

The Gerontological Nursing Demonstration Project

Keywords:

Practice development, evidence based practice, gerontological nursing, action research, user participation

Duration of project:

October 2000 - October 2005 (The Foundation of Nursing Studies supported the project for 3 years from 2001-2004)

Project team:

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Summary of project

This is a longitudinal action research project to develop an evidence based approach to promoting best practice in gerontological nursing in Scotland. Over the five years, the project has benefited from support by a number of sponsors including the Foundation of Nursing Studies (FoNS). The project spans four action cycles of work. Firstly, a group of 30 nurses working with older people formed an internet based learning community. The group agreed a development agenda and principles to underpin their practice. Secondly, two best practice statements were collaboratively developed and tested. Thirdly, the practice development process was studied in depth in order to produce a conceptual framework and fourthly, a complementary model involving older people was developed with the aim of producing care guidance for users as a companion to the best practice statements developed by nurses.

Background

Shortcomings in the care of older people have been highlighted by voluntary and statutory monitoring bodies (HAS, 1998; Davies et al, 1999; CRAG, 2001). The development of nursing in the care of older people is therefore an important area for evidence based practice development. In view of the challenges associated with developing and changing practice, the Strategy for Nursing and Midwifery in Scotland (SEHD, 2001) called for networking approaches to promote best practices and achieve evidence based practice. The inclusion of service users' voices in quality improvement efforts and in setting standards for health and social care has become a key policy initiative across the UK (Health Advisory Service, 1997; Welsh Assembly Government, 2003; NHS Scotland, 2003). These policies were the driver for action cycle four.

Aims and objectives of the project

The overall aims of the project were:

- To promote the principles and practice of gerontological nursing within Scotland
- To facilitate access to and achievement of evidence based practice
- To facilitate professional networking and encourage practice development in the care of older people

Within these aims, the following objectives were identified:

- To construct a virtual practice development college and agree a practice development agenda
- To agree a set of principles to underpin the practice of gerontological nursing
- To develop evidence based best practice statements that are achievable in practice
- To pioneer a practice development model that leads to successful implementation of the best practice statements
- To involve older people

Methods

The project team at the university consisting of researchers from nursing, social work and computing were guided by a steering group which met every 3 months. Ethical approval for the work was given by the



University Ethics Committee. Although the work is presented in discrete cycles there was overlap from cycles two to four.

Action research cycle one

A practice development college in the form of an internet based e-learning system was tested and refined, in order to meet the project requirements for a public and private virtual space where project participants could meet, discuss and locate practice development resources. Nurses working with older people were recruited from all parts of Scotland to form the initial core group of project participants. The group was encouraged to work as a community of practice (Wenger et al, 2002) by sharing skills and resources in order to work together on an agreed task. The first task for the group was to discuss and agree a definition and principles of gerontological nursing to underpin the work of the project.

Action research cycle two

A procedure for developing a best practice statement was devised and piloted in the following way. A dietician who had previously worked as a registered nurse was recruited to act as expert advisor for the first best practice statement - Nutrition for Physically Frail Older People (Nursing & Midwifery Practice Development Unit, 2002). Her role was to review the research evidence that would inform the content of the best practice statement. The role of the core group of nurses was to ensure that best practice reflected the agreed principles of gerontological nursing, and that care suggested by the research evidence was achievable in every day practice. During this time, communication between the nurses and the project team was a mix of face to face and on-line meetings. A novel aspect of the project was that of testing the developing best practice statement in a designated demonstration site. A consultant nurse leading a small project team in a community hospital was selected for this implementation phase of the project. Feedback provided by the core group of nurses, demonstration site, steering group and a final wide consultation exercise was used to change and modify the statement during its development. The procedure for developing the best practice statement outlined above was then tested with the development of a second best practice statement on the prevention and early detection of depression.

Action research cycle three

This entailed the formulation of a comprehensive conceptual model to articulate the development of best practice as described in this demonstration project. Telephone interviews with willing nurses who had been part of the core group were carried out by an independent research assistant. Interviews were designed to explore and describe nurses' experiences of working within the virtual college and the extent to which their involvement in the project had influenced local practice (Tolson et al, 2005). Findings were combined with those from an analysis of online archives from the private internet site and field notes from face to face sessions, in order to inform the theory development.

Action research cycle four

Involving users was achieved in a small way early on in the project, by asking representative organisations and older people themselves what they thought about issues to do with the best practice statement topics; this fell far short however, of involving people in a participatory way. In a complimentary project using case study methodology, twenty two older people were recruited to develop companion care guides. The older people were prepared and supported for full participation by project team computer professionals. This involved learning how to send e-mails, use the internet and take part in an online discussion forum. Working from their own life experiences, newspaper articles and TV programmes, the older participants and project team members worked together face to face and online to develop companion care guides for service users.

Outcomes

For nurses

Nurses who took part in the telephone interviews compared the experience of working towards achieving best practice to a journey in which their travel was facilitated by five factors (Tolson et al, 2005). The initial three factors laid the foundations for those to follow. The factors were:

- 1. Nurses derived benefit from being a member of a dedicated community of practice whereby they could support each other. This was important for building confidence
- 2. Nurses began to understand best practice as a combination of traditional research evidence and the art of the achievable in their respective practice areas
- 3. The valuable sharing of knowledge and expertise and developing practice with like-minded professional colleagues
- 4. A fresh ability to articulate their role as gerontological nurses
- 5. Resources for practice development which included the community of practice and virtual college, and the collective process of developing and testing the best practice statements

These combined factors maintained the nurses' interest and motivation in the project.

As the project progressed, a second community of practice of nurses working in care homes was recruited to work alongside the inaugural core group. Other groups have since been recruited for a specific purpose, for example to develop a best practice statement on



communicating with people who have a hearing disability. To date a total of one hundred and twenty nurses and eight demonstration sites have taken part in this project.

The core group elected to produce their own definition of gerontological nursing which captured their thinking on the nurse's role in working with an older person and their family. Ten principles of gerontological nursing were developed, and although modified slightly over the course of the project, they continue to underpin the work of the project (Kelly et al, 2005).

Two best practice statements were produced during the evolutionary phase of the project and three others, on oral health, physical activity and communication in hearing disability have followed. Full titles are given in Table 1.

Table 1

Best Practice Statement	Publication
	Date
Nutrition for physically frail older people (Nursing & Midwifery Practice Development Unit)	2002
Working with older people towards prevention and early detection of depression (NHS Quality Improvement Scotland)	2004
Working with dependent older people to achieve good oral health (NHS Quality Improvement Scotland)	2005
Working with dependent older people towards promoting movement and physical activity (NHS Quality Improvement Scotland)	2005
Maximising communication with older people with hearing disability (NHS Quality Improvement Scotland)	2005

The dynamic practice development model

The figure below depicts the conceptual model of practice development that has emerged from this action research study (Tolson et al, 2006). This model creates a driving force which moves current practice towards evidence based practice as described within the best practice statements. The red arrow represents the scholarship of practice. This combines nurses' knowledge from practice and what older people themselves know and want from nursing services. The green arrow is the scholarship of enquiry. This encompasses knowledge as a result of research and critical thinking by nurses. The two scholarship arrows turn continuously, changing with new insights and findings in the research evidence, changes in health policy and practice, and responding to the changing views of older people over time. The two kinds of scholarship are brought together by the nursing communities of practice as they work and learn together within the virtual college, and with colleagues in their work settings. The binding together of these two forms of scholarship drives the evidence base forwards.



For older people

Eight older participants regularly active in on-line discussion forums and worked in collaboration with the project team to produce two companion statements to the best practice statements developed by nurses: Care Guidance for Older People - Getting Sufficient Nourishment when Going into a Hospital or Care Home (NHS Quality Improvement Scotland, 2005a) and Care Guidance for Older People – Prevention and Early Detection of Depression (NHS Quality Improvement Scotland, 2005b). Pre- and post-intervention guestionnaires and interviews have shown that all participants benefited from taking part in the study, although some seemed reluctant to participate in the online discussions. Many are now using the internet for leisure and shopping and keeping in touch with friends and family by e-mail.

Dissemination

Best practice statements are distributed widely throughout Scotland following publication. An independent evaluation suggests that where there is support for their implementation as in this project, nurses are more likely to use them to develop practice (Ring & Finnie, 2004). A further practice impact study to demonstrate and measure the impact of the best practice statements on nursing practice has resulted in an improvement of 15% in a short period of time (Glasgow Caledonian University, 2006).

All members of the project team have participated in external conference presentations and in-house dissemination events to publicise the project findings. Nurses, carers and residents have taken part in a writing competition to describe how the best practice statements Nutrition for physically frail older people (Nursing & Midwifery Practice Development Unit, 2002) and Working with older people towards prevention and early detection of depression (NHS Quality Improvement Scotland, 2004) have influenced care practices. The winning papers have informed the writing of two articles for publication. An article on the prevention of depression best practice statement has been published in the Nursing Times (Schofield et al, 2004). At the time of going to print, six scholarly articles describing different aspects of the project have been accepted for publication. The best practice statements are freely available to everyone via the public website at www.geronurse.com.



Conclusion

This action research project to develop gerontological nursing in Scotland demonstrates how nurses working in internet based communities of practice can work collaboratively to develop and implement evidence based best practice statements in the care of older people. In addition, older people themselves, given appropriate technical support and encouragement can make use of computers in order to participate in service development.

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Acknowledgements

To the Foundation of Nursing Studies for supporting this project including funding of £13,500 towards the development of the virtual college and the secondment of a mental health nurse to develop the second best practice statement.

To Ashbourne Healthcare, EQUAL, NHS Education for Scotland, NHS Health Scotland, NHS Quality Improvement Scotland, NHS Scotland, Queens Nursing Institute Scotland.

How to reference this report

Schofield, I. (2007) The Gerontological Nursing Demonstration Project. *In Shaw*, T. and Sanders, K. (Eds) *Foundation of Nursing Studies Dissemination Series.* Vol.4. No. 2.

The Foundation of Nursing Studies Dissemination Series

ISSN 1478-4106

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