The ROYAL HOSPITALS

Caring for people who wander in a rehabilitation unit

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The people we are caring for

- 'Snap' survey in August 2005

  - 20 out of 72 people being cared for in the unit with some form of confusion

  - 12 of these with a diagnosis of dementia

  - ?? of these either able or wanting to move without assistance

- Critical incidents

  - People leaving the unit (including one fatality)

  - Agreed plan to look at practice more critically and change based on what we found

The environment assessment

- Physical environment
  - Observation difficult
  - No specific adaptations
  - Touchpad locked doors
- Staffing
  - 6-8 staff in mornings (3-4 RN's)
  - 4/5 staff in evenings (2 RN's)

Staff attitudes and knowledge

- A number of Survey workshops were undertaken:
  - Staff asked "what words does dementia call to mind?"
    - The language used varied – 'every patient is an individual' to 'confused' & 'agitated' Showed no shared values and beliefs for practice
    - Tensions – maintaining safety vs. autonomy
  - Staff asked "how do we care for people with dementia on the unit?"
    - Claims – individualised care and involvement of family
    - Concerns – management of risk and dignity
    - Issues – community provision, skills and knowledge
  - Staff asked "how can we build on what we do?"
    - Environment, knowledge & skills, looking at management of care
- Available expertise was felt to include
  - Staff expertise and experience
  - specialist education
  - systems of support (specialist medicine, nursing; clinical psychology)

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Surveyed Our Approaches to Care

- Assessment

  - No formal tool around wandering

  - Assessment focused on of rationale for restraint

  - Not specific

- Risk management

  - Medication very rarely used

  - Some use of physical restraint

  - Supervision of patients : can be practically difficult, especially in afternoons & evenings

Summary of the issues

- Developing our knowledge and skills
  - In practice – learning as we work with patients
  - Formal education input
- Care management
  - Mechanisms for specific assessment & care
  - Access to more timely specialist support
- Environment
  - Make changes and manage it better