



The Meaning of the Meaningful Activities Team

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Meaningful Activities Team

- Initially a small roving team of 2 registered nurses and 1 non-registered nurse with 10 trained volunteers.
- May 2022 trial and successful establishment of activities coordinator in ward 71 (Stroke rehabilitation).
- February 2023 trial of an activities coordinators in Medicine of the Elderly wards at the Western General Hospital. Funding supported by small ward mergers.
- July 2023 – Addition of a mental health nurse to the small roving team.
- May 2024 – Extension of funding for a further year for ward-based activities coordinators

Why do we need a Meaningful Activities Team?

NICE Guidelines for Dementia

1.4 Interventions to promote cognition, independence and wellbeing

- 1.4.1 Offer a range of activities to promote wellbeing that are tailored to the person's preferences.
- 1.4.2 Offer group [cognitive stimulation](#) therapy to people living with mild to moderate dementia.

SIGN Guidelines for Dementia

2.5 Non-pharmacological approaches for distressed behaviours

- R For managing distressed behaviour symptoms in people with dementia, tailored activities based on a comprehensive structured assessment may be considered. Activities should be individualised, focus on preserved capabilities and consider previous roles, interests and preferences.

Dementia in hospitals improvement toolkit (Healthcare Improvement Scotland, 2023)

Aim

Improved outcomes
for people with
dementia in
hospitals

Primary Drivers

Person-centred approach
including engagement with
carers and relatives

Skilled and resilient
workforce

Secondary Drivers

Proactive and person-centred responses to
stress and distress

Dementia friendly hospital environments

Meaningful activities linked to the needs of
individuals

Staff wellbeing

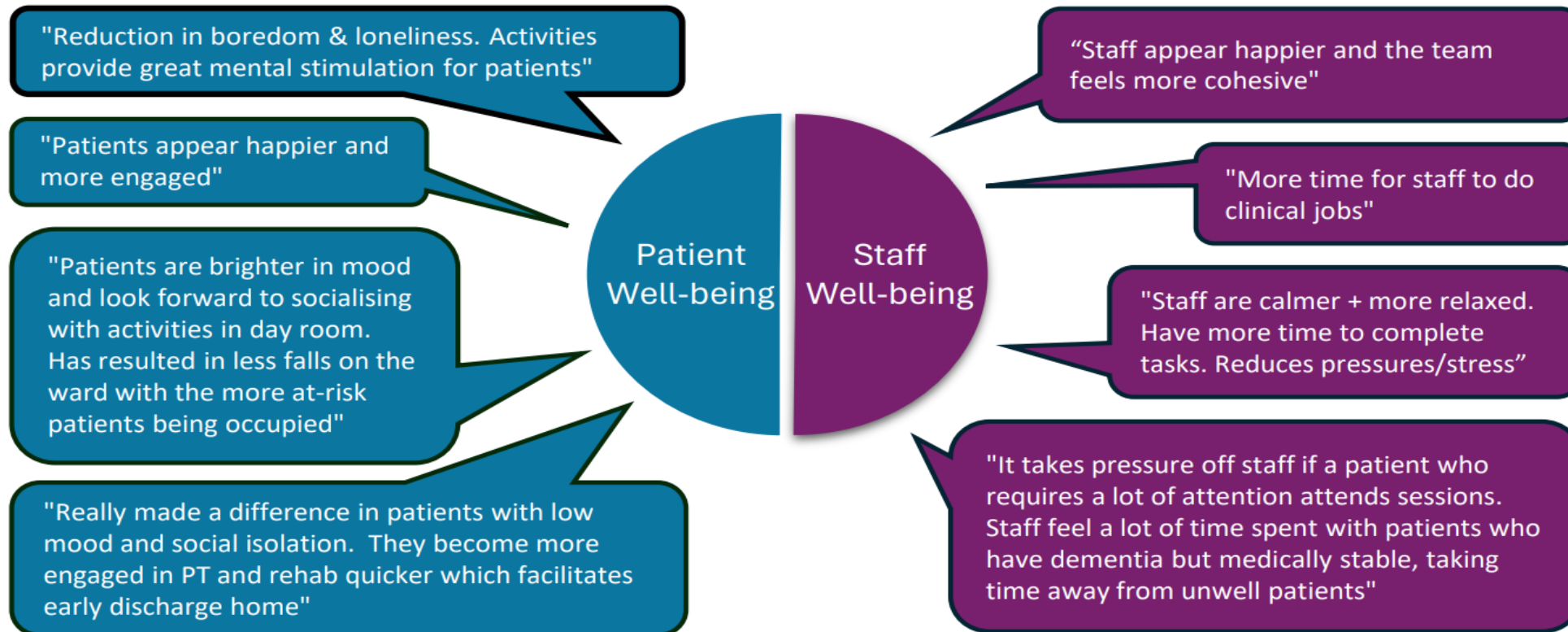
Staff training

Quality improvement approach

Staff Perceptions

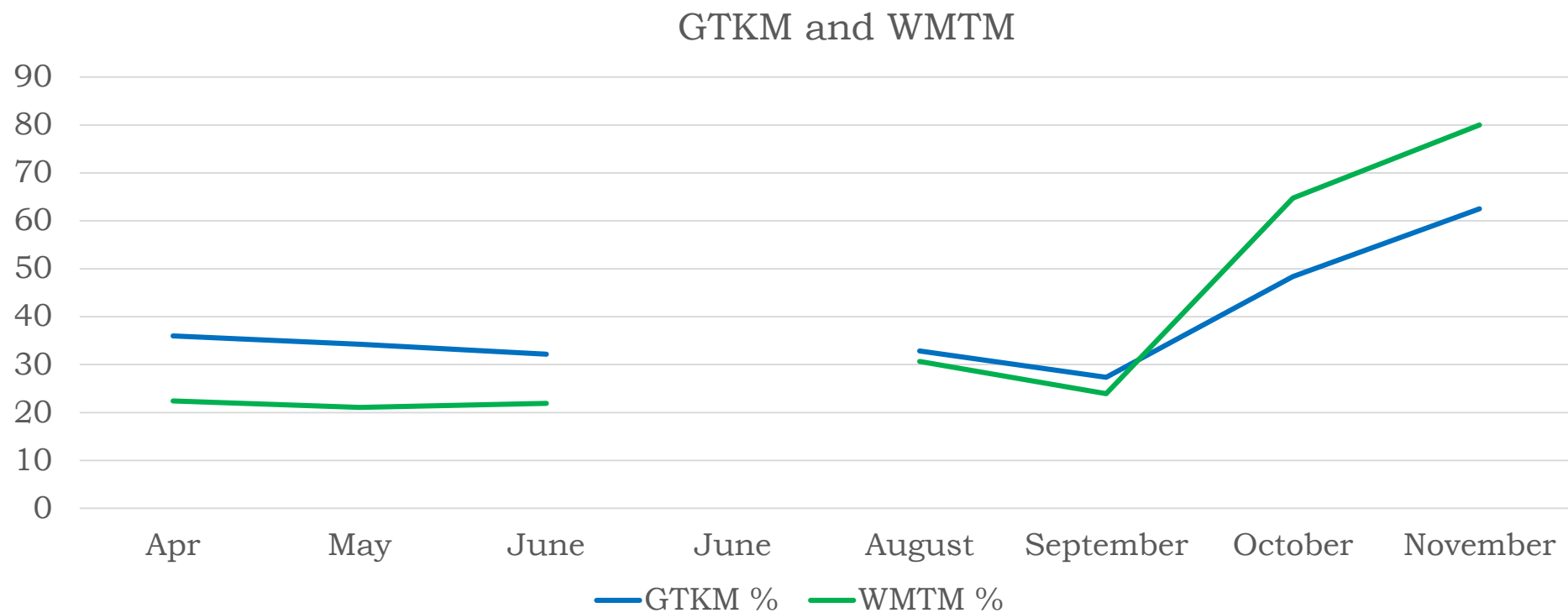
- Patients are inactive for long periods in the day.
- Inactivity leads to stress, distress and worsening mental health of patients.
- Inactivity contributes to physical decline and lack of appetite.
- Patient inactivity and boredom impact of nursing staff's workload.
- Negative impact on engagement in therapeutic work.
- Patients can be very isolated and lack social interaction.
- Nursing staff lack time to spend with patients.
- Some staff described feelings of guilt about this.

What benefits have you noticed to patient/staff well-being since the introduction of the AC's?

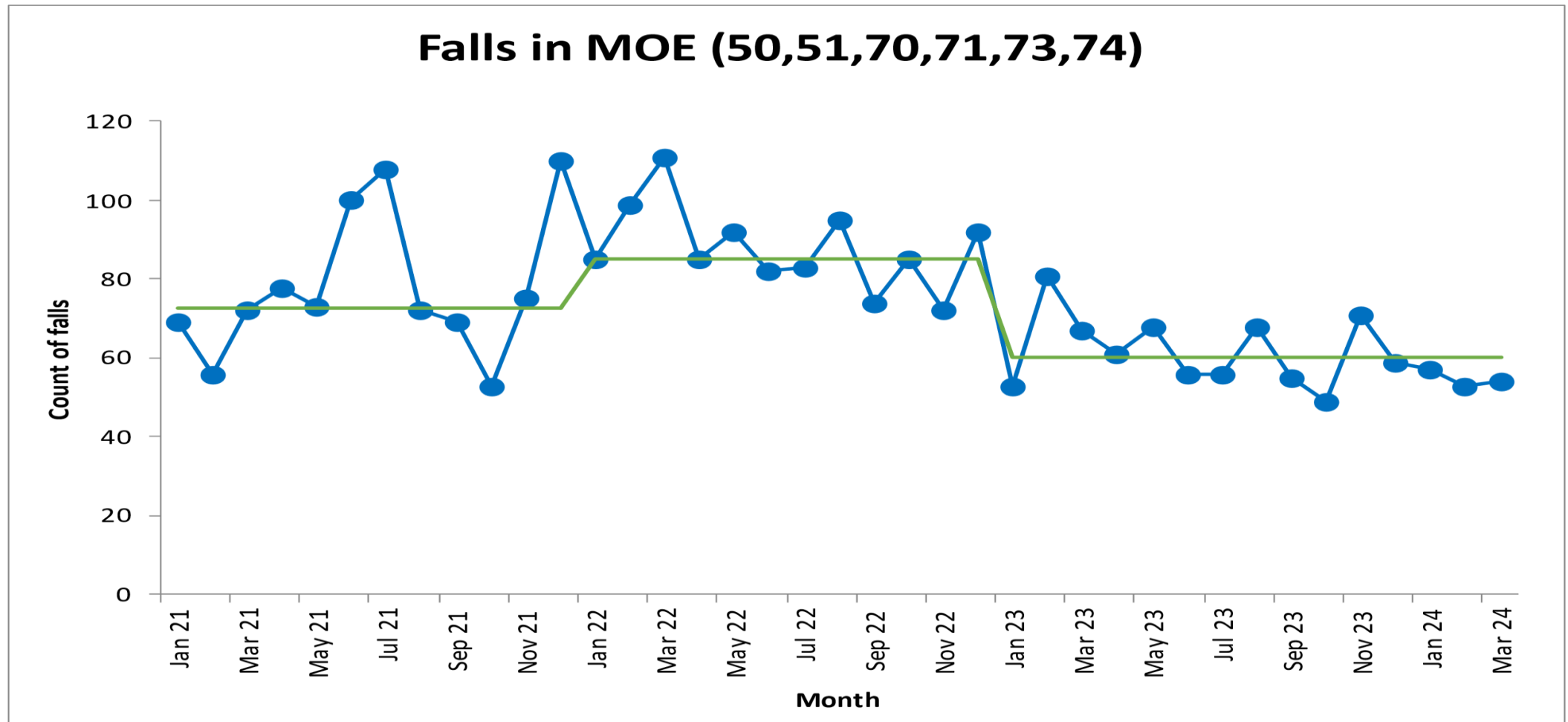


Person Centred Care

Getting To Know Me Forms and What Matters To Me Boards



Falls Reduction



Other Benefits of activities coordinators

- Nutritional benefits through patients eating together more (and easier for staff to monitor meals).
- Collaboration with PT teams to deliver group exercises
- Releasing time for roving MAT team to focus on other areas of the hospital, supporting staff in promoting a dementia friendly hospital.
- Roving team able to support education of nursing teams in dementia care and management of stress and distress reducing the need for continuous interventions.

Meaningful Activities Team – What Next?

- Work with other specialties within the hospital to promote benefits of Meaningful Activities
- Continue to promote non-pharmacological interventions for reducing and relieving delirium
- Development of a distressed care team
- Working with the surgical preadmission team and Recovery to support patients with dementia who have surgery
- Continue to work with the Volunteer team to increase activities support in non MOE wards and increase 3rd party input.