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Twenty-five years of cognitive care education research: Time for a revolutionary change

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This is the third study of cognitive care education in New York State nursing homes using cross-sectional methods over a 25-year period. The data indicate that the cognitive care education increased at statistically significant levels, albeit by evolutionary means. It is now time for a revolutionary change, for cognitive care education, whereby the ideal level of 20 to 32 hours of education is provided to cognitive care providers. Cognitive care encompasses a range of behavioral problems that require appropriate education. These might include communication difficulties, perseveration (repetition of an idea or activity), aggressive behaviors, paranoia, memory problems, and wandering. This study assessed cognitive care education as the amount and type of education provided to cognitive care providers on how to care for the cognitively impaired including knowledge and skills to understand cognitive impairments and requisite standards to improve quality of care and life. It is apparent that nursing home employees are cognizant of cognitively impaired resident's needs. However, the cognitive care education providers receive on the job, is still inadequate to understand the overall needs of cognitively impaired, as indicated by our most recent research in 2016 (i.e., 3.81 hours). We recommend that at least 20 hours of cognitive care education be provided to care providers, with a second recommendation that 32 hours would be ideal that follows the Alzheimer's Association recommendation. The primary focus of the research studies here is to ensure care-providers are adequately trained to take care of the cognitively impaired.

Biography

Jeremy Berry is an Assistant Professor of Counseling and Psychology at Texas A&M University-Central Texas. He is the graduate coordinator of the clinical mental health counseling program at TAMUCT. He is a Licensed Professional Counselor and a Board Certified National Certified Counselor. He holds expertise in the area of Gerontological counseling and has worked extensively in private practice and in agency settings with aging adults. His most recent contracts are with geriatric psychiatric hospitals providing clinical mental health over site and facilitating outpatient treatment.

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