



Incorporating environment enrichment strategies to assist in the management of behavioural and psychological symptoms of dementia (BPSD).

Background: There is limited evidence into the management of BPSD in subacute care.

Aim: To understand the prevalence and management of BPSD in a secure, dementia specific, subacute ward.

Method:

- (1) Literature review completed to identify key interventions.
- (2) Retrospective audit of code grey incidence
- (3) Structured staff survey regarding their perceptions of the current environment.
- (4) Data analysed descriptively.
- (5) Recommendations made to enhance the ward environment and minimise BPSD.

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Results: Between May and October 2018, there was an average of 16.5 code greys on the ward per month. The most common time of day for a code to be called is between 9.00am - 12.00pm, with 50% more code greys occurring in this time period than any other. 79% of code greys occur in patient rooms.

94% of staff working on this ward feel the ward environment is not well set up to meet the needs of the patients and feel exacerbation of patient behaviours are directly related to the physical environment.

Thirty-one studies were included in this literature review. Of these the researchers selected four interventions that demonstrated highest positive outcomes in the management of BPSD:

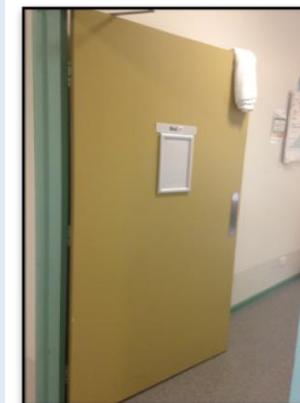
- creating more home-like environments
- increasing the presence of environmental cues and signage
- aromatherapy
- ambient music

Conclusion:

Majority of staff perceive the dementia specific subacute ward to negatively impact on patient behaviours and there is a high incidence of code grey's. The implementation of environment enrichment strategies has been recommended and the impact of this on patient and staff outcomes will be evaluated following a six month implementation period.



The Royal
Melbourne Hospital



Before: bedroom door



After: bedroom door



After: exit door



After: patient lounge
(previously store room)