

Talking Mats in interim care and long stay hospital settings

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Introduction

There is a danger that patients with dementia may be progressively disempowered and their rights and choices restricted if staff have difficulty communicating with them.^{1,2,3}

Talking Mats has been shown to help people with dementia express their views.⁴

Aims

- Train staff to use Talking Mats in an acute setting for older people
- Explore staff views on the value of using Talking Mats
- Consider its applicability to better informing the completion of nursing documentation, care planning, and the provision of recreational activity available on the ward

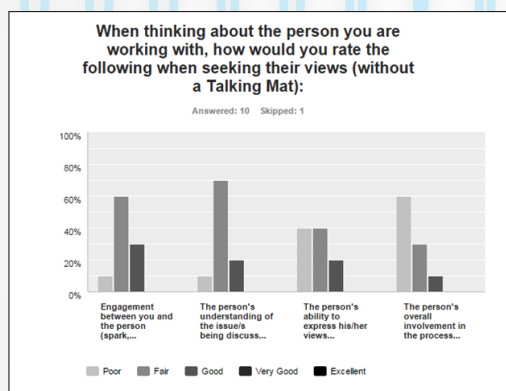
Methods

- Talking Mats training was delivered over two days approximately 4 months apart to 12 staff
- It included a pre and post course evaluation to examine the impact of the training on practice
- The training provided materials, practical sessions and discussion on how Talking Mats changed work practice

Outcomes

- Staff were engaged and enthusiastic at both training sessions.
- They provided in-depth quality examples of conversations with patients which in many situations altered the care response aligning this to patient preferences.
- Talking Mats helped staff to include patients who normally are marginalised and provided evidence of change from the staff's perspective.

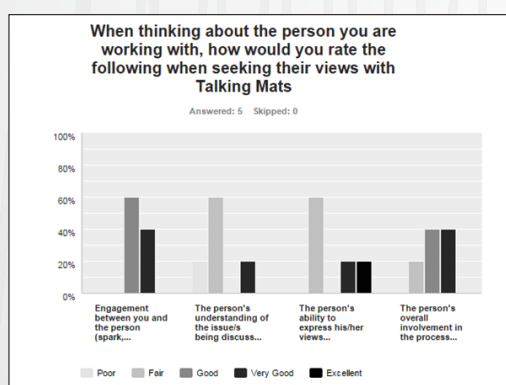
Pre training survey results



"Patient became frustrated at inability to express her views"

- Staff identified that there was scope to improve the quality of their interaction and communication with the people they worked with

Post training survey results



"It has shown the person behind the dementia and shown how her memory is still there for many things. She was able to talk about what she liked doing in the past and voice her opinion even now on certain topics e.g. religion and the TV. We found out she does not like games or puzzles so I think we can stop encouraging her to take part in these types of activities."

- Participants felt the conversations they had were more effective in all four areas when using Talking Mats than without. In particular engagement and the person's overall involvement in the process was greatly improved.

We were both satisfied with the result and I could see that, albeit a little confused at the beginning, the patient was soon enjoying the discussion

I am able to understand why the patient appeared so withdrawn - it's due to noise, food a strange place.

I have a better understanding of the patient's likes and dislikes and can share this amongst staff.

Conclusions

- Training was well received and staff were engaged, thoughtful and enthusiastic.
- Training supported staff to change their style of interaction with long term patients with dementia.
- Talking Mats enable staff to provide a more person-centred and individualised approach to care provision in the wards.
- Talking Mats enabled staff to involve patients in the planning of their care more effectively
- Care responses altered and quality of life for people with dementia improved
- Staff confidence increased and motivation to continue using the tool was evident.

References

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