

Project Title

Effects of Humanitude Training on Staff Burnout, Empathy and Attitude towards Dementia in an Acute Hospital.

Project Lead and Members

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Organisation(s) Involved

Khoo Teck Puat Hospital

Healthcare Family Group(s) Involved in this Project

Allied Health, Nursing, Geriatric Medicine

Applicable Specialty or Discipline

Nursing

Project Period

Start date: January 2021

Completed date: December 2021

Aims

To investigate the effects of Humanitude training on healthcare staff burnout, empathy and attitude towards dementia.

Background

Refer to poster attached

Methods

Refer to poster attached

Results

Refer to poster attached

Lessons Learnt

The benefits of Humanitude was scientifically validated in international studies and similarly demonstrated in this study.

Hence, it is recommended to:

- Integrate Humanitude in the basic education curriculum of healthcare professionals
- Extend to all types of patient care contexts

Conclusion

Refer to poster attached

Additional Information

Singapore Health & Biomedical Congress (SHBC) 2022: Singapore Nursing Award (Oral category) – (Merit Award)

Project Category

Organisational Leadership

Organisation Development, Culture Building

Keywords

Humanitude, Burnout, Empathy, Attitude Towards Dementia, Dementia Care

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INTRODUCTION

Dementia affects 5.2% of Singaporeans aged 60 and above. Patients with dementia receiving care in hospitals often present with signs of agitation, aggression, delusion, hallucination, depression and apathy. These behavioural and psychological symptoms of dementia (BPSD) are a key challenge for the healthcare professionals (HCPs). Hence, HCPs caring for patients with dementia often report fatigue, burnout and job dissatisfaction.

Humanity Care Methodology is an evidence-based care approach that focuses on promoting dignity, freedom and autonomy for dependent and vulnerable persons. Humanity emphasizes on eye contact, verbal communication, and touch during patient's interaction.

This study investigates the effects of Humanity training on HCPs burnout, empathy and attitude towards dementia.

OBJECTIVE

To study the effects of Humanity training on healthcare professionals' burnout, empathy and attitude towards patients with dementia.

METHODS

STUDY DESIGN: One-group pre test-post test design

PARTICIPANTS: 156 HCPs (doctors, nurses and therapists) working in geriatric wards of an acute hospital in Singapore received a 5-day Humanity training. 106 (73.1%) completed the online, validated, self-reported questionnaires pre and at 6-month after the training

INTERVENTION: Humanity training was conducted by a certified Humanity trainer over four days

Training Day 1	Training Day 2 to Day 4	Post Training
Theoretical foundations of Humanity	<ul style="list-style-type: none"> Hands-on practice with patients Review of care provided with in-depth analysis of the techniques used Discussions on possible solutions for challenges faced 	<ul style="list-style-type: none"> Weekly meetings to discuss Humanity care prescriptions Regular peer observations of Humanity performance Monthly Humanity implementation group meetings

Table 1 – Humanity Training

OUTCOME MEASURES

Burnout	Empathy	Attitudes Towards Dementia
Abbreviated Maslach Burnout Inventory (aMBI)	Jefferson Scale of Physician Empathy (JSPE)	Dementia Attitudes Scale (DAS)
3 Subscales	3 Factors	HCPs' attitudes towards patients with dementia and their caregivers
<ul style="list-style-type: none"> Emotional Exhaustion Depersonalization Personal Accomplishment 	<ul style="list-style-type: none"> Perspective Taking Compassionate Care Walking in Patient's Shoes 	

Table 2 – Outcome Measures

DATA ANALYSIS

Data were analysed using IBM SPSS Statistics for Macintosh, Version 28.0 (IBM Corp., 2021), with $p = .05$ as the level of statistical significance and 95% confidence interval. Shapiro-Wilk Test was used to test the normality of the variables (with $p < 0.05$ = not normal and $p > 0.05$ = normal). Within-group effects from pre-training to 6-month post-training was assessed using Paired T-Test for normally distributed variables, and Wilcoxon Signed Rank Test for not normally distributed variables

RESULTS

Socio-demographic Characteristics of Participants

Variables	N	Mean	Std. Dev	%
Age	106	33.37	8.241	
Overall Years of Working Experience	106	9.91	7.843	
Years of Working with Older Adult with Cognitive Impairment	106	6.04	4.883	
Gender				
• Female	93			87.7
• Male	13			12.3
Occupation				
• Doctor	10			9.4%
• Nurse	73			68.9%
• Rehab Therapist	20			18.9%
• Others	3			1.8%

Table 3 – Socio-demographic characteristics of Participants

RESULT

Comparison of Pre and 6-month Humanity Training Effects on HCPs

Variables	Pre-training		6m post-training		Paired Differences				t	df	P*
	Mean	SD	Mean	SD	Mean	SD	95% CI of the Difference				
							Lower	Upper			
aMBI	17.6	7.9	14.2	7.4	-3.4	7.4	-4.8	-1.9	-4.8	105	<.001
JSPE	108.3	13.8	129.2	19.6	20.9	22.5	16.6	25.2	9.6	105	<.001
DAS	60.1	8.6	66.8	9.9	6.7	12.2	4.4	9.1	5.7	105	<.001

Table 4 – Effect of Pre & 6-month Humanity training on HCPS

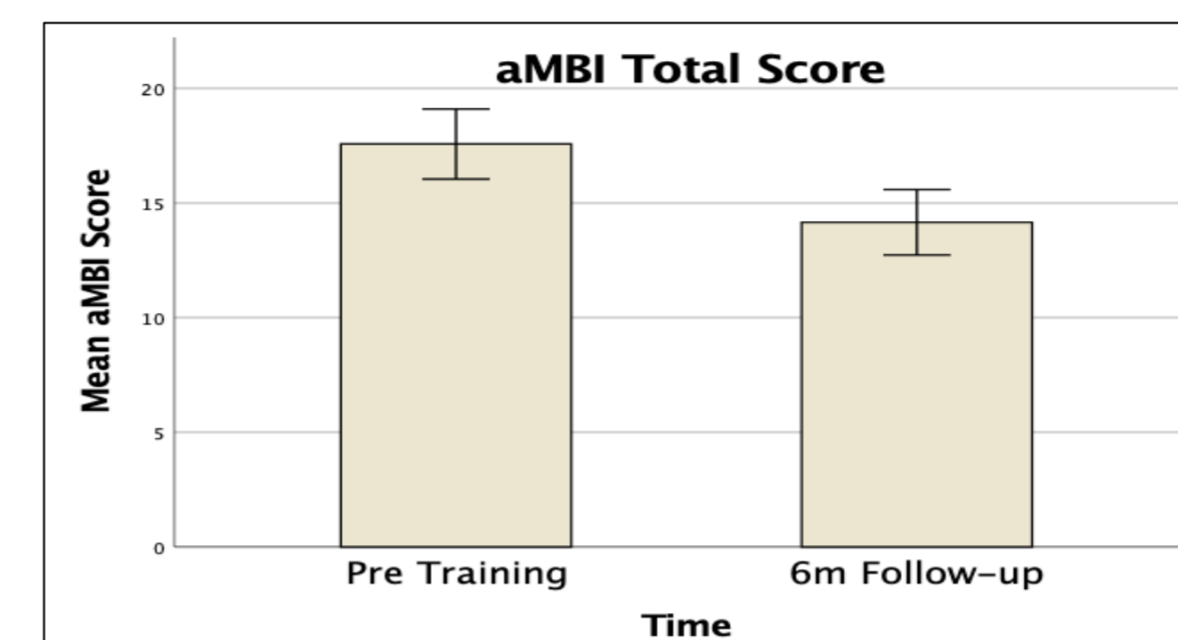


Figure 1 – aMBI Score

Burnout score: Decreased significantly by 3.42 from pre-training (17.58 ± 9.92) to 6-month after training (14.16 ± 7.41), 95% CI = - 4.849 to -1.991, $t(105) = -4.755$, $p < .001$, $d = 0.46$

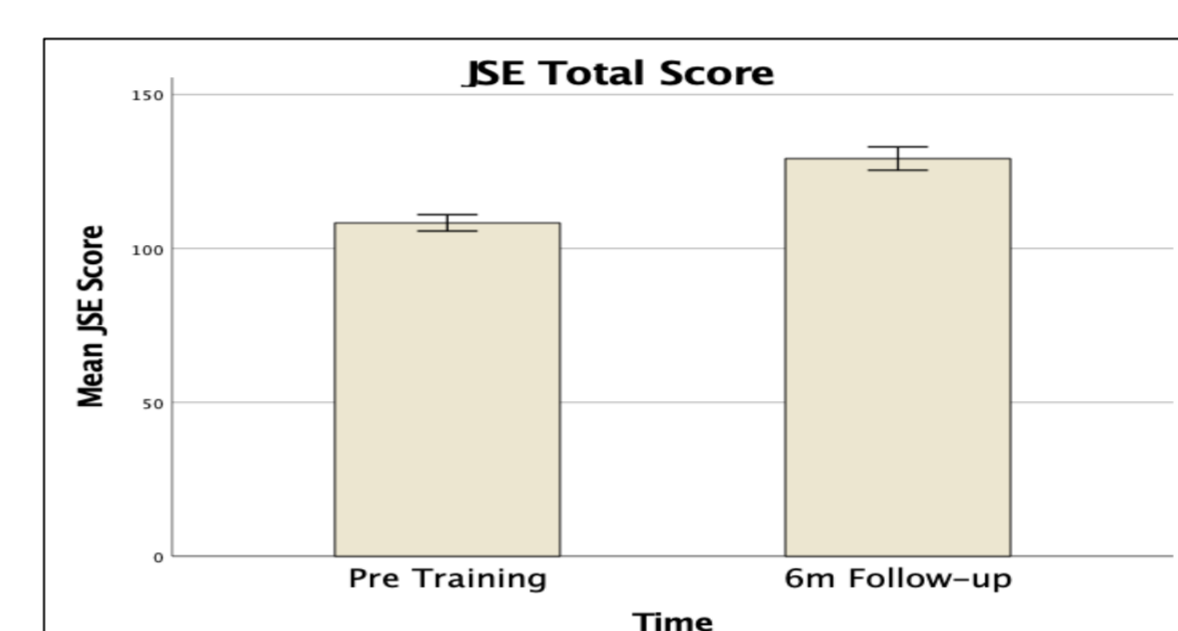


Figure 2- JSPE Score

Empathy score: Increased significantly by 20.9 from pre-training (108.33 ± 13.840) to 6-month after training (129.23 ± 19.632), 95% CI = 16.569 to 25.223, $t(105) = 9.576$, $p < .001$, $d = 0.93$

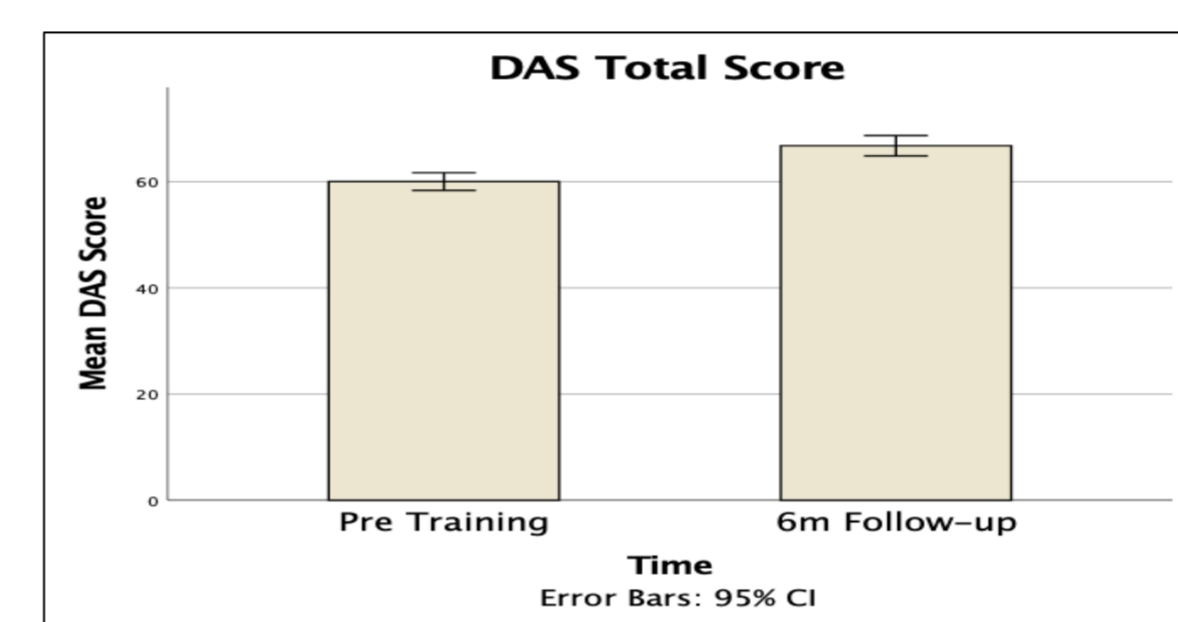


Figure 3 – DAS Score

Attitude towards Dementia score: Increased significantly by 6.76 from pre-training (60.05 ± 8.64) to 6-month after training (66.79 ± 9.97), 95% CI = 4.401 to 9.09, $t(105) = 5.705$, $p < .001$, $d = 0.55$

DISCUSSION

- HCPs expressed a reduction in burnout as the implementation of Humanity might have contributed to:
 - Increased patients' receptivity and acceptance of care
 - Greater patients' cooperation and participation in care
 - Reduced patients' agitation and combative behaviours
 - Improved verbal and non-verbal communication between patients and HCPs
- HCPs' empathy was significantly enhanced and it sustained after 6 months post training. Possible reasons are continuous reinforcement of Humanity and leadership involvement in the initiative
- HCPs also reported more positive attitudes towards patients with dementia after the training. This might be due to:
 - Better understanding of patients with dementia
 - Patients with dementia responded with positive verbal and nonverbal behaviours during delivery of care
 - Delivery of care became more pleasant

LIMITATIONS

- The study was conducted in geriatric wards of an acute hospital, thus unable to generalize to other disciplines and institutions
- The self reported measures of HCPs may subject to social desirability bias

IMPLICATIONS

- The benefits of Humanity was scientifically validated in international studies and similarly demonstrated in this study
- Hence, it is recommended to:
 - Integrate Humanity in the basic education curriculum of HCPs
 - Extend to all types of patient care contexts

CONCLUSION

- The Humanity training has improved the well-being and resilience of HCPs by reducing burnout. It also enhanced HCPs' empathy and improving their attitudes towards patients with dementia
- The positive staff outcomes brought by Humanity can potentially lead to improved care for patients in acute hospitals

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