2021

Adult Day Care Staff Education to Improve Communication and Behavioral Management Skills

Kathy Davis
Walden University

Walden University

College of Nursing

This is to certify that the doctoral study by

Kathy Davis

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

Review Committee
Dr. Diane Whitehead, Committee Chairperson, Nursing Faculty
Dr. Joan Hahn, Committee Member, Nursing Faculty
Dr. Jonas Nguh, University Reviewer, Nursing Faculty

Chief Academic Officer and Provost
Sue Subocz, Ph.D.

Walden University
2021

Abstract

Adult Day Care Staff Education to Improve Communication and Behavioral Management
Skills

by

Kathy Davis

MSN, Walden University, 2015

BS, University of Texas Medical Branch, 2002

Project Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Nursing Practice

Walden University

November 2021

Abstract

Ineffective communication and behavioral management skills are quality and safety

issues that were identified at a local adult day care facility in the Southwest United States.

Administrators at the facility identified a knowledge gap in communication and behavior

management techniques for patients with cognitive impairment. An educational program,

with a PowerPoint presentation and verbal feedback as key components, was developed

and used to address the identified gap in practice related to individuals with cognitive

impairments at the facility. The adult learning theory and the plan-do-study-act model

provided supportive frameworks for program development and staff education. The

project question explored whether a staff education program would improve staff

knowledge and confidence in behavioral management skills for patients at the adult day

care facility. The educational program content was evaluated by three experts with over

20 years of experience working with cognitively impaired patients. Program content was

found to be applicable and informative for the adult day care staff. Participation in this

project was limited due to the COVID-19 pandemic requirements. The PowerPoint was

presented to two participants via the Zoom videoconferencing platform. Pre and post

survey results completed by the participants had ratings of 5 (*excellent*) for all items for

both pre and post surveys. Although staff participation was limited, the project has the

potential to promote social change through an increase in staff knowledge, prompting

more effective communication among staff and patients, and thus improving patient

outcomes at a local adult day care center.

Adult Day Care Staff Education to Improve Communication and Behavioral Management
Skills

by

Kathy Davis

MSN, Walden University, 2015

BS, University of Texas Medical Branch, 2002

Project Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Nursing Practice

Walden University

November 2021

Dedication

I dedicate this dissertation to my husband who is a survivor, my son who is faithful and loves our country, family and friends that stood by me during my challenge to pursue a dream. I learned the meaning of true faith, love, happiness, and "endurance" through your eyes.

Acknowledgments

Thank you, Walden University faculty, for teaching me how to achieve a higher-level of education through discipline, training, and technology

Table of Contents

List of Tables

iii

List of Figures

Section 1: Nature of the Project

Quality, safety, a higher level of education, and performance are the driving

forces in the healthcare system (Center for Improvement in Healthcare Quality [CIHQ],

2017; Mosadeghrad, 2014). These healthcare standards are demands of the society to

maintain or improve the physical health and the psychological well-being of the

individual (Santilli & Vogenberg, 2015; Zamanzadeh et al., 2015). This evidence-based

project addresses an educational program presented at an adult day care center to improve

the staff knowledge on effective patient communication and behavioral management

skills. The doctoral project was created to bring about a positive social change by

improving communication and behavioral management skills between the caregiver and

the patients through education based on survey questionnaire and analysis. In Section 1, I

discuss the practice problem, purpose and nature of the doctoral project and the

significance to nursing and patient care.

Problem Statement

Poor communication and ineffective behavioral management skills were

significant concerns at a local adult day care center facility, which had an impact on the

quality of care for patients with dementia. The lack of quality care at an organization can

compromise safety and result in poor outcomes at the facility (Tretteteig et al., 2017).

Adult day care centers are organizations that provide support and care to individuals who

are in need of supervised assistance due to physical, mental, and/or intellectual

impairment or disability including cognitive impairment. The nurse's responsibility is to

oversee the staff and patients' needs. The staff member's job at an adult day care is to

assist with daily activities of living, socialization skills, and guidance. Patients at the facility consist of individuals diagnosed with schizophrenia, bipolar disorder, and dementia. Mental health conditions such as dementia pose a significant problem in the healthcare system and are increasing in the aging population (Alzheimer's Association, 2020a; Kitchener et al., 2017). According to the Alzheimer's News Today (2020), there are approximately 5.5 million individuals in the Unites States who have Alzheimer's disesase. Patients with dementia often exhibit aggressive behavioral issues such as screaming or aggression and are verbally abusive toward staff members (Sturm et al., 2018). At the local adult day care center, the administration verbalized, and I have observed, that staff members do not have the training to effectively communicate and manage patients with behavioral and cognitive issues. The objective of the DNP project was met through virtual education by teaching the staff members effective methods to communicate and interact with the patients at the facility.

Purpose Statement

This doctoral project focused on teaching and educating the staff about effective communication and behavioral management skills at the local adult day care center. Evidence-based literature served as a guideline in the development of an educational program on communication and behavioral management for staff working with patients with dementia. The project aimed to educate the staff members on effective communication strategies and methods to manage patients' behavioral symptoms safely.

A significant gap in the practice was analyzed at the adult day care facility based on administration feedback and professional observation. The facility did not have a

policy or standard of practice to serve as a guideline for staff working with patients needing behavior management and day to day communication. However, verbal communication and behavioral management skills are usually learned through job training or experience (Hood et al., 2015). The guiding practice-focused question was: Will staff education improve staff knowledge and confidence in skills to manage communication and behavior for patients at the adult day care facility?

Nature of the Doctoral Project

The evidence-based practice (EBP) literature from Walden University's library databases, which included the MEDLINE and CINAHL were sources of evidence to support the DNP educational project. The EBP literature was current and used to develop the educational content for the program. I implemented the virtual learning platform effectively, although COVID regulations had an impact on the implementation process of the education program.

Significance

A staff educational program at the local adult day care center can impact the stakeholders at the facility, including administrative staff, caregivers, patients, and their families. The educational program provided a method for implementing social changes by increasing staff knowledge and training at the facility. It was an opportunity to teach about effective behavioral management and communication skills, improve patient care, increase family satisfaction, and staff knowledge. The participants and I engaged in open-ended discussion about how and why interventions such as listening skill, redirecting the patient, and recognizing factors that can contribute to challenging behavioral symptoms.

Based on the survey and feedback, the educational program has potential to make a significant impact at the facility.

Summary

The project presented an efficient method to apply current evidence on the management and communication with adult day care patients through quality staff education. Section 1 included the practice problem, project purpose, question, and sources of evidence. In Section 2, I discuss the theoretical framework, provide a review of the literature to support the project, describe the local setting, and explain my role as the DNP student and project leader.

Section 2: Background and Context

Introduction

Interaction between staff members and the client are a common concern at adult day care facilities (Kornhaber et al., 2016). Ineffective communication and behavioral management skills were quality and safety issues that were observed at the selected facility that required further research and study. The focus of the DNP project was staff education on patient behavioral management and communication at the adult day care facility. The practice-focused question addressed how effective staff education was in improving knowledge and increasing confidence in skills to manage communication and behavior for patients at the adult day care facility. In Section 2, I present how the theory supported the doctoral project, provide a review of the literature on behavioral and communication management for patients with cognitive impairment, and describe the local background and my role as the DNP student and project leader.

Concepts, Theories, and Models

Adult Learning Theory

The adult learning theory and the plan-do-study-act method were two concepts used to support project development. The adult learning theory was used to evaluate the staff members' level of knowledge, readiness to learn, and competency. The adult learning theory is a process of empowerment and understanding whether the adult learner is prepared to learn (Dijkman et al., 2017; Spies et al., 2015), which was applied to staff at the facility in this project. Both the adult learning theory and plan-do-study-act method

are relevant in the development of the DNP project to ensure that quality, safety, and EBP are initiated at the Adult Day Care facility.

The adult learning theory developed by Malcolm Knowles is based on a set of principles to understand the reasons or circumstance that motivate an adult to learn. The theory helped prior to initiating the educational program in the doctoral project. Table 1 aligns the project with the adult learning theory principles (see Mukhalalati & Taylor, 2017; Palis & Quires, 2014; Spies et al., 2015).

Table 1

Adult Learning Theory

Theory principles	Teaching assessment	Alignment
Self-concept	What is the learner perception about the material, or personal interest/use	Adult participants are independent, self-motivated
Experience	What is the learner past knowledge or skills?	Participants have previous experience and knowledge with these patients
Readiness	Is the learner prepared or eager to be trained, taught, or increase knowledge?	Participants are used to problem-solving situations from experience
Orientation to learning	Do the learner understand the importance?	Participants and organization are aware of the importance of this knowledge
Motivation to learn	Is the individuals' willingness to be trained or taught?	Participants are eager to gain knowledge

Each principle of the adult learning theory was applied to the educational program through the following methods. For self-concept, an introduction with an open discussion was used to analyze the present communication and behavioral style. A pre–post questionnaire measured how the staff perceived knowledge and understanding of the education content. The orientation to learning was accomplished through explanation of

the project purpose and expected outcomes. A PowerPoint presentation was presented to the participants. Group discuss and participation about effective communication and behavioral management skills are essential because the adult learners learn more efficiently through these methods (Ho & Lim, 2020). A question-and-answer session was provided with an opportunity to clarify educational content as needed.

Plan-Do-Study-Act

The plan-do-study-act method is a model based on gathering evidence-based data, analyzing the theory, and developing a strategy for an effective outcome (Reed & Card, 2016; Bollegale et al., 2016). The model served as a guideline for initiating, developing, implementing, and evaluating the DNP project, which correlated with the goals of the educational program. Figure 1 explains the components of the plan-do-study-act method. The model consists of the following steps:

- Plan: Understand or examine what the issue or concern

- Do: Implement the educational program

- Study: Evaluate the panel of experts' recommendations on the program. Make necessary changes to improve content. Evaluate the expert surveys evaluating the staff education program content

- Act: Carry out the strategy or plan of action to correct the issue or concern. (Reed & Card, 2016). Communication and behavioral management skills are the problems assessed at the facility. An education PowerPoint presentation will be presented to staff with the goal of increasing the staff's knowledge on

how to communicate and apply appropriate behavioral interventions to patients with cognitive impairment.

Figure 1

Plan-Do-Study-Act-Model
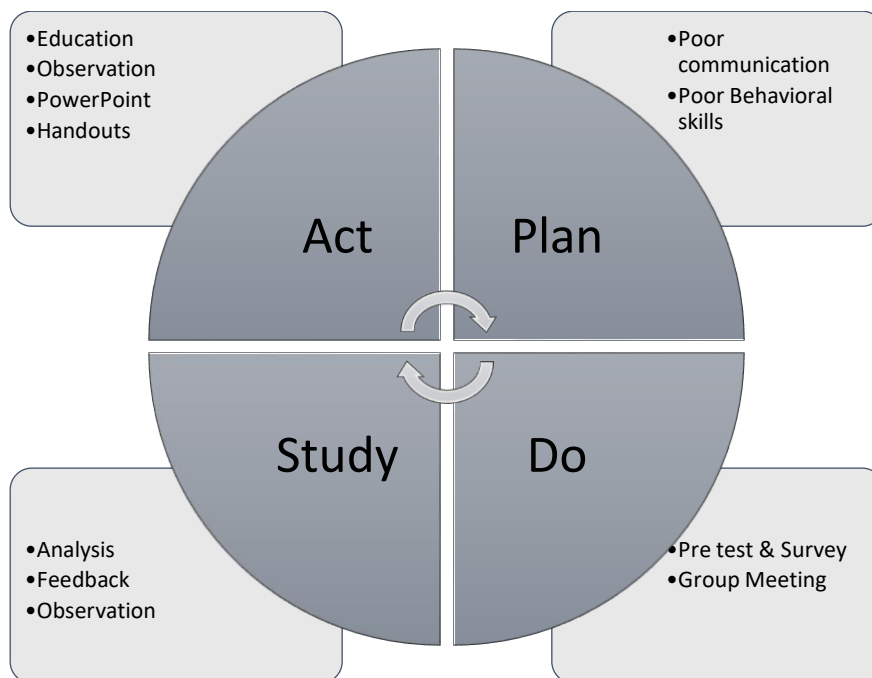
Effective communication and behavioral management skills are the objective at the facility through staff education and training. The DNP project utilized the steps of the plan-do-study-act model at the adult day care facility by assessing the problems, teaching about effective communication and behavioral management skills for quality improvement purposes and evaluating staff knowledge before and after the educational program.

Relevance to Nursing Practice

The focus of the project was to improve staff knowledge on communication and behavior management with patients at a local adult day care center. The education program focused on teaching staff members how to identify inappropriate behavioral symptoms of dementia and apply interventions to manage these types of behaviors at the adult day care facility. Current, evidence-based literature was used to support the content for the staff education program on communication and behavioral management for patients with dementia that attend an adult day care program.

Communication Skills

A number or researchers have discussed effective communication skills in health care. Poor communication in an adult day care setting can impact the patient, delivery of care, and quality of the facility (Gaugler, 2013; Tretteteig et al., 2017). It is necessary to communicate effectively with family members, the caregiver, and the client for patient safety and to improve the quality of care. Effective communication includes active listening skills, maintaining eye contact, and speaking clearly.

Johnson et al. (2017) examined the importance of quality care between the staff and patient at a healthcare facility and found that patient–staff professional interaction and active participation improve collaboration or communication skills between the staff and the patient. Active listening and positive verbal and nonverbal communication can improve outcomes in the healthcare system. Attentiveness, nonjudgmental communication, and paying close attention to body language are other methods that will be taught in the educational program. It is an approach of being observant, paying close

attention to the client's needs, speaking clearly, and addressing the inappropriate behaviors immediately without bias. This approach is important in developing the patient–provider interaction, which can influence the delivery, outcomes of the client's care, and used in the project (Norouzinia et al., 2016; Zarit et al., 2011).

Brady et al. (2016) discussed the significance of effective communication skills when providing care for individuals with psychological disorders. The authors emphasized the importance of using a model such as the Interprofessional Education Technology as a guideline to improve outcomes at a healthcare facility. I utilized this model in the study. The IPE model assist with developing team collaboration that is important to learning skills. Brady et al. examined how talking and calming the patient will have a positive impact on the outcome of care.

Communication Technique

Communication techniques and behavioral skills were beneficial to assist the staff caring for patients with cognitive impairment. The staff members at the facility currently address the needs of the clients through redirection skills; however, this intervention requires more education and training based on observation. Collaboration with the family member and primary caregiver will be considered in the care of the client. According to the Alzheimer's Association (2020c), positive verbal and nonverbal communication is important in the care of clients who are cognitively impaired or have dementia. I taught the following techniques during the virtual education class:

- how to speak clearly to the client by talking in a low tone in complete sentences

- maintaining eye contact by staying focused and attentive to the patient's needs while talking

- active listening skills by paying attention to what the client is saying, respond and communicate appropriately

Sprangers et al. (2015) used an observational approach to analyze how communication skills can promote positive changes in the patient's care. The researchers discussed how teaching and coaching the caregiver can improve the overall health of a patient's care. I utilized the communication management skills mentioned in this article as a guideline in the doctoral project to teach the caregiver how to interact with the patient. Caregivers at the adult day care center were taught to maintain eye contact, speak in a low, clear tone, use a less dominant voice, and use simple and understandable words when communicating with the patients. These techniques assisted the staff in establishing rapport and trust with the patient. The caregiver can consider sitting next to the patient if the situation is safe and apply a professional posture (Haley et al., 2017). According to Foley et al. (2010) and Keutchato et al. (2020), when using a professional posture, the staff member should observe negative body language such as their crossing arms, frowning or slouching to show noninterest when addressing the patient.

Behavioral Management Skills

Poor behavioral management skills in an adult day care facility can have an impact on patient care, perception, and outcomes at the facility (Ehrenreich et al., 2017; Nogales-Gonzalez et al., 2014). Ineffective behavioral management skills can have a significant impact on safety and the quality of care in the healthcare organization.

Agitation, outbursts, delusion, and roaming around are examples of abnormal behaviors that need to be observed and addressed with the client. The staff members were taught how to manage these abnormal behaviors by understanding what cognitive impairment is and how to recognize inappropriate behaviors. Cognitive impairment is a neurological disorder that affects the ability to learn and remember certain things or events, which can be classified as mild, moderate, or severe based on the disease process (Iadecola et al., 2019). Dementia includes the neurological disorders of cognitive impairment but is more severe because it affects the capability to perform activities of daily living that usually requires assisted from a guardian or caregiver (Alzheimer's Association, 2019). The educational program emphasized key points about managing inappropriate behaviors, what constitutes these conditions, and the results of the behavior. Responding immediately to behaviors such as agitation, swearing and wandering can improve the safety of the patient (Alzheimer's Association, 2021; National Institute on Aging [NIA], 2021, 2021a; Stone, 2010). Management of these behaviors can include redirecting, listening, or providing recreational activities are other effective methods to address inappropriate behavior at the facility. The recreational activities that were considered in this project included music therapy, dancing, and puzzle games. These methods have been shown to be effective to improve communication and behavioral management skills (Alzheimer's Association, 2020c). Table 2 lists behavioral interventions that were taught to the staff members at the facility.

Table 2

Behavioral Management

Behavior	Intervention	Outcome
Agitation	Reassurance and find the trigger, quiet time. Maintain basic routine and ADL's if possible. Redirect by offering alternative such as reactional activity. Talk to patient privately, if possible, to maintain dignity.	Client will be calm. Patient and staff safety maintained. Mental health maintained.
Swearing	Listen to patient, observe own body language such as crossing arms or placing hand on hip. Examine own behavior and communication skills before responding to avoid escalation. Address needs.	Patient and staff safety maintained. Needs are met.
Wandering	Find the cause of wandering. Assess for needs water, food, toilet, Redirect or offer chair or safe place to sit. Use alarm on doors.	Safety maintained. Patient's needs met.

(Alzheimer Association, 2021b; Alzheimer Association, n.d.; NIA, 2021; Stone, 2010)

Environmental Factors

The physical, psychological, and environmental aspect are factors that needs to be considered when addressing the inappropriate behavior of patients with dementia. The environment can impact an individual's physical and psychological condition. A hot or cold environment can cause irritability, restless, sweating, and shivering. These signs and symptoms can trigger a fight or flight response that can contribute to communication or behavioral issues especially if the individual is verbally or cognitive impaired. The flight or fight response is the sympathetic nervous system response that triggers the mind and body to protect itself causing the individual to become aggressive, confused or even run (Dueñas et al., 2016). It is necessary to check the surroundings for the potential cause of communication or behavior issues by adjusting the room temperature, checking for

unpleasant smells, substance, chemicals or sounds that can have a negative impact on the brain sensory causing irritation, mood, or behavioral changes (Ehrenreich, 2017; Stans et al., 2016). Staff at the facility were taught to check the patient's surroundings, room temperature, and triggers such as unusual smells that may elicit unwanted behavioral changes. The staff members were taught how to address these behaviors by asking or recognizing the unfavorable conditions in the environment and making appropriate changes if applicable.

Patients with behavioral problems often become emotional and difficult to manage. Behaviors that a patient may exhibit include anxiety, aggression to staff or others, fighting and resistance in following commands. Staff need to keep the client calm, safe, by applying listening skills and staying with patient when the inappropriate behavior occurs (Ellen et al., 2017; Mucci et al., 2016). It is important to inform the administrative leadership team so that a professional evaluation or provider referral is initiated for further behavioral management or treatment.

A patient exhibiting behavioral signs of isolation or withdrawal is a concern at an adult day care facility. The patient may be sitting alone, crying, or refusing to participate in group activities. It is necessary to support the individual through comfort measures such as active listening, talking with the client, group therapy or recreational activity involvement if applicable (Blanchard et al., 2016). The caregiver can implement supportive measures such as listening attentively to improve socialization, intellectual capability, communication, and behavioral skills.

Hood et al. (2015) used an empirical approach based on observation and analysis to understand behavioral management skills in their study. The behavioral management skills such as listening, recognizing, and addressing behavioral problems were mentioned in the articles will be utilized in the educational program to address the communication concerns at the facility by using an open discussion and feedback technique. The staff member will be taught how to monitor their own reaction to the behavior first then find effective strategies to address the behavior such as discussing the issue with the client if applicable or have the patient participate in a group or reactional activity as distraction or calming technique. The article discusses basic problem-solving skills such as using knowledge to identify and addressing the problem. The authors analyzed the importance of staff education because increase knowledge had a significant impact on the outcome of patient care.

Standards for Practice

According to Peterson et al. (2019) and the Alzheimer's Association (2020b), a set of standards for practice and family participation in the care of individual with dementia plays a crucial role in the behavioral management. The guidelines in the article are an assessment tool that can be use by the registered nurse upon admission to measure the cognitive impairment level so that the nurse and staff can have a baseline behavioral evaluation to use in the patient's care. Family involvement in the care of the cognitive impaired is encouraged to improve outcomes. The authors recommended that caregivers follow a set of parameters when taking care of the cognitive impaired, which will be taught in the educational program. The parameters include the following questions: Is this

the client norm according to the disease progress and stage of development? Does the client's medicine or treatment plan need to be change? These are questions that the registered nurse can consider when there are changes in patient's behavioral that needs to be addressed and other options may be considered such as recreational activities based on the Alzheimer Association. The standards according to the Alzheimer Association (2020b), encouraging recreational or physical activity, supplement replacement such as a vitamin, healthy well-balanced diet for the patient with Alzheimer's disease or dementia. Badura's social cognitive theory states that the surrounding and contact with other individuals can significantly improve behaviors in mental health clients (Tougas et al., 2015). Recreational activities are important when working with patients with dementia. Some of the recreational activities at the facility include dancing, puzzle, and adult coloring books. Staff was encouraged to have patients participate in these activities to improve the patient's behavior and assist staff in managing undesired behaviors that patients may exhibit at the adult day care facility.

The caregiver can used reactional activity, group therapy, team building, buddy system as a technique to improve communication and behavioral management skills. Socialization skills are beneficial for patients that are withdrawn, sitting alone, not talking to others or refused to participate at the adult day care facility (Topal et al., 2018; Palmer, Newsom, & Rook, 2016). Due to COVID 19 restrictions the staff member pairing will be performed by administration leaders. The administration team will remind the colleague how and why it is important to communicate effectively and address the client's needs appropriately when an inappropriate behavior occurs at the facility based on what was

learned in the virtual educational program. Game, puzzles, group discussion, dance or music therapy are other methods that are helpful with interaction skills (Sprangers et al., 2015).

Local Background and Context

The DNP project took place virtually at an adult day care facility in an urban area in the Southwestern United States. According to the administrative team, more staff education is pertinent at the facility. The team expressed concerns about how to improve caregiver's communication skills with when the patient when the patient is having an inappropriate behavioral episode such as wandering or agitation. The facility cares for approximately 30 patients daily during the 8 hours of operation. Staff members consist of one registered nurse and five caregivers, who are working full and part time at the location. The staff level of education varies from high school to first year of college. There is a 1:5 staff to patient ratio based on 20 to 30 patients at the organization but this staffing ratio can vary with numbers of staff and daily patient census. All staff members at the adult day care facility will be asked to participate in the educational program. The goal was met, which was to teach about effective methods to improve communication and behavioral management skills through staff education, monitoring, and implementing a training program.

Role of the DNP Student

Mental health is an illness that is increasing in the society (CDC, 2018). Therefore, it is crucial for healthcare providers to understand the pathophysiology, management, and treatment of factors related to or contributing to mental health. As a

professional doctoral candidate with years of experience in the healthcare, holistic and

preventive care along with traditional care are my primary focus. I had the opportunity to

work and observe how effective communication improve patient's inappropriate at a

local facility. However, I learned that these skills must be taught to individuals that are

not trained or aware how and why it is important to communicate efficiently with

individual with behavioral issues for patient's safety and quality of the facility. Quality

care is pertinent in care of the mentally ill. It is an approach that requires professional

collaboration, expertise, and understanding about why it is necessary to reach higher

standards and how to attain this goal. The DNP project aligns with the objectives for the

advanced practice nurses, which is to promote safety and quality service (American

Association of Colleges of Nursing [AACN], 2006; Lathrop et al., 2014). According to

the AACN (2006), the DNP professional is also expected to make positive changes

within the community setting. I served as the leader of the project as an educator,

facilitator, monitor and coach at the selected site while advocating for quality care adult

day care facility. The educational program had an impact on social change through

increased staff knowledge on how to manage patient issues associated with behavior and

communication, which may improve patient outcomes and family satisfaction.

Summary

The objective of this evidence-based project is to improve communication and

behavioral management skills for staff working with patients with behavioral problems in

an adult day care center. Section 2 included discussion of the concept, models, and

theories used in the DNP project and how evidence-based literature were used to develop

the staff education program content. The primary focus of this doctoral project was to improve staff–patient communication and effective behavioral management skills through education and training. Based on professional knowledge and expertise, continue education and training is necessary at the facility. Section 3 will explain the project design.

Section 3: Collection and Analysis of Evidence

Introduction

The DNP project was an education program intended to increase the staff's knowledge on communication skills and behavioral management at an adult day care center in the Southwestern United States. In Section 3, I discuss the DNP project process, design, and statistical analysis of the evidence for the project.

Practice-Focused Question

Factors such as poor communication, inadequate behavior management techniques, and lack of knowledge are concerns that can affect the patient's experience and quality of care. The practice-focused question that guided the DNP project was: Will staff education improve staff knowledge and confidence in skills to manage communication and behavior for patients at the adult day care facility? Poor communication and behavioral management skills were identified issues at the facility. The goal was to implement an educational program and address the practice problem through education on behavioral and communication techniques for patients with cognitive impairment.

Sources of Evidence

Scholarly articles are essential in education, research, and practice (Walden University, 2020). MEDLINE, CINAHL and EBSCO databases provided sources of current evidence-based literature, published within the past 5 years, appearing in peer-reviewed journals, and written in the English language. Additional sources of evidence included the Alzheimer's Association website and National Alliance on Mental Illness

(NAMI). Search terms included *adult day care*, *communication skills*, *behavioral skills*, *dementia*, *cognitive impairment*, and *quality*.

Sources of evidence that supported the project were the expert panel feedback, participant pre and post questionnaires, and the evaluation of the program form. Program questionnaires served as a knowledge assessment tool on communication and behavioral skills before and after the educational program. Results were reported using descriptive statistics method.

Panel of Experts

The staff education project was guided by the Walden DNP staff education manual. Procedural steps for the education project included review and application of the current evidence to develop the of educational content for communication and behavioral management skills when working with patients with dementia. Content was reviewed by a panel of three experts. One expert held a Doctor of Education degree, another a Doctor of Ministry, and the third expert was a chief executive officer of a mental/behavioral healthcare facility. The experts were chosen because of their years of experience with dementia care. I presented the educational PowerPoint program (see Appendix A) to the expert panel, and they provided feedback on program content and applicability to the adult daycare center.

Participants

The staff at the facility were asked to participant in the education program due to their daily interactions and management of patients. Facility staff consisted of five caregivers, one registered nurse, and the three senior administration team. The project

participation was voluntary with the staff members and administrative team being able to withdraw from program participation at any time. The pre and post survey questionnaires were provided to the director of the adult day care facility by email (see Appendix B). The preprogram survey was used to assess prior learning knowledge, analyze knowledge improvement, and to evaluate whether the staff members perceived knowledge and understanding of communication and behavioral techniques after the education program. I presented the program PowerPoint (see Appendix A) to participants virtually using the Zoom videoconferencing platform. After the program, participants completed the postprogram survey, which was identical to the preprogram survey. The surveys were emailed to me with no name requirement for anonymous feedback.

Protections

Prior to implementing the education program at the facility, I applied for and received Walden Institutional Review Board (IRB) approval for the staff educational program (Approval no. 06-14-21-0450702). The site administrator signed a site agreement providing consent for the project to be done at the adult day care facility. The signed agreement was submitted to the Walden IRB as part of the approval process. Participants verbalized understanding that the project was voluntary and that they could withdraw from the project at any time during the educational program presentation. Prior to receiving the program pre–post surveys and program content, each participant was provided a copy of the Consent for Anonymous Questionnaire found in the Walden Staff Education Manual. The staff members signed and returned the consent form prior to the educational program. According to ethical protection of the participants, survey

questionnaire data will remain anonymous. The survey questionnaire was emailed to the director at the facility to distribute a pencil and paper survey before the program to submit back by email. The questionnaire did not contain identifying information and was placed in a manila envelope before starting the program. After the program, the same procedure was completed for the postprogram survey questionnaire. De-identified data will be saved on a password protected computer accessible only to me for 5 years.

Analysis and Synthesis of Project Data

Ineffective communication and behavioral management skills are significant problems in the healthcare system (Kornhaber et al., 2016). Poor outcomes can occur without proper training and education. The doctoral project presented the staff with education on causes of ineffective communication and methods to address communication and needed behavioral management skills with patients at an adult day care facility. The data from the pre and post survey questionnaire that was developed and provided to participants before and after the educational program was analyzed to determine whether the educational program led to increase in staff knowledge about communication and managing behavioral symptoms of patients at the adult day care facility. I reviewed the data from the surveys and reported them using descriptive statistics to summarize the findings.

Summary

Education to promote staff knowledge on communication and behavioral management for patients at adult day care was the primary focus of the doctoral project. Section 3 included discussion of the sources of evidence generated, project participants,

protections, procedures, and statistical analysis. Section 4 will provide the project findings, implications, recommendations, strengths and weakness and solutions to consider in nursing practice and patient care.

Section 4: Findings and Recommendations

Introduction

Ineffective communication and behavioral management skills were a concern at the selected site. Due to the facility's COVID-19 policy, a virtual educational program was implemented through the Zoom platform. A PowerPoint presentation was presented and discussed along with questions about how to communicate with clients with inappropriate behaviors. In Section 4, I discuss the project implementation, data analysis, and recommendations.

Findings and Implications

The panel of three experts approved the PowerPoint presentation about effective communication and behavioral management skills. Each member of the expert panel verbally reported to me that they did not have any additional recommendations or changes to the project presentation. They verbalized that they felt project addressed a practice gap. Administrators at the facility provided the project site consent and included with the form a submission to the Walden IRB. The educational project was presented virtually through Zoom using a PowerPoint presentation (see Appendix A) that lasted approximately 20 minutes. Two participants completed the pre- and post surveys provided by the facility director. Pre and post survey results for the two participants are presented in Table 1. The surveys were scored based on a Likert scale ranging from 1 (*poor*) to 5 (*excellent*). Both participants rated themselves on each item as 5 (*excellent*) for both the pre and post education surveys. Whereas the administration had indicated

that there may have been a gap in knowledge, the two staff who participated rated their

level of knowledge and skills as high prior to the education being presented.

Table 3

*Participant Pre–Post Education Program Survey (*N *= 2)*

	Preprogram survey		Postprogram survey	
Questions	Participant 1	Participant 2	Participant 1	Participant 2
How would you rate your communication skills?	5	5	5	5
How would you rate your skills managing inappropriate client's behavior?	5	5	5	5
How would you rate your listening skills?	5	5	5	5
How would you rate your problem-solving skills?	5	5	5	5
How would you rate your ability to locate educational resource material to improve your communication and behavioral management skills?	5	5	5	5

Note. 5 = *excellent*; 4 = *above average*; 3 = *average*; 2 = *below average*; 1= *poor*.

Recommendations

This DNP project aims to utilize evidence-based data and the literature review to

understand why ineffective communication and behavioral management was occurring at

the facility and what effective method could be implemented to improve outcomes for

best practice. Further studies and monitoring are pertinent in adult day care facilities to

improve outcomes, achieve quality care and safety for the patient. The small sample of

the project had a significant limitation because it lacks sufficient data for collection and

analysis. The results of the questionnaire were rated as 5 across all items before and after

the educational program, which required a large sample size. A larger sample size is

recommended for future studies, accuracy, and data support (Khalilzadeh & Tasci, 2017).

Only two out of the five staff who work at the facility participated in the training due to

restrictions with the COVID-19 pandemic. The data indicate that both participants felt

they had a strong knowledge of the topic even before the presentation and post survey,

and indicated a discrepancy between the observations of the administration and the

perceptions of the staff about a gap in knowledge and skills. Further observations and

discussions with staff are recommended if administrators continue to identify this issue as

a gap in practice. Recommendations to increase the sample size would include

encouraging staff participation through motivation by offering incentives and

encouraging repeating the project after the pandemic.

Strengths and Limitations of the Project

Strengths and limitations of doctoral project suggest future opportunities for

further research and studies about effective communication and behavioral management

skills at the adult day care facility, which is needed based professional expertise,

knowledge, and outcome of the project. The approach used for analysis, which was the

strength of the project helped to understand why the problem was occurring and how to

correct it. The intervention and management plan such as the plan-do-study-act was an

effective method to address communication and behavioral management skills at the

adult day care facility because it assisted with addressing the problem, implementation,

intervention, and the follow up process. The weakness of the project was the number of

participants and size of the sample. Overall, the information was pertinent because it is a

healthcare concern that needed to be addressed according to the panel of experts.

Section 5: Dissemination Plan

Analysis of Self

The doctoral project promoted professional growth and development. It helped with comprehension and understanding about what the expectations for leaders in nursing are according to AACN DNP Essential. Three essential roles that I developed as a scholar for the doctoral profession were clinical expertise, patient's advocacy, and leadership. Communication and project managerial skills were my major strengths in conducting this project, whereas persistence was a weakness because it is important to understand when it is necessary to end a study and/or develop new ones for future research or for other scholars to build upon. However, other aspects played a role in why I was determined to make positive changes at the adult day care facility, including a desire to promote the well-being of the clients, improve standards at the facility, increase staff's knowledge, and maintain high expectations in practice according to AACN for the doctorate in nursing practice. My recommendations to administration were use of the PowerPoint presentation, survey questionnaire, and the Texas Abuse, Neglect, and Exploitation Training and Competency courses as tools to improve outcomes at the adult day care facility. Safety and quality are key concepts of the project, using technology and knowledge learned to improve communication and behavioral management skills at the adult day care facility. The process of analyzing problems and developing a plan helped with understanding the needs of the doctoral nurses' profession in the healthcare system.

Summary

Ineffective communication and behavioral management skills with the cognitive impaired are quality and safety issues that were analyzed at a local adult daycare facility. Awareness about this topic is a critical component to improve outcomes at adult daycare facilities through journal publication, mandatory educational requirements, and yearly conferences to discuss quality improvement ideas for adult daycare facilities. The educational project was implemented through a PowerPoint presentation and based on a descriptive method with a small sample size; however, further projects and studies are necessary to build upon and strengthen the power of this project. The doctoral project is relevant to the nursing practice because it will focus on improving the quality of care through staff education on patient communication and behavioral management skills at adult daycare facilities; therefore, further projects and studies are essential for practice improvement and performance.

References

Alzheimer's Association. (n.d.). *Cognitive impairment care planning tool kit*.

https://www.alz.org/careplanning/downloads/care-planning-toolkit.pdf

Alzheimer's Association. (2020a). *Alzheimer & dementia*.

https://alz.org/alzheimer_s_dementia

Alzheimer's Association. (2020b). *Guideline's index*.

https://www.alz.org/professionals/health-systems-clinicians/guidelines_index_(1)

Alzheimer's Association. (2020c). *Alzheimer's and dementia behavior management*.

https://www.helpguide.org/articles/alzheimers-dementia-aging/alzheimers-

behavior-management.htm

Alzheimer's Association. (2021a). *Mental health*.

https://www.alz.org/alzheimers-dementia/what-is-dementia

Alzheimer's Association. (2021b). *Wandering*. https://www.alz.org/help-

support/caregiving/stages-behaviors/wandering#

Alzheimer's News Today. (2020). *Alzheimer's disease statistics*.

https://alzheimersnewstoday.com/alzheimers-disease-statistics/

American Association of Colleges of Nursing. (2006). *DNP essentials*.

https://aacnnursing.org/Portals/42/Publications/DNPEssentials.pdf

American Nurses Association. (2011). *The Doctor of Nursing Practice. Advancing the

nursing profession.* https://www.nursingworld.org/practice-policy/nursing-

excellence/official-position-statements/id/doctor-of-nursing-practice-advancing-

nursing-profession/

American Nurses Association. (2012). *Expert policy analysis*.

https://nursingworld.org/practice-policy/nursing-excellence/official-position-

statements/expert-policy-analysis

Blanchard, J. J., Park, S. G., Catalano, L. T., & Bennett, M. E. (2016). Social affiliation

and negative symptoms in schizophrenia: Examining the role of behavioral skills

and subjective responding. *Schizophrenia Research*, *168*(1–2), 491–497.

https://doi.org/10.1016/j.schres.2015.07.019

Bollegale, N., Patel, K., Mosko, J. D., Bernstein, M., Brahmania, M., Louis, L. A., &

Weizman, A. V. (2016). Quality improvement primer series: the plan-do-study-

act cycle and data display. *Clinical Gastroenterology and Hepatology*, *14*(9),

1230–1233. https://doi.org/10.1016/i.cgh,2016.04.042

Brady, N. C., Bruce, S., Goldman, A., Erickson, K., Mineo, B., Ogletree, B. T., Paul, D.,

Romski, M.A., Sevcik, R., Siegel, E., Schoonover, J., Snell, M., Sylvester, L., &

Wilkinson, K. (2016). Communication services and support for individuals with

severe disabilities: Guidance for assessment and intervention. *American Journal

on Intellectual and Developmental Disabilities*, *121*(2), 121–138.

https://doi.org/10.1352/1944-7558-121.2.121

Centers for Disease Control and Prevention. (2018). *About mental health*.

https://cdc.gov/mentalhealth/learn/index.htm

Center for Improvement in Healthcare Quality. (2017). *About CIHQ*.

https://www.cihq.org/about_our_organization.asp

Dijkman, B., Reehuis, L., & Roodbol, P. (2017). Competences for working with older

    people: The development and verification of the European core competence

    framework for health and social care professional working with older people.

    Educational Gerontology, *3*(10), 483–497.

    https://doi.org/10.1080/03601277.2017.1348871

Dueñas, M., Oieda, B., Salazar, A., Mico, J. A., & Failde, I. (2016). A review of chronic

    pain impact on patients, their social environment and the health care system,

    Journal of Pain Research, *2016*(9), 457–467.

    https://doi.org/10.1177/2382120519840332

Ehrenreich, H. (2017). The impact of environment on abnormal behavior and mental

    disease. *EMBO Reports*, *18*(5), 661-665. https://doi.org/10.1525/embr.201744197

Ellen, M. E., & Wilson, M. G. (2017). Adult day center program and their associated

    outcome on client's, caregiver, and health system: a scope review. *The*

    Gerontologist, *57*(6), e85–e94. https://doi.org/10.1093/geront/gnw.165

Foley, G. N., & Gentile, J. P. (2010). Nonverbal communication in psychotherapy.

    Psychiatry (Edgmont), *7*(6), 38–44.

    https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2898840/

Gaugler, J. E. (2013). The process of adult day care service use. *Geriatric Nursing*, *35*(1),

    47–54. https://doi.org/10.1016j.gernurse.2013.10.009

Haley, B., Heo, S., Wright, P., Barona, C., Rettigonti, M. R., & Anders, M. (2017).

    Relationship among active listening, self-awareness empathy and patient centered

    care in associate and baccalaureate degree nursing student. *NursingPlus Open*,

3(2017), 11-16. https://doi.org/10.1016/j.npls.2017.05.001

Hood, K. K., Hilliard, M., Piatt, C., & Levers-Landis, C. E. (2015). Effective strategies for encouraging behavioral change in people with diabetes. *Diabetes Management*, *5*(6), 499–510. https://doi.org/10.2217/dmt.15.43

Ho, Y. Y., & Lim, W. Y. R. (2020). Educating adult learners: Bridging learners' characteristics and the learning science. In Sanger C., Gleason N. (Eds.), *Diversity and inclusion in global higher education*. Palgave Macmillan, Singapore. https://doi.org/10.1007/978-981-15-1628-3_4

Iadecola, C., Duering, M., Hachinski, U., Joutel, A., Pendlebury, S.J., Schneider, J. A., Dichgan, M. (2019). *Vascular cognitive impairment and dementia*, *73*(25). 3326–3344. https://doi.org/10.1016/j.jacc.2019.04.034

Keutchato, E. L., Kerr, J., & Jarvis, M. A. (2020). Evidence of nonverbal communication between nurse and older adults: A scoping review. *BMC Nursing*, *19*(1), Article 53. https://doi.org/10.1186/s/2912-020-00443-9

Kitchener, B. A., Jorm, A. F., & Kelly, C. M. (2017). *Mental health first aid manual* (4th ed.). Mental Health First Aid International.

Khalilzadeh, J., Tasci, A. (2017). Large sample size, significance level, and the effect size: Solutions to perils of using big data for academic research. *Tourism Management*, *62*(2017), 89–96. https://doi.org/10.1016/j.tourman.2017.03.026

Kornhaber, R., Walsh, K., Duff, J., & Walker, K. (2016). Enhancing adult therapeutic interpersonal relationship in acute healthcare. *Journal of Multidisciplinary Healthcare*, *2016*(9), 537–546. https://doi.org/10.2147/JMDH.S116957

Johnson, H., Bigby, C., Iacono, T., Douglas, J., Katthagen, S., & Bould, E. (2017).
Increasing day service staff capacity to facilitate positive relationships with
people with severe intellectual disability: Evaluation of a new intervention using
multiple baseline design. *Journal of Intellectual & Developmental Disability,
42*(4), 391–402. https://doi.org/10.3109/13668250.2016.1246636

Lathrop, B., & Hodnicki, D.R. (2014). The Affordable Care Act: Primary care of the
Doctor of Nursing Practice nurse. *The Online Journal of Issues in Nursing*, *19*(2).
https://doi.org/10.3912/OJIN.Vol98No02PPT02

Marijke van Haeften-van Dijk, A., Hattink, B., Meiland, F. M., Bakker, T., & Droes, R.
M. (2017). Is socially integrated community day car for people with dementia
associated with higher user satisfaction and a higher job satisfaction of staff
compared to nursing home-based day care. *Aging & Mental Health, 21*(6), 624–
633. https://doi.org/10.1080/13607863,2016.1144710

Milford, C. E., & Ferris, T. G. (2012). A modified "golden rule" for health care
organization. *Mayo Clinic Proceedings*, *87*(8), 717–720.
https://doi.org/1016i.mayocp.2012.05.009

Mosadeghrad, A. M. (2014). Factors influencing healthcare service quality. *International
Journal of Health Policy and Management*, *3*(2), 77–89.
https://doi.org/10.15171/ijhpm.2014.65

Mucci, N., Giorgi, G., Ceratti, S. D.P., Fiz-Perez, J., Mucci, F., & Arcangeli, G. (2016).
Anxiety, stress-related factors, and blood pressure in young adult. *Frontier in
Psychology*, *7*. https://doi.org/10.33891/fpsyg.2016.01682

Mukhalalati, B. A., & Taylor, A. (2017). Adult learning theories in context: A quick

 guide for healthcare professional education. *Journal of Medical Education, 10*(6),

 1–10. https://doi.org/10.1177/2382120519840332

National Alliance on Mental Illness. (2021). *Mental health conditions*.

 https://www.nami.org/learn-more/mental-health-conditions

National Institute on Aging. (2021). Alzheimer's caregiving: coping with agitation &

 aggression in Alzheimer disease. https://www.nia.nih.govhealth/coping-agitation-

 and-aggression-alzheimers-disease

Nogales-Gonzalez, C., Losada-Baltar, A., Marquez-Gonzalez, M., & Zarit, S. H. (2014).

 Behavioral intervention for reducing resistance in care recipients to attending

 adult day care center: A pilot study. *Clinical Gerontologist: The Journal of Aging*

 and Mental Health, 37(5), 493–505. https://doi:10.1080107317115.2014.907592

Norouzinia, R., Aghabarri, M., Shiri, M., Karimi, M., & Samami, E. (2016).

 Communication barriers perceived by nurses and patients. *Global Journal of*

 Health Science, *8*(6), 65-74. https://doi:10.5539/gihs.v8n6p65

Palis, A. G., & Quires, P. A. (2014). Adult learning principles and presentation pearls.

 Middle East African Journal of Ophthalmology, *21*(2), 114–122.

 https://doi:10.410310974.9233.129748

Palmer, A.D., Newsom, J.T., & Rook, K.S. (2018). How does difficulty communicating

 affect the social relationships of older adults: An exploration using data from a

 national survey? *Journal of Common Disorders*, *62*, 131–146. https://doi:

 10.1016/j.jcomcomdis.2016.06.002

Petersen, R., Lopez, O., Armstrong, M.J., Getchiud, T., Gangali, D., Gloss, D., Gronseth,

G., Marson, D., Pringsheim, T., Day, G., Sager, M., Stern, J., Rae-Grant, A.

(2017). Practice guideline update summarizing mild cognitive impairment.

Neurology, 90(3), 126–135. https://doi: 10.1212/WNL.0000000000004826

Polit, D. F., & Beck, C. T. (2017). *Nursing research. Generating and assessing evidence*

for nursing practice (10th Ed.). Wolter Kluwer.

Reed, J. E., & Card, A. J. (2016). The problem with plan-do-study-act cycles. *BMJ*

Quality & Safety, 25(3), 147–152. https://doi:10.1136/bmigs-2015-005076

Santilli, J., & Vogenberg, F. R. (2015). Key strategic trends that impact healthcare

decision-making and stakeholder roles in the new marketplace. *American Health*

& Drug Benefits, 8(1), 15–20. https://ncbi.nim.nih.gov/pmc/articles/PMC4415172

Seddigh, R., Azamik, S., Memaryan, N., & Hadi, F. (2020). Spirituality as sociocultural

determinant of health in the context of medical curriculum: A call for action.

Medical Journal of the Islamic Republic of Iran, *34*(6),

https://doi.org/10.34171/mijiri.34.6

Spies, C., Seale, I., & Botma, Y. (2015). Adult learning: What a nurse educator needs to

know about mature students. *Curationis*, *38*(2), 1494.

https://doi:10.4102/curationis.v38i2

Sprangers, S., Dijkstra, K., & Romijn-Luijten, A. (2015). Communication skills training

in a nursing home: Effects of a brief intervention on residents and nursing aides.

Clinical Interventions in Aging, *2015*(10), 311–319.

https://doi:10.2147?CIA.S73053

Stans, S. E.A., Dalemans, R.J.P., de Witte, L.P., Smeets, H.W.H., & Beurskens, A.J.

(2016). The role of the physical environment in conversations between people

who are communication vulnerable and healthcare professional: A scope review.

Journal of Disability and Rehabilitations, 39(25).

https://doi:10.1080/09638288.2016.1239769

Stone, T. E. (2010). Swearing: its prevalence in healthcare setting & impact on nursing

practice. Psychiatric & Mental Health Nursing, 17(6).

https://doi.org/10.1111/j.1365-2850.2010.01.554.x

Sturm, A. S., Trinkley, K. E., Porter, K., & Nahata, M. C. (2018). Efficacy and safety of

atypical antipsychotics for behavioral symptoms of dementia among patients

residing in long-term care. *International Journal of Clinical Pharmacy*, *40*(1),

135–142. https://doi.org/10.1007/s11096-017-0555-y

Thibaut, B., Dewa, L.H., Ramtale, S.C., D'Lima, D., Adam, D., Ashrafian, H., Darzi, A.,

Archer., S. (2019). Patient safety in inpatient mental health setting: asystematic

reviewed. Journal of BMJ Open, 9(12).

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7008434/

Topal, Z., Samurcu, N. D., Taskiran, S., Tufan, A.E., & Semerci, B. (2018). Social

communication disorder: A narrative review on current insights. *Neuropsychiatric

Disease and Treatment*, 2018(14), 2039–2046.

https://doi.org/10.2147/ndt.s121124

Tougas, M.E., Hayden, J.A., McGrath, P.J., Huquet, A., Rozario, S. (2015). Asystematic

review exploring the social cognitive theory of self-regulation as a framework for

chronic health conditions interventions. PLOS ONE, 10(8), e0134977.

https://doi.org/10.1371/journal.pone.0134077

Tretteteig, S., Vatne, S., & Rokstad, A. M.M. (2017). The influence of day care centras

designed for people with dementia on family caregiver-a qualitative study. *BMC*

Geriatric, 17(5). https://doi. 10.1186/s12877-016-0403-2

Vaismoradi, M., Tella, S., Logan, P. A., Khakurel, J., & Vizcaya-Moreno, F. (2020).

Nurses' adherences to patient safety principles: a systematic review. *International*

Journal of Environmental Research and Public Health, 17(6), 2028. https:// doi:

10.3390/ijerph17062028

Walden University. (2020). *Google scholar.*

https://academicguides.waldenu.edu/library/googlescholar

Zamanzadeh, M. J., Valizadeh, l., Keogh, B., & Taleghani, F. (2015). Effective factors in

providing holistic care: a qualitative study. *Indian Journal of Palliative Care*,

21(2), 214–224. https://www.ncbi.nlm.gov/pmc/articles/PMC4441185/

Zarit, S. H., Kim, K., Femia, E. E., Almeida, D. M., Savia, J., & Molenaar, P. C. (2011).

Effects of adult day care on daily stress of caregiver: A within person-approach.

The Journal of Gerontology, *66*(5), 538–546. https://doi:10.1003/geronb/g

Appendix A: PowerPoint Presentation

Educational Program: Effective Communication and Behavioral Management Skills

The Zoom invite and the Educational PowerPoint point presentation is below:

Kathy Davis is inviting you to a scheduled Zoom meeting.

Topic: Kathy Davis' Zoom Meeting: Staff Education: improving Communication and Behavioral
Management Skills
Time: Jul 12, 2021 11:00 AM Central Time (US and Canada)

Join Zoom Meeting
https://us05web.zoom.us/j/4631439818?pwd=TmgxdlNxbCtvTGl2WVVPaXpvU3FGUT09

Meeting ID: 463 143 9818
Passcode: U4cPRC

Educational Program:

**Effective Communication
&
Behavioral Management Skills**

Kathy Davis: DNP Capstone Project
Developed Spring 2021

WALDEN UNIVERSITY
A higher degree. A higher purpose

Educational Program Agenda

I. Communication Skills
II. Communication Techniques
III. Behavioral Management Skills
IV. Behavioral Management Techniques
V. Internal and External Factors to Consider
VI. Summary

Practice Problem

Ineffective communication and behavioral management skills is a quality and safety issue that was observed by the administration team at the selected facility. The educational program will focus on improving staff interaction though education, training, and virtual learning.

Project Purpose

The purpose of the project is to educate the staff on how and

why communication and behavioral management skills are important

at the facility. The project will take place at a local adult care center

and includes 5 to 8 participants.

Practice-Focused Question

The **Practice-Focused Question** for the doctoral project is the

following: Will an education program improve staff knowledge and

confidence in skills to manage communication and behavior for

patients at the Adult Day Care facility

Communication & Behavioral Management Skills

HOW?

• Listening

• Speak Clearly

• Eye Contact

• Nonjudgmental

• Observe verbal & nonverbal communication

WHY?

• Safety

• Quality

• Organization perception

• Family, patient, and stakeholder satisfaction

WALDEN UNIVERSITY
A higher degree. A higher purpose

Statistical Data

Mental health such as dementia is a significant problem in the healthcare system, which is increasing in the aging population.   Approximately, 50 million individuals are diagnosed with dementia globally based on World Health Organization's statistics. According to the Alzheimer's News Today (2020), there are approximately 5.5 million individuals in the Unites States that have Alzheimer.
https://www.who.int/news-room/fact-sheets/detail/dementia#:~:text=Worldwide%2C%20around%2050%20million%20people,60%E2%80%9370%25%20of%20cases
https://alzheimersnewstoday.com/alzheimers-disease-statistics/#:~:text=In%20the%20U.S.%2C%20an%20estimated,have%20early%2Donset%20Alzheimer's%20disease.

WALDEN UNIVERSITY
A higher degree. A higher purpose

Types of Inappropriate Behaviors

Agitation
Outburst
Wandering or roaming
Aggression
Temper Tantrum
Resistance to follow commands
Swearing

Quality Improvement (QI) Solution

- Prevention
- Effective Communication Training
- Behavioral Management Skills Training
- Team meeting or Team Huddle
- Education

I. Communication Skills

Poor communication in an adult day care setting can

impact the patient, delivery of care, and quality of the facility.

It is necessary to communicate effectively with the patient for

patient's safety and improve the quality of care

WALDEN UNIVERSITY
A higher degree. A higher purpose

II. Communication Techniques

- **Speak clearly** to the patient by talking in a low tone in complete sentences.
- **Maintain eye contact** by staying focused and attentive to the patient's needs while talking.
- **Active listening skills** by paying attention to what the client is saying, respond and communicate appropriately.
- **Be attentive and nonjudgmental** by addressing concerns, being observant and without bias.

WALDEN UNIVERSITY
A higher degree. A higher purpose

III. Behavioral Management Skills

Poor behavioral management skills in an adult day care facility can have an impact on patient care, perception and outcomes at the facility. Ineffective behavioral management skills can have a significant impact on safety and the quality of care in the healthcare organization.

WALDEN UNIVERSITY
A higher degree. A higher purpose

IV. Behavioral Management Techniques

Behavior	Intervention	Outcome
Agitation	Reassurance and find the trigger, quiet time. Maintain basic routine and ADL's if possible Redirect by offering alternative such as reactional activity Talk to patient privately, if possible, to maintain dignity	Client will be calm Patient and staff safety maintain Mental health maintained
Swearing	Listen to patient, observe own body language such as crossing arms or placing arms on hip Examine own behavior and communication skills before responding to avoid escalation, Address needs	Patient and staff safety maintained Needs are met
Wandering	Find the cause of wandering, Assess for needs water, food, toilet, Redirect or offer chair or safe place to sit Use alarm on doors	Safety maintained Patient's needs met

WALDEN UNIVERSITY
A higher degree. A higher purpose

V. Other Internal and External Factors to Consider

- **Emotional such as anxiety.** It is important to calm the client, keep safe, find the cause, listen effectively, professional evaluation if necessary (Mucci, 2016)
- **Environment such as too hot or cold.** Check the surroundings, check the room temperature, check for unpleasant smells, substance or sounds (Stans & et al., 2016; Ehrenreich,2017)
- **Social skills such loneliness.-**Group therapy, team building, buddy system (Topal & et al., 2018; Palmer, Newsom, & Rook, 2016)
- **Spiritual needs such depression or hopelessness-**Group therapy, prayer if appropriate, religious leader referral, if necessary, support group (Isaac, Hay, & Lubetkins, 2016; Koeing, 2012).

*Basic interventions that can be initiated by the staff members.

Summary

Consider the following intervention:

Weekly team meeting or a post huddle to evaluate the patient outcomes, answering the following

questions:
What was the cause or trigger that cause the problem?
Was the problem eliminated?
Was safety maintained?
Was leadership informed?
How would you address the situation more effectively?

The evaluation process is ongoing for the safety, quality, and higher standard of care.

Resources

Other educational resources that are available for the staff member learning are the

Mental Health First Aid and Texas Abuse, Neglect, and Exploitation Training and Competency

courses to improve communication and behavioral management skills with the cognitive impaired.

<u>Resources Websites</u>:

https://www.mentalhealthfirstaid.org/

https://hhs.texas.gov/laws-regulations/handbooks/dbmd/appendices/appendix-xi-abuse-neglect-exploitation-training-competency-test

<u>WALDEN UNIVERSITY</u>
A higher degree. A higher purpose

References

Blanchard, J. J., Park, S. G., Catalano, L.T., & Bennett, M.E.(2016). Social affiliation and

    negative symptoms in schizophrenia: Examining the role of behavioral skills and

    subjective responding. *Schizophrenia Research*, 168(0), 491-497.

    https://doi.org/10.1016/j.schres.2015.07.019

Brady, N. C., Bruce, S., Goldman, A., Erickson, K., Mineo, B., Ogletree, B. T., Paul, D.,

    Romski, M.A., Sevcik, R., Siegel, E., Schoonover, J., Snell, M., Sylvester, L., Wilkinson,

    K.(2016). Communication services and support for individuals with severe disabilities:

    Guidance for assessment and intervention. *American Journal on Intellectual and*

    Developmental Disabilities, 121(2), 121-138. https://doi.org/10.1352/1944-7558-121.2.121

<u>WALDEN UNIVERSITY</u>
A higher degree. A higher purpose

References

Ehrenreich, H. (2017). The impact of environment on abnormal behavior and mental disease. *EMBO Reports*, 18(5), 661-665. https://doi.org/10.1525/embr.201744197

Isaac, K.S., Hay, J.L., & Lubetkin , E.J.(2016). Incorporating spirituality in primary care. *Journal of Religion and Health*, 55(3),1065-1077. https://doi.10.1007/s10943-016-0190-2

Koeinig, H. G.(2012). Religion, spirituality, and health: The research and clinical implications. ISRN Psychiatry, 12(16). https://doi.org/10.5402/2012/278730

Mucci, N., Giorgi, G., Ceratti, S. D.P., Fiz-Perez, J., Mucci, F., & Arcangeli, G.(2016). Anxiety, stress-related factors, and blood pressure in young adult. *Frontier in Psychology* (28). https://doi.org/10.33891/fpsyg.2016.01682

References

Palmer, A.D., Newsom, J.T., & Rook, K.S.(2018). How does difficulty communicating affect the social relationships of older adults: An exploration using data from a national survey? *Journal of Common Disorders*, 62, 131-146. https://doi:10.1016/j.jcomcomdis.2016.06.002

Polit, D. F., & Beck, C. T. (2017). *Nursing research. Generating and assessing evidence f or nursing practice* (10th Edition) Philadelphia, PA: Wolter Kluwer

Stans, S. E.A., Dalemans, R.J.P., de Witte, L.P., Smeets, H.W.H., & Beurskens, A.J. (2016). The role of the physical environment in conversations between people who are communication vulnerable and healthcare professional: A scope review. *Journal of Disability and Rehabilitations*, 39(25). https://doi:10.1080/09638288.2016.1239769

Topal, Z., Samurcu, N. D., Taskiran, S., Tufan, A.E., & Semerci, B.(2018). Social communication disorder: A narrative review on current insights. *Neuropsychiatric Disease and Treatment*, 2018(14), 2039-2046. https://doi.org/10.2147/ndt.s121124

Appendix B: Participant Pre–Post Education Program Survey

_____

Please answer the following survey

Questions	5 = Excellent, 4 = Above Average, 3 = Average, 2 = Below Average, 1 = Poor				
Rate Excellent to Poor	**Excellent** **5**	**Above Average** **4**	**Average** **3**	**Below Average** **2**	**Poor** **1**
How would you rate your communication skills?					
How would you rate your skills managing inappropriate client's behavior?					
How would you rate your listening skills?					
How would you rate your problem-solving skills?					
How would you rate your ability to locate educational resource material to improve your communication and behavioral management skills?					