Implementation and evaluation of Dementia Education And Learning Through Simulation 2 (DEALTS 2) programme

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The Dementia Education And Learning through Simulation 2 (DEALTS 2) programme is a national simulation-based dementia education toolkit for hospital staff, mapped to the Dementia Training Standards Framework learning outcomes for tier 2 (risk reduction and prevention, person-centred care and communication). The aim is to put staff into the shoes of a person with dementia to facilitate positive impacts on practice - see the person, not the diagnosis! DEALTS 2 is underpinned by the Bournemouth University (BU) Humanising Values Framework to help staff identify humanising and dehumanising aspects of care and support and improve morale. This programme was commissioned by Health Education England (HEE), building on the Dementia Education And Learning Through Simulation (DEALTS) programme developed by HEE in 2013/14 and has been quality assured using the hallmarks of good dementia training identified by the 'What Works' research study led by Leeds Beckett University.

Why simulation based dementia education?

- The quality of care provided to people with dementia is a global concern. Government policy recommends a need for training to improve the delivery of care for people with dementia.
- DEALTS 2 was delivered as a train-the-trainer model across England in 2017 to 196 trainers from 13 HEE Local Offices. Simulation is a form of experiential learning that supports the development of interpersonal skills relevant in dementia care.
- We hypothesise that staff will make positive changes to how they care and support people with dementia after attending the DEALTS 2 programme. We continue to evaluate the impact on practice to measure whether this happens.

Development of DEALTS 2: five stage iterative process

- Scoping exercise - barriers and enablers of delivering DEALTS
- Development of draft training materials
- F1 test of draft training materials
- Delivery of training
- Dissemination of training materials for implementation

DEALTS 2 resources

Designed for use by experienced trainers, and includes a train the trainer element to support sustainability of learning within organisations. Can be adapted to be relevant in different settings.


Impact Evaluation

Mixed methods approach underpinned by Kirkpatrick Model for evaluating effectiveness in training:

<table>
<thead>
<tr>
<th>Phase</th>
<th>Data (trainers)</th>
<th>Data (staff)</th>
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</thead>
<tbody>
<tr>
<td>Phase 1 Short term outcomes of train the trainer sessions</td>
<td>Telephone interviews with 18 trainers</td>
<td>Not applicable</td>
</tr>
<tr>
<td>Phase 2 Evaluation of adaption and adoption of DEALTS 2</td>
<td>Follow up evaluation form to all trainers (12 months after workshop)</td>
<td>Course pre and post evaluation form</td>
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<tr>
<td></td>
<td>Follow up evaluation to all staff that opt in (6 months after training)</td>
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Impact of DEALTS 2

Feedback from Train the Trainer workshops:
- Participants (n=183) found the workshops informative and useful for enabling confidence and new ideas for deliver materials.
- 95.1% of participants rated the training as ‘very good’ or ‘good’.

- Simulations were: ‘thought-provoking’ and ‘insightful’; ‘provided a more holistic outlook on dementia care’;
- enhanced training and reflection on the underpinning theory.

- Potential barriers to roll out: approval from line managers; course content heavy; limited time given for training.

Conclusions

Preliminary findings demonstrate the value of using simulated learning to develop interpersonal skills relevant in dementia care. This evaluation data will provide evidence of the effectiveness of simulation based education to determine suitability across the healthcare sector.

Next steps

- Shortlisted as a finalist in 9th National Dementia Care Awards 2018 ‘Best Dementia Training Initiative’.
- Social media based peer support network to ensure sustainability across Trusts and wider health and social care arena.
- New material to support other Dementia Training Standards Framework learning outcomes (funding dependent).

Acknowledgements

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This poster reflects on the findings of the research conducted by Bournemouth University. The views expressed are those of the research team and not necessarily those of our other organisations listed.

Source: Todres et al, 2009

For full reference please see below: