



Coming to grips with challenging behaviour: A cluster randomised controlled trial on the effects of a new care programme for challenging behaviour on burnout, job satisfaction and job demands of care staff on dementia special care units



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ABSTRACT

Background: Caring for people with dementia in dementia special care units is a demanding job. Challenging behaviour is one of the factors influencing the job satisfaction and burnout of care staff. A care programme for the challenging behaviour of nursing home residents with dementia might, next to diminishing the challenging behaviour of residents, improve job satisfaction and reduce the care staff's feelings of burnout.

Objectives: To determine the effects of a care programme for the challenging behaviour of nursing home residents with dementia on the burnout, job satisfaction and job demands of care staff.

Design: The care programme was implemented according to a stepped wedge design in which care units were randomly divided over five groups with different time points of starting with implementation.

Setting: 17 Dutch dementia special care units.

Participants: Care staff members of the 17 units.

Intervention: The care programme consists of an education package and of various structured assessment tools that guide professionals through the multidisciplinary detection, analysis, treatment and evaluation of treatment of challenging behaviour.

Methods: Burnout, job satisfaction and job demands were measured before implementation, halfway through the implementation process and after all the care units had

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implemented the care programme. Burnout was measured with the Dutch version of the Maslach burnout inventory (UBOS-C, three subscales); job satisfaction and job demands were measured with subscales of the Leiden Quality of Work Questionnaire. Mixed model analyses were used to determine effects. Care staff could not be blinded for the intervention.

Results: Of the 1441 questionnaires, 645 were returned (response 45%, 318 control measurements, 327 intervention measurements) by 380 unique care staff members. Significant effects were found on job satisfaction (0.93, 95% CI 0.48–1.38). On the other outcomes, no significant changes in the scores were found.

Conclusion: Positive effects of using the Grip on Challenging behaviour care programme were found on job satisfaction, without an increase in job demands.

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What is already known about the topic?

- Caring for people with dementia is a demanding job.
- Job satisfaction of care staff is, amongst other things, influenced by challenging behaviour of residents.

What this paper adds

- The introduction of a care programme that provides the multidisciplinary team with education and tools to structure the process of detecting, analysing, treatment and evaluation of treatment of challenging behaviour.
- By using the care programme, job satisfaction of care staff can be improved without increasing job demands.

1. Background

Working in long-term care facilities for people with dementia is a demanding job due to work environment related factors such as caring climate, understaffing and time pressure (Lapane and Hughes, 2007; Edvardsson et al., 2009), but also because of resident related factors such as challenging behaviour (Schmidt et al., 2012; Isaksson, 2013).

To support care workers in their daily tasks, several guidelines and protocols have been developed on various topics. In case of challenging behaviour in dementia, multiple guidelines are available, for example from the National Institute for Health and Care Excellence (NICE, 2006), the International Psychogeriatric Association (IPA, 2012) and the American Medical Directors Association (AMDA, 2012). Yet, the use of and adherence to the guidelines in actual practice seems to be low (Dorland et al., 2007), and the prevalence rates of challenging behaviour and the use of psychoactive medication are still high (Chen et al., 2010; Wetzels et al., 2011; Bergh et al., 2012; Gellad et al., 2012).

The complexity of the guidelines is often a barrier to implementation. Especially with multidisciplinary guidelines, it is important to develop recommendations that are understandable and usable for health care professionals with different educational backgrounds. Involving the end-users of the guidelines in the development, using different implementation strategies and attuning implementation to the local organisational structure could facilitate the

implementation process (Ploeg et al., 2007; Francke et al., 2008).

The Grip on Challenging Behaviour care programme (GRIP) is a newly developed care programme that is based on the current evidence-based guidelines and integrates the use of guidelines within the organisational structure and processes of daily nursing home care (Zwijsen et al., 2014). In developing GRIP, representatives of all involved disciplines (care staff, psychologists, physicians) were consulted. GRIP contains education, multidisciplinary consultation and guidance by means of several structured forms, each of which are adapted to the education levels of the different users. The education sessions are aimed at improving staff knowledge and the use of the structured forms enlarges the insight into the actions undertaken by each discipline, which can improve support amongst different disciplines. In addition, the clear description of the procedures and the availability of various tools to structure the process of managing challenging behaviour can improve feelings of control over the situation.

Using GRIP could potentially lead to a reduction of burnout, because staff knowledge, feelings of control and feelings of support are important factors in developing burnout (Johnson and Hall, 1988; Edvardsson et al., 2009; Willemsen et al., 2012a). Burnout can be predicted by the combination of feelings of personal accomplishment, emotional exhaustion and depersonalisation regarding residents (Maslach et al., 1996). The content of GRIP might influence these predictors by increasing feelings of personal accomplishment (because of the increased knowledge and feelings of control) decreasing emotional exhaustion (because of increased responsibilities) and decreasing depersonalisation (because analysing behaviour requires more involvement in the lives of residents). Next to this, while the implementation of GRIP could (temporarily) increase job demands, the feelings of control and support could improve job satisfaction (Choi et al., 2012).

As a result of the rapidly ageing society and the increasing complexity of care, the appeal on care staff will probably increase immensely during the next decades. It is, therefore, of the utmost importance to develop ways in which job satisfaction can be improved and burnout can be minimised. As described above, it is possible that GRIP increases job demands, but it might also have a positive

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