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Fostering compassionate care for persons with Alzheimer's disease living in nursing facilities

Anna C Faul and **Joseph G D'Ambrosio** University of Louisville, USA

The aim of this study was to examine the impact of the implementation of a new compassionate care curriculum on the quality of care provided by certified nursing assistants (CNAs) to residents with Alzheimer's disease (AD). More specifically, the study used Kirkpatrick's model of evaluation to assess the reactions, learning and behavior change of the CNAs exposed to the curriculum and ultimately the impact of the curriculum on the stress levels of residents with AD. The study included an experimental and control nursing facility with the experimental group being exposed to the new curriculum and the control group being exposed to the current standard curriculum required by law. Forty-eight CNAs from the experimental group and 51 from the control group were part of the study. A convenient sample of 25 residents with AD from the experimental group and 27 from the control group participated. Two hypotheses were tested, namely H1: After completion of the compassionate care curriculum by the CNA experimental group, CNAs will show a significantly higher increase in knowledge, caregiving selfefficacy, caregiving satisfaction and a significantly higher reduction in feelings of affiliate stigma than the CNAs who completed the current standard curriculum (control group); H2: Differences in change in CNAs knowledge, confidence, satisfaction and affiliate stigma will have a differential effect on the 12 week agitation and salivary cortisol trajectories of residents with alzheimer's disease in the experimental and control nursing facilities. A twoway mixed method MANOVA analysis was used to test Hypothesis 1, and multilevel modeling, specifically a crossclassified hybrid model was used to test Hypothesis 2. Hypothesis 1 was proven with significant higher scores on all indicators for the experimental group. Hypothesis 2 also showed that agitation and salivary cortisol levels were reduced significantly more for the residents in the experimental group as compared to those in the control group. CNA knowledge increases and self-efficacy increases contributed the most to these changes.

acfaul01@louisville.edu