Transforming dementia and end-of-life care by investing in learning and development

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GUEST EDITORIAL

Josie Tetley and Jan Draper

Transforming dementia and end-of-life care by investing in learning and development

Improving care for people with dementia is now recognised as an international priority. However, it is a complex issue as the quality of dementia care is dependent on a wide range of care providers including registered practitioners, support staff and informal carers. In this guest editorial we discuss how learning and development can play vital roles in transforming care and equipping staff with the knowledge, skills and confidence they need to provide high quality, person-centred and compassionate care.

For all patients, and their families, the relationships forged with nurses and other carers are central to the quality of their healthcare experience. As a result, the quality of these relationships is frequently singled out in patient satisfaction surveys as being of particular importance. To engage successfully with their patients, nurses need to listen carefully and get to know their patients as people. While the need to listen may seem straightforward, the paper in this issue by Josie illustrates some of the challenges encountered by both individuals and service providers when supporting people living with dementia and their carers.

It is clear therefore, that person-centred care should be at the ‘heart’ of caring for people with dementia and those at the end of their lives. High quality learning and development play critical roles here – reinforcing core values of compassionate care, and building the leadership skills and confidence to influence care given by an increasingly diverse and multiprofessional team. But faced with immense challenges and pressures, it is not always possible for nurses and other carers to access learning and take time out for professional development. This is why innovative means of supporting education and training are so important for healthcare professionals and for the quality of patient care. The Open University (OU) leads the world in providing high quality, accessible university education; it is the UK’s largest university, with more than 250,000 students. An increasing proportion of those students are health and social care practitioners, who are able to study while managing demanding work commitments – and because they are studying alongside work, they can apply new knowledge and skills to practice from the start.

The values of compassion and dignity and a clear focus on improving practice are central themes in all OU health and social care courses; our learning takes into account the views of practitioners, patients/service users and carers, and captures their voices in case studies of practice.

In addressing the particular challenge of improving care for people with dementia, the OU developed a module, Dementia care, which enables students to develop skills in understanding and caring, taking account of cultures of care and the difficulties that arise when people with dementia near the end of their lives.
In *Death and dying*, students learn about how bereaved people manage grief, and explore the social and ethical contexts of death, dying and end-of-life decisions. A Macmillan Lead Nurse for Palliative Care said: ‘The *Death and dying* module is excellent and we have now made it a desirable baseline qualification on our job specifications in relation to posts where palliative care is a core component.’

Recognising that end-of-life care can be particularly challenging, whether someone has dementia or not, the OU has developed two innovative short courses: *Improving end-of-life care* and *Improving dementia care*. True to the OU’s ethos of open and accessible education, both courses were developed with service partners and designed to be accessible to a wide spectrum of people including service users, carers and volunteers, as well as registered practitioners and other care workers. Because the courses are flexibly delivered and accessible to such a diverse audience, they have the potential to make a real difference to the way people with dementia and those reaching the end of their lives are supported.

Improving dementia care and truly adopting person-centred approaches to care are key objectives for the nursing profession. To achieve these, nurses need the right level of knowledge, skills and experience. We have previously argued that the move to an all-graduate profession is a step in the right direction (Tetley and Draper, in press), as this will better equip nurses to respond to the increasingly complex care situations in which they practice. However, initial preparation programmes are only the start and continuing professional development has a crucial role to play internationally in enabling the development of nursing expertise. To this end, the OU provides a range of development opportunities that include a ‘top-up’ degree pathway for qualified nurses, as well as postgraduate provision in advancing healthcare practice.

At a time of ever increasing demands on healthcare, coupled with continuing financial pressures, it might be easy to regard learning and development budgets as potential targets for cost cutting. However, it is precisely at these times that learning and development should be valued for their role in improving the quality of care and for their potential to support innovations in care that may ultimately deliver efficiencies – including cost savings. We believe it has never been more important for health and social care providers to continue to invest in lifelong learning.

**Reference**


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