

Dementia-friendly hospitals

Read about DDRC's research projects on dementia-friendly hospitals.

Developing Dementia-Friendly hospitals in Denmark

With the aim of developing concepts for dementia-friendly hospital care in a Danish setting, we refined and tested a range of interventions within a two-year period.

Four study-sites at three hospitals were assigned to the intervention: a geriatric ward, a neurological ward and two acute wards. To improve patient safety and comfort during the hospital stay, the intervention focused on three aspects; a) education and training, b) organization of workflow and care pathways and c) environmental factors. We focused on initiatives possible to implement without or with only little additional costs.

The interventions provided valuable knowledge regarding key aspects important for developing dementia-friendly hospitals. The evaluation revealed that dementia-friendly initiatives were considered needed and well accepted among management, staff and relatives.

The following factors were found to be important in a successful delivery of dementia-friendly initiatives: 1) a multifocal approach where a shared understanding of patients with dementia works as a base for staff to improve organizational design and environmental factors, 2) a multidisciplinary approach including staff and management on all levels, 3) a shared focus on collaboration across wards in patient pathways from admission to discharge.

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Volunteers with dementia training in hospitals

Volunteers with specific dementia training can assist people with dementia in several situations during hospitalization. They can provide additional support for activities, which complement those of paid staff without being a substitute for them.

With the aim of gathering knowledge about the use of volunteers with dementia training in Danish hospitals, we assigned eight hospitals to an intervention in 2019. During the next four years the hospitals provides dementia training to their volunteers and integrate volunteers in activities at the hospital wards. Activities can include a range of tasks, including playing games, listening to music, having conversations and to accompany the patients for examinations.

The evaluation will include repeatedly registration of the activities such as number of volunteers, availability of volunteers etc. Post intervention interviews and questionnaires to volunteers and interviews with staff, patients and relatives will also be conducted.

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Latest update: 10. December 2020