



# Research into practice: volunteers improving person centred dementia care in a rural hospital



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The study aimed to establish and train a group of volunteers in a person centred care approach to supporting people with cognitive impairment and compare outcomes with a control hospital which did not have volunteers.

A prospective cohort study design was used. The dementia delirium hospital volunteer program intervention was established and implemented at Bega Hospital (Intervention), a 63 bed rural acute hospital. Patient and staff outcomes were compared simultaneously at Moruya Hospital (control) a 59 bed rural acute hospital which did not have the volunteer program. The outcomes of (n=64) patient participants who received the volunteer intervention over six months at Bega Hospital were analysed and compared to a control group of (n=52) participants at Moruya. Additional measures compared staff and volunteer dementia and delirium knowledge and attitudes to people with dementia and post program perception of the program by staff and volunteers at the intervention hospital.

- The dementia delirium hospital volunteer intervention was successfully introduced and maintained for the six month period of the study at the intervention facility.
- There was high acceptability of the volunteer intervention by both nursing staff and volunteers, both of whom perceived positive patient outcomes especially related to hydration and nutrition and improved patient safety and emotional care. There was strong agreement by both staff and volunteers that the program was worthwhile and should continue. The program has continued in the intervention facility.
- The patient sample groups were matched in age, diagnosis of delirium, presence of delirium risk and SMMSE cognition scores. The Intervention facility had significantly more females and patients with a diagnosis of dementia, where as the control facility had significantly more patients who had SMMSE cognition screens and the presence of identified cognitive impairment. Patients with a diagnosis of delirium occurred in 48-50% of the patient groups.
- No significant difference was found over the six months in length of stay, falls, use of antipsychotic medication or death rates with some limitations to findings on patient outcomes as intervention and control were not matched on all demographic variables.
- There was no difference in pre and post staff or volunteer dementia knowledge, attitude, or their difficulty or stress in dealing with patients with dementia or delirium. However there are limitations in these results due to survey sensitivity and small sample size resulting from low pre and post matched response rates.

The person centred care volunteer program model can improve the emotional security, support and quality of care for patients with cognitive impairment. The model in this study is replicable with minimal resources and is particularly suited to rural settings. Further studies examining the impact of this model on patient outcomes related to hydration and nutrition as well and effect on resolution of delirium, measures for emotional wellbeing of patients and carers and a cost analysis are recommended.

*For the full report on this project visit our website, follow the link to the Rural Research Capacity Building Program and click on 'view completed projects'*

Cath is a Registered Nurse with over 30 years of nursing experience and a passion for improving aged and dementia care. Since August 2007, Cath has worked in the position of Dementia Delirium (Acute) Clinical Nurse Consultant with Greater Southern Area Health Service and is completing her Research Masters studies.



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