

Progress Report 2: Oregon RUSH Project

**Determining The Effectiveness of a Collaborative Support Model
To Train Community-Based Care Providers How To Implement AAC
With Persons Who Have Alzheimer's Disease In Community Settings**

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This project, which commenced on May 1, 2007, is on schedule as of October 31, 2007. Below is a summary of the proposed project and a detailed report of completed activities, as specified in the MOA between OHSU and SEDL.

Overview of the RUSH Project

Outcomes of the Field Initiated Project #H133G040176, "AAC Applications in Dementia", form the basis for this research utilization project. This 3-year research asked the question: *What are the most effective input and output modes in a communication device to support conversations by persons with Alzheimer's disease (AD)?*

Our goal is *to improve the awareness and implementation of augmentative and alternative communication (AAC) strategies for persons with Alzheimer's disease (AD) by licensed long-term care providers in accredited Alzheimer's Disease Care Units (ADCUs)*. By effecting change in this group of providers, we expect to increase capacity for communication management in the ADCUs, and to eventually change accreditation criteria for the Oregon Administrative Rules.

The target audience is licensed long-term care providers in 9 ACUs certified by the State of Oregon Department of Health and Human Services who provide residential care for individuals with dementia. Staff at these centers is required to participate in regular training workshops provided by Ms. Beedle. These licensed long-term care providers have a high need to understand communication for health, safety, social and recreational purposes.

The AAC training package will be provided as part of regular training forums mandated for licensed long term care providers for people with AD; it will include the provision of materials to facilitate implementation of AAC techniques. The face-to-face training will be delivered as part of workshops routinely provided by the State of Oregon to licensed long term care providers of persons with AD. Joyce Beedle provides these workshops.

While the intended target audience includes licensed long-term care providers who support persons with Alzheimer's disease, there are far reaching outcomes that go beyond this target group. We propose that the ACUs where the adults with AD live, and where the licensed long-term care providers work, will gain capacity in communication management that eventually will be transmitted to accreditation requirements through changes in the Oregon Administrative Rules.

Specific aims for the proposed utilization research are:

Specific Aim 1: To determine the differences between awareness and knowledge of AAC for persons with AD by licensed long-term care providers before and after collaborative training.

Specific Aim 2: To determine differences in frequency of use of AAC boards and rate of initiations of conversations by persons with AD before and after collaborative training of their care providers.

Specific Aim 3: To determine differences in satisfaction with AAC use by licensed long-term care providers before and after collaborative training.

Specific Aim 4: To determine the differences in program and state policies related to competencies for licensed long-term care providers in ADCUs before and after collaborative training.

Study Design

Nine care centers in the Portland area have been randomly assigned to one of three groups and will be followed for a period of six months in a staggered treatment model. Repeated measures in the form of a questionnaire for caregivers and observation of persons with AD are administered three times over the six-month period. A baseline assessment was conducted initially for all providers in each center. Training 1 involved Group 1 only. The second assessment occurred after Training 1 and again involved all providers for all nine sites. Training 2 involves Groups 2 and 3, with Group 2 receiving AAC training and Group 3 receiving unrelated mandated training about AD care. All nine centers will be assessed a final time following Training 2. As a courtesy, Group 3 will be offered AAC training after completion of the study period and after all measures needed for the study have been collected. A questionnaire has been developed by project staff to measure awareness, knowledge and satisfaction of care providers and is being administered at Times 1, 2 and 3 for all groups. Observational data on initiation of conversation by persons with Alzheimer's disease and the frequency with which they use AAC boards are being collected in the ADCUs on the same time schedule. The study design is shown in table format, below. Assessments 1, 2 and 3 each involve administration of the questionnaire to care providers and direct observations of persons with AD in ADCUs.

Table 1: AAC RUSH Study Design

Group	Center	Assessment 1	Training 1	Assessment 2	Training 2	Assessment 3
Group 1	1	Baseline data	AAC tx	Follow-up	None	Follow-up
	2	Baseline data	AAC tx	Follow-up	None	Follow-up
	3	Baseline data	AAC tx	Follow-up	None	Follow-up
Group 2	4	Baseline data	None	Follow-up	AAC tx	Follow-up
	5	Baseline data	None	Follow-up	AAC tx	Follow-up
	6	Baseline data	None	Follow-up	AAC tx	Follow-up
Group 3	7	Baseline data	None	Follow-up	Unrelated tx	Follow-up
	8	Baseline data	None	Follow-up	Unrelated tx	Follow-up
	9	Baseline data	None	Follow-up	Unrelated tx	Follow-up

Proposed time line for major activities

	May	June	July	Aug	Sept	O	N	D	J	F	M	A
1. Develop training materials & measurement instruments												
2. Conduct Assessment 1												
3. Provide Training to Group 1												
4. Conduct Assessment 2												
5. Provide Training to Groups 2 & 3												
6. Conduct Assessment 3												
7. Collect qualitative data												
8. Analyze data												
9. Write final report												

Accomplishments to July 31

Table 2, above shows the originally proposed timeline for the major project activities. Activities 1-4, indicated with diagonal lines, have been completed. A description of completed tasks related to this activity appears below. Related materials are attached.

Activity 1. Develop training materials and measurement instruments

1. The subcontract between Ms. Joyce Beedle, nurse educator, and OHSU has been finalized and approved.
2. The project staff has been hired and has commenced work related to this project.
3. The 9 Alzheimer's Care Units throughout the Portland, OR metropolitan area have agreed formally to participate in the AAC RUSH project.

4. The 9 ACUs have been randomly assigned to the 3 training cohorts, and first training cohort already has been scheduled.
5. IRB approval has been received for all informed consent forms and project materials developed for this research.
6. The research-to-practice curriculum based on the FIP results has been developed.
7. Project materials have been developed, and include:
 - a. A power point slide show and handouts for the 1.5-hour training with long care providers in the different ACUs.
 - b. The pre-/post- questionnaire to be completed three times by participating caregivers;
 - c. An observation form to be completed by project staff when they document AAC use in the ACUs before and after training.
8. AAC materials have been developed for each ACU:
 - a. A set vocabulary of “reminiscence” pictured vocabulary has been determined.
 - b. The transparency of each picture has been determined through a small study and those pictures that were determined to poorly represent intended words have been eliminated.
 - c. Clipboards, Velcro, scissors, and other materials for the training activities are in the research laboratory.

Accomplishments to October 31

Activities 2, 3, and 4 have been accomplished to date in compliance with the original timeline. A description of completed tasks related to this activity appears below.

Activity 2. Conduct Assessment 1

1. The 9 Alzheimer's Care Unit (ACU) sites have been consented (N=93). Consent forms are provided in English and Spanish.
 - a. Group 1, N=17 participants
 - b. Group 2, N=48 participants
 - c. Group 3, N=28 participants
2. Questionnaire 1 (pre-training) has been completed by all consenting individuals at the 9 sites. Questionnaires are provided in English and Spanish.
3. 2 research assistants have been trained in observation.
4. Observation 1 (pre-training) has been completed at the 3 sites that are a part of Group 1.

Activity 3. Provide Training to Group 1

1. Staff in Group 1 sites (N=17) has received the AAC training, and responded very positively to the new research-to-practice information. The training includes:
 - a. An interactive Power Point presentation given by Joyce Beedle, nurse educator
 - b. Slide show handout for group
 - c. A questionnaire (q-aire 2, post-training) distributed immediately after training
 - d. Communication board assembly with SpeaKits:
 - I. Lightweight storage clipboard with handle.
 - II. 32 laminated images on thick, durable 3.5x4 cardstock.
 - III. 32 hook velcro dots and 6 loop velcro dots placed on the clipboard and laminated pictures.
 - e. Discussion about optimal placement and use of communication boards in ACU.

Activity 4. Conduct Assessment 2

1. Questionnaire 3 (follow-up) has been given to all consenting individuals in the Group 1 sites.
2. Observation 2 (post-training) has been completed at the Group 1 sites.