

Dissect study: improving staff stress, job satisfaction and staff turnover rates in care homes for people living with dementia

Submission date	Recruitment status	<input checked="" type="checkbox"/> Prospectively registered
12/04/2013	No longer recruiting	<input checked="" type="checkbox"/> Protocol
Registration date	Overall study status	<input type="checkbox"/> Statistical analysis plan
24/07/2013	Completed	<input checked="" type="checkbox"/> Results
Last Edited	Condition category	<input type="checkbox"/> Individual participant data
16/05/2017	Mental and Behavioural Disorders	

Plain English summary of protocol

Background and study aims

Caring for people with dementia in care facilities can be stressful and challenging for staff. They can become emotionally exhausted and high stress levels can contribute to staff quitting their job and increased sickness rates. The aim of this study is to estimate the extent of and relationship between stress and job satisfaction and to conduct a trial of a stress-reducing intervention (Mindfulness Based Stress Reduction, MBSR) for staff caring for people with dementia in care facilities in Wales.

Who can participate?

Any permanent day staff members working in care facilities in Wales who have direct personal care involvement in dealing with people with dementia.

What does the study involve?

A survey will be conducted to examine levels of stress and job satisfaction. Up to 30 care facilities with the highest stress levels will be selected for the study. Depending on the size of the facility, between four and 10 members of staff will undergo an internet MBSR course. Participants will be randomly allocated into either the intervention group, who will take the internet course during the study, or the control group, who will take the internet course after the study has finished. The course is run by the Mental Health Foundation and was developed in combination with two leading UK mindfulness instructors. A laptop will be provided for each care home for you to specifically access the course via the internet (<http://www.bemindfulonline.com/>). The course consists of ten interactive sessions led by two qualified mindfulness trainers. The course is easy to follow and provides step by step instructions throughout. You will learn to use formal meditation skills such as mindful movement, sitting meditation and breathing space. You will also be taught informal techniques incorporating mindfulness into daily activities such as mindfulness eating. The sessions are taught through videos, assignments and supported by emails led by the two instructors. The time spent on learning the techniques varies between 10 minutes and 30 minutes. You will be shown how to use formal meditation skills and asked to reflect and practice the taught skills in daily life. The course lasts between 4- 6 weeks depending on when you are able to complete the practice and homework logs. You will be able to break

from the course and receive email reminders to continue at the time you last participated. For each week, you will be asked to practice at least one formal exercise using the audio and video clips supplied. You will be asked to complete a questionnaire before the course, immediately following the course and 3 months later.

What are the possible benefits and risks of participating?

The study will provide evidence about how to reduce stress among staff, which will benefit staff, providers and residents through improved staff satisfaction and reduced staff sickness and costs. Staff will receive the training free of charge and a certificate will be provided once completed. Taking part in the survey may highlight the conditions under which the participant works which can possibly make them more aware of difficult issues they face. In terms of participating in the intervention there is very little evidence concerning adverse effects. It has been reported that MBSR has been used in a variety of populations to help people cope with life challenges including stress and all are reported as having positive outcomes. Participants will be informed of the type of commitment needed and also of what to expect in terms of practice and homework. Any negative experiences or emotional effects may be prevented by using experienced instructors who have the ability to offer support during and after training. This support is offered as part of the intervention being employed in the study.

Where is the study run from?

The DISSECT study will be run within the Mental Health Research Team in Swansea University.

When is the study starting and how long is it expected to run for?

March 2012 to June 2016

Who is funding the study?

National Institute of Social Care and Health Research (UK)

Who is the main contact?

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Contact information

Type(s)

Scientific

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Additional identifiers

Protocol serial number

NIHSCR SCF-11-07

Study information

Scientific Title

Dissect: Dementia: Improving Staff Stress and Satisfaction. Evaluation by Cluster Trial

Acronym

DISSSECT

Study objectives

Staff caring for people with dementia in care homes have high stress levels which may be reduced by employing a mental health intervention.

Ethics approval required

Old ethics approval format

Ethics approval(s)

College of Human and Health Science Research Ethics Committee. Swansea University. Survey approval 15/10/2012, Intervention 26/03/2013

Study design

Cluster randomised trial

Primary study design

Interventional

Study type(s)

Quality of life

Health condition(s) or problem(s) studied

Mental Health/Stress

Interventions

Fifteen experimental groups will be instructed to undergo the Mindfulness Based Stress Reduction (MBSR) course online. To maximise the power of the trial, fifteen control groups will receive the intervention once the trial is complete.

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

1. The Work Stress Inventory measure covers 6 domains (events, resident care, co-worker relations, supervisor relations, workload and physical design).
2. The Approaches to Dementia Measure (ADQ): A 19 item scale related to staff attitudes towards dementia
3. Staff Experience of Working with Residents Living with Dementia Questionnaire (SEWDRQ) [17]: a 21-item assessment of staff experiences, satisfaction, and relationships with both other staff and relatives of residents with dementia.
4. SF12 v2: a 12-item, multi-dimensional instrument designed to measure overall mental and physical health
5. Satisfaction With Job Facets: A satisfaction scale related to 5 job facets concerning feelings about the job, co-workers, the work done. Aspects of the job such as working hours, physical surroundings and requirements for doing the job such as supervision etc.
6. Karasek Job Content Questionnaire: designed to measure social and psychological characteristics of the job including decision latitude, psychological demands and social support.
7. Stanford Presenteeism scale: seeks to determine the effects of health on productivity. It measures participants abilities to concentrate and perform work despite having a primary health problem.

Key secondary outcome(s)

1. Staff job satisfaction levels
2. Staff attitudes to people with dementia

Completion date

30/06/2016

Eligibility

Key inclusion criteria

Permanent day staff members of the individual care facility that has direct person care contact with people with dementia

Participant type(s)

Health professional

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

Non-permanent staff (agency staff) of the care facility that provide cover only and night staff

Date of first enrolment

30/09/2013

Date of final enrolment
14/01/2014

Locations

Countries of recruitment
United Kingdom

Wales

Study participating centre
Swansea University
Swansea
United Kingdom
SA2 8PP

Sponsor information

Organisation
National Institute for Social Care and Health Research (NISCHR) (UK)

ROR
<https://ror.org/03w4jzj90>

Funder(s)

Funder type
Government

Funder Name
National Institute of Social Care and Health Research (UK) SCF-11-07

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	08/05/2017		Yes	No
Protocol article	protocol	21/12/2015		Yes	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes