

3-332 Involving others in P.I.E.C.E.S.

TIPS Question:

How do I involve more registered staff to follow P.I.E.C.E.S. strategies when administering medications to those residents with dementia diagnosis?

What are the significant factors you have learned as a result of working through the six-question template?

- Collaboration with staff most effective to plan strategies.

Response:

Whenever I want to engage team in doing something different than they have been doing, I turn to exploring learning strategies. You have a good resource for adult learning in your P.I.E.C.E.S.

Resource Guide; it tells us:

- Adults need to be ready and come at learning with a “what is in it for me” position. As the Psychogeriatric Resource Person (PRP) you can coach about medication administration in terms of making it easier to administer medications if we understand good geriatric principles which include “less is better”, understanding the 7As, etc. Think, “What is in it for them if they use P.I.E.C.E.S. strategies?”
- Adults know a lot, but like to move from familiar to the unfamiliar. We also know that adults learn through dialogue. Chat lightly about medications to find out where your team is at in terms of medication administration
- Adults like to be in control over their learning. As the PRP, you can think about how you can facilitate this process for learning.
- Adults like to apply what they learn and need vivid examples. Even one successful case study from your LTCF can help paint the picture of where you want to go with medication administration. You can use the U-First! wheel to promote “chatting lightly” about your success case.

These are some ideas to consider, but the section on learning has many others. You may choose to review this section with your manager. Managers can assist in setting the tone for the learning environment you want to create. Your P.I.E.C.E.S. Resource Guide also refers to some excellent resources by Jane Vella (1) Training Through Dialogue: promoting effective learning and change with adults (2) Taking Learning To Task and Jane has come out with a third book, (3) Dialogue Education at Work. These are all great resources that can help change our methods of sharing information and to remember that learners do not learn simply because we told them. You may find Taking Learning to Task a good first choice.

Also consider working with people who share your enthusiasm. Start sharing what you know and what you have learned with those you encounter, bit by bit. Those who get a glimpse of where you are going will buy into P.I.E.C.E.S. principles and work with you. Teach them a little at a time, case by case. Teaching does not have to be formal or in a lecture setting.

Please note: TIPS information should be used similar to the way you would use information from a text book! TIPS is not intended to serve as an individual consultation service! P.I.E.C.E.S. participants should use this information in context and always work closely with the family physician involved in the care of the resident or client and with other Partners In Care to find solutions to individual resident/client issues.