Reports from the last five years have indicated a need for improvements in the care of patients with dementia in acute hospitals. 800,000 people in the UK have dementia, occupying 25% of acute hospital beds, with this number set to double over the next 30 years. Only 6% of hospitals have a care pathway in place for people with dementia, with staff feeling inadequately trained to communicate with patients, and manage symptoms of distress and agitation. There are further concerns that patients are not receiving adequate personal care, that there is a lack of assistance with eating and drinking and a lack of opportunity for social interaction, and that patients are generally treated with a lack of dignity and respect. In response to this, the Dementia Action Alliance in partnership with the NHS Institute for Innovation and Improvement has asked that all hospitals in England commit to becoming dementia friendly.

In February 2012, I read a book named *The End of Life Namaste Care Program for People with Dementia* by American social worker and dementia care specialist, Professor Joyce Simard. It left me feeling inspired and I was excited to learn that it was currently being introduced to care homes in London through St Christopher’s Hospice. After several emails, I met Professor Simard and the incredible team involved in the program’s implementation, and began to recognise the potential benefits of introducing this project to the acute sector. Previous to London, the care program has been successfully implemented in care homes and hospices all over the USA and Australia. All previous studies into the benefits of Namaste Care have shown a reduction in infections, skin tears, use of antipsychotic medication and falls, and an increased satisfaction in families and staff.

King’s College Hospital is recognised as a leader in dementia care and in 2011 opened the first sensory ward for patients with dementia in London. The Marjory Warren Ward is equipped with mood lighting, non-slip wood flooring and a separate room with sensory equipment. On reading about the developments to Marjory Warren Ward I felt this would be the perfect environment to become the first acute hospital in the world to introduce Namaste Care. Luckily, on approach the team were as excited about Namaste care as me and together we soon began plans for implementation.
Namaste Care is a sensory based program that integrates nursing care with meaningful activities to provide peaceful and relaxing experiences for patients with advanced dementia. ‘Namaste’ is a hindu greeting which literally means to honour the spirit within. When applied to dementia patients it inspires us to look beyond the dementia and care for the person inside. Care is delivered to patients that cannot participate in traditional activities in a designated Namaste Care room or at the patient’s bedside for a minimum of four hours per day. A soothing atmosphere is created by lowering the lights, adding the scent of lavender, playing soothing music and providing gentle massage. Particular attention is also given to patient hydration. Activities include reminiscence, listening to music, singing together, slow application of items that are familiar to the patient, such as Pond’s Cold Cream or Old Spice, giving gentleman a wet shave or applying the make up women usually wear. Sensory items can be used to orientate the patient to the time of year using silk flowers characteristic of the season or significant items like candy canes at Christmas. Staff are encouraged to be innovative.

On May 13th 2013 Professor Simard arrived at King’s and visited the various wards to advise on practical ways to make the wards more suited to the needs of patients with advanced dementia. She then trained a cross section of staff from all wards at King’s in the Namaste Care program. All staff found the teaching both informative and inspiring and King’s are currently working towards a plan to implement this on each ward and there are now plans to create sensory rooms on each ward. Clinical Nurse Specialist Mona Siyanga explained:

“We now plan to develop a champion group for each ward and then do training in actual Namaste activities and incorporate these as we assist patients with activities of daily living”.

I will be researching the outcomes from this special project later this year.

kimberleystjohn3@gmail.com
www.namastecare.com