia.

The aim of this project was to deliver a two-hour ‘Dementia Friendly Community (DFC) Workshop’ written by the Alzheimer’s Society, to an entire cohort of 1st year undergraduate nursing students in one HEI in Northern Ireland. Following delivery of the programme students were asked to complete a short questionnaire on their knowledge and confidence in relation to dementia care before and after the DFC programme.

322 undergraduate first year nursing students took part in the DFC programme. Of these 304 returned questionnaires. 31.25% of students stated their perceived improvement in dementia knowledge was “good” while 49.01% stated their perceived improvement in dementia knowledge was “very good” and 13.49% stated their perceived improvement in dementia knowledge was “excellent”. In relation to confidence in engaging with people with dementia 31.91% stated “good” improvement, 40.79% stated “very good” improvement and 11.84% stated “excellent” improvement.

The ‘DFC programme was positively reviewed by the undergraduate students as it enhanced knowledge and confidence in relation to care of someone living with dementia.

Key words: Dementia, Alzheimer’s Disease, Dementia-Friends, Education, Nursing

Introduction

In the United Kingdom, the Prime Minister’s Challenge on Dementia (Department Of Health, 2015) recently outlined the vision to create a society, by 2020, where every person living with dementia, and their care partners, receive high quality, compassionate care from diagnosis through to end of life care. The challenge (Department of Health, 2015), which echoes Northern Ireland’s own dementia strategy (DHSSPS, 2011), asserts support is applicable to all stages of the person’s journey and to all care settings. In addition, the document (Department Of Health, 2015) highlighted the need for a “society where kindness,

care and dignity take precedence over structures or systems” (Department Of Health, 2015) [pg.6].

This vision builds on the current National Dementia Strategy (Department Of Health, 2009) where it is explicitly noted that there is a need for people living with dementia to be more included in society. Indeed, the Department of Health’s Improving Care for People with Dementia guidance (Department Of Health, 2013) was a key policy document that called for hospital wards to be more ‘dementia friendly’ as well as a greater number of ‘dementia-friendly communities’ in general. The Dementia Action Alliance (DAA, 2013) is one group that have been proactive in developing ‘dementia-friendly communities’ by encouraging a number of organisations to work in partnership with the DAA to draw up an action-plan so as to become more dementia friendly.

To date there are a plethora of initiatives that are seeking to develop the way that dementia is seen. Removing stigma is a priority because dementia is not well understood. People living with dementia, or their care partners, may not ask for help because of the stigma attached to the dementia diseases or they may erroneously perceive the symptoms to be part of normal ageing (Department Of Health, 2015). One of the most successful initiatives is the ‘dementia friends’ programme which was developed by the Alzheimer’s Society in 2013 and has made 1 million people in the UK ‘dementia friends’.

According to Alzheimer’s Society (2015), *“a dementia friend learns a little bit more about what it’s like to live with dementia and then turns that understanding into action - anyone of any age can be a dementia friend. Dementia friends are about learning more about dementia and the small ways you can help. From telling friends about dementia friends to visiting someone you know living with dementia, every action counts.”*

The Dementia Friendly Communities (DFC) programme launched in Northern Ireland in 2013 and these workshops aim to increase understanding of dementia, increase knowledge skills and confidence to relate to and support people with dementia and become a dementia friend.

The Dementia Friendly Communities Programme

The ‘dementia friends’ programme was developed by the Alzheimer’s Society and was delivered to 322 undergraduate student nurses. Each DFC session lasted 2 hours, was

delivered by a dementia friendly community champion of the Alzheimer's Society (GM, JM & MD) and was delivered to no more than 20 students at a time. It is worth noting that to become a Dementia Friendly Communities Champion, one had to attend a structured face-to-face training programme that was delivered by the Alzheimer's Society over two days in order to be deemed as competent in delivery of the dementia friends programme.

The aim of the programme was twofold: First to increase knowledge of dementia and secondly to increase confidence and skills to help students relate, communicate and support someone living with dementia. The content of the 'dementia friends' programme included information about the main types of dementia, the most common symptoms of dementia, the changes that occur to the anatomy of the brain and the importance of communication in dementia care. The content is delivered by the champion of the Alzheimer Society by a combining a number of learning styles which included: lecturing, group exercise, presentation of scenarios and multimedia clips.

Evaluation

As part of the DFC programme students were provided with packs from the Alzheimer Society which included local contact support numbers, a pocket-sized book on dementia and an evaluation sheet. The purpose of the evaluation sheet, which was designed by the Alzheimer's Society, is to ascertain if the programme is effective in raising awareness about dementia and, as a result, raises knowledge and confidence as it relates to dementia care. Ethical approval was not required for this evaluation and consent was assumed on completion of the anonymous evaluation sheets.

A total of 322 student nurses from one in Northern Ireland, across the branches of adult, mental health, learning disability and children's branch nursing, attended the 'dementia friends' programme, with 304 returning the questionnaire (Response Rate: 94.41%). The evaluation sheet contained a number of questions related to specific aspects of the content and style. This paper presents the statistical findings from four questions of the evaluation and these relate to knowledge about dementia before and then after the DFC programme as well as confidence in supporting and communicating with someone living with dementia before and again then after the 'dementia friends' programme.

Results

Overall the majority of students felt their knowledge of dementia had been improved after the ‘dementia friends’ programme. 31.25% (95/304) of students stated their perceived improvement in dementia knowledge was “good” after the programme. 49.01% (149/304) stated their perceived improvement in dementia knowledge was very good and 13.49% (41/304) stated their perceived improvement in dementia knowledge was excellent.

In relation to confidence in engaging with people living with dementia, the students, who all had worked a minimum of 12 weeks within a care setting as part of their undergraduate degree, stated the following: 31.91% (97/304) felt there was a good improvement in their confidence, 40.79% (124/304) felt there was a very good improvement and 11.84% (36/304) stated there was an excellent improvement in their confidence.

Importantly, at the conclusion of the classes 95.72% (291/304) students believed their overall knowledge on dementia was now excellent which was comparable to 18.75% pre-session (57/304). In regards to confidence, 94.41% (287/304) of students now felt confident with engaging in people with dementia which was comparable to 28.94% pre-session (88/304).

Discussion

These results suggest that 1st year undergraduate nursing students benefited from the DFC programme. The findings are interesting given the context, because the DFC programme is designed for lay members of the public with little or no knowledge about dementia. However the students that took part in the programme had completed their first year’s nursing education at university which included a 12 weeks clinical placement. This would suggest that the DFC” programme can complement the information provided to students during the first year of their nursing programme and make the student more ready for clinical placement.

While this evaluation is unable to determine if there are any gaps in 1st year undergraduate nursing curriculums these findings suggest that, in relation to knowledge and confidence, that these undergraduate nurses can increase their knowledge and develop confidence in dementia care that they should, or would like to have.

It is important to illuminate that becoming a ‘dementia friend’ has become less standardised over-time with ‘dementia friends’ now being created by watching a short online video. While the efficacy of these are untested, it should be noted that this evaluation was of a 2-

hour power-point package that was delivered by experienced Alzheimer's Society Champions, who also practised as specialist nurses in the field of dementia care.

Conclusion

The delivery of a 2-hour DFC programme, that was designed by the Alzheimer's Society, increased 1st year nursing students knowledge about dementia as well as their confidence in communication and engagement of people living with dementia. Given the current drive for 'dementia-friendly' communities, which includes clinical practice, the DFC programme offers an opportunity for undergraduate nursing students to increase their knowledge and confidence in dementia care. The Alzheimer Society Champions are experienced, trained volunteers who deliver the programme for no formal cost and considering this, coupled with the findings of this paper, the 'dementia friends' programme should be recommended as an integral part of any undergraduate nursing programme.

Conflict of Interest

None declared.

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