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Effect of Dementia Bootcamp on Students

Dementia Care Competencies

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Introduction

- An estimated 50 million people had dementia in 2017
- Estimated to reach 131.5 million by 2050
- The cost of dementia care in the US in 2010 was between \$157 and \$215 billion
- Dementia competency is required to ensure appropriate response to Dementia Compromised Behaviors (DCB's)
- The U.S. Department of Health and Human Services recommends that healthcare professionals be prepared to care for people with dementia, which includes possessing the skills needed to meet their complex care needs
- Due to the increasing prevalence of dementia, effects of the disease, and the complexity of the care required, in addition to the financial burden on the healthcare system, healthcare professionals must be prepared to meet the needs of this population

Purpose

examine the effect of a DCBC on students dementia care competency and empathy for people with dementia.

Methods

- Design**
 - Qualitative descriptive study
- Ethical Considerations**
 - IRB approved / Written consent obtained
- Sample – Purposive**
 - UTT Nursing Students
 - N=22
- Setting**
 - Ornelas Activity Center
- Data Collection & Analysis**
 - Group interviews in a private location
 - Audio-taped & transcribed verbatim
 - Line-by-line analysis by three researchers
 - Codes identified & grouped into categories
 - Measures to ensure trustworthiness employed

Example of the Simulated Dementia Experience:



Results

- **What was your experience at bootcamp:**
 - "More eye opening than I thought it would be"
 - "I thought it was a great experience"
 - "it was more emotional than I thought it would be"
 - "I really enjoyed it because of all the people who were there to talk"
 - "It was really valuable information"
 - "It was a good day overall"
 - "I thought it was a really eye opening day"
- **What was your clinical experience like:**
 - **Terrific Tuesdays**
 - "I did the Terrific Tuesday... I was pretty comfortable, I think more so than if I had not done the bootcamp"
 - "Terrific Tuesday was good though; you were assigned one person and spent the whole day with them."
 - **Azalea Trails**
 - "Azalea Trails, I wouldn't go back there"
 - "we don't have any interaction with the patient"
 - "we only had 30 minutes with the patient"
 - "more of a volunteer rather than a learning experience"
 - "It helps to have someone there"
 - "Have more empathy, realizing its not their fault but they can't really help it"
 - "your clinical instructor isn't there the whole time so they can't always give you that much feedback"
- **What elements went well/did you learn from:**
 - **Virtual Dementia Tour**
 - Many Students identified this as the activity they learned the most from
 - "It's a good demonstration when you start experiencing the symptoms."
 - "That was the best part because you're in their [people with dementia] shoes"
 - **Task Analysis**
 - "it makes you think it is a lot harder than it appears for some people"
 - "very eye opening"
 - "all the little steps that only takes me ten minutes to do could take 10 times longer for the patient"
 - **Speaker with Lewy Body Dementia**
 - "He was great"
 - "I almost cried on his"
 - Several students said this was the first time they had heard of Lewy Body Dementia
 - **Panel of Caregivers for People with Dementia**
 - "...very touching, and I teared up a bit with the speakers."
 - "I was really able to empathize with them [the caregivers] a little bit more"
 - "That had the most impact"
- **What elements did not go well/did you not learn from:**
 - **Length of Bootcamp**
 - "the length of the bootcamp. It was very lengthy"
 - "It was just a lot all day"
 - "there's some fatigue that goes on with just the length of it"
 - **Presentations**
 - "when you have long presentations, the information isn't absorbing anymore"
 - "The speech right before lunch... I couldn't process it"
 - "I was zoning out and it so much information"
 - **Having the VDT at the end of Bootcamp**
 - "we had to stay 45 minutes to an hour and everyone was gone there was nothing to do"
 - "At the end of the day, it was awful"
 - **Too many speakers on Caregiver panel**
 - "There were too many people"
 - "one lady I really don't remember what she said because she didn't talk that much"
 - "you could tell they wanted to talk but couldn't cause they had to wait for someone to pass the mic."
- **What was the most important thing you learned:**
 - "perspective"
 - "Communication...that was really helpful"
 - "More empathy for people with dementia"
 - "It's not just the patient that suffers; it's the family too"
 - "it makes me aware of how to be a better, and to work with caregivers better"
 - "I think perspective, and then also how it affects the family"
 - "They're in their own reality"
- **What are your suggestions for improvement**
 - "it is just so long, to get all the info but maybe more breaks"
 - "I didn't like the acting"
 - "The activities put you in the shoes, that is the most beneficial"
 - "Honestly the PowerPoints were brutal"

Discussion / Conclusion:

Our results show that students verbalized improved confidence in their dementia care competency and empathy after attending the bootcamp and clinical. In future studies we would suggest having the VDT before the bootcamp to decrease time and having more interactive activities instead of the lectures to improve student engagement. For clinicals we would recommend that faculty be present during clinicals to ensure clinical goals are being met, and that debriefing takes place immediately after clinical.

Acknowledgements: https://www.andlaw.com/wp-content/uploads/2017/11/DSC_0161.jpg