Description PICOT Question Revise the PICOT question you wrote in the Topic 1 assignment using the feedback you received from your instructor. The final PICOT question will provide a framework for your capstone project (the project students must complete during their final course in the RN-BSN program of study). Research Critiques In the Topic 2 and Topic 3 assignments, you completed a qualitative and quantitative research critique on two articles for each type of study (4 articles total). Use the feedback you received from your instructor on these assignments to finalize the critical analysis of each study by making appropriate revisions. The completed analysis should connect to your identified practice problem of interest that is the basis for your PICOT question. Refer to "Research Critiques and PICOT Guidelines - Final Draft." Questions under each heading should be addressed as a narrative in the structure of a formal paper. Proposed Evidence-Based Practice Change. Discuss the link between the PICOT question, the research articles, and the nursing practice problem you identified. Include relevant details and supporting explanation and use that information to propose evidencebased practice changes. General Requirements Prepare this assignment according to the APA guidelines found in the APA. An abstract is not required. This assignment uses a rubric. Please review the rubric prior to beginning the assignment to become familiar with the expectations for successful completion.

Rough Draft Qualitative Research Critique and Ethical Considerations

In the contemporary world, Alzheimer’s is currently one of the most prevalent public health problems in the US currently affecting approximately 5 million people which is projected to increase to 14 million people by 2060 (Matthews et al., 2018). Alzheimer’s disease to a great extent is a progressive disorder that usually caused the degeneration and death of an individual’s brain cells which results in continuous decline in thinking, behavioral as well as social skills consequently, disrupting a person’s ability; thus, to function independently. This paper provides a detailed critical of two qualitative research studies on Alzheimer’s.

Article Critique

In accordance to the article, *“The experiences of people with Alzheimer's dementia and their caregivers in acquiring and using a mobility aid: a qualitative study”* by, Hunter et al., 2020, cognitive defects as well as gain and balance related problems tend to be highly progressive in people with Alzheimer’s disease (Hunter et al, 2020). However, modern day mobility aids to a great extent are associated with an upsurge or rather rise increased falls risks among dementia patients. As such, the primary object of the research was to identify the overall perceptions of individuals living with not only mild but also moderate Alzheimer’s dementia, as well as their caregivers on the application or rather use of the mobility aids. In the research conducted by Hunter et al., the research used the qualitative study design whereby, they used semi structure face-to face interviews (Hunter et al, 2020). Generally, the research study recruited and was later carried out on community-dwelling older adults living with dementia and who attended a day hospital program. For the research study, the researchers conducted what can be termed as a thematic analysis after which they coded the text into somewhat broad themes that aligned with the research study’s questions (Hunter et al, 2020).

Generally, the coded text to a great extent was examined for patterns as well as similarities which they were grouped in order to form inductive themes. Following the recruitment a total of twenty four participants took part in the qualitative research study, this group comprises of 12 patients currently living with dementia and a total of 12 caregivers. Based on the interview answers, a total of five major themes were identified. These themes include *“protecting a sense of self, acknowledgment of need, health professional involvement, environment and design of aids, and caregiver oversight as well as relied of burden”* (Hunter et al, 2020)*.* Generally the findings from the study suggest or rather indicate that people living with Alzheimer’s dementia as well as their caregivers tend to regard the application/use of mobility aids as increasing independence; hence, aids are critical among these patients. However, the role of healthcare professionals inclusive of caregiver is critical or rather important, concerning this, the research results indicate that they should be involved in the prescription, provision and most importantly training for the use of the mobility aids among all patients currently living with dementia (Hunter et al, 2020). This is particular important as it ensures greater uptake as well as safety.

According to the second article, *“Experiences of older people with dementia participating in a high-intensity functional exercise program in nursing homes: "While it’s tough, it’s useful"* by Lindelof et al., 2017, older people with dementia tend to have impaired balance as well as walking ability. As such, they tend to have an increased risk of not only falls but also fractures. Since most of these patients tend to have a sedimentary life, engaging in exercises could be beneficial in addition to other forms of rehabilitation. Concerning this, exercise programs for individuals with dementia to a great extent has been notably shown to have positive impacts on walking performance and balance. Among these programs is the High Intensity Functional Exercise Program which has shown positive impacts which including increased balance, gait speed, lower limb strength, as well as slowing decline; thus, in ADLs (Lindelof et al., 2017).

As such, the primary objective of the study was to assess the views as well as experiences of participation; thus, in the HIFE program among older individuals with dementia currently in nursing homes. The research design utilized by the researchers was qualitative interview study and employed a total of 21 participants comprising of 15 and 6 women and men respectively aged between 74 and 96 years. In the research study, the researchers also utilized a Mini-Mental State Examination score of 10-20 (Lindelof et al., 2017). Generally, the HIFE programs comprises of different exercises performed in what can be termed as a functional weight-bearing positions in addition to different movements that are commonly used in day to day tasks. The exercises were individually designed as well as supervised in small groups which occurred at the nursing home, these exercises were conducted for a total of four months after which the researchers conducted interviews following the exercise sessions. After recording the interview answers and notes regarding the exercises, a qualitative content analysis was applied as for the analysis (Lindelof et al., 2017).

Generally, the study results identified four primary themes which included, *“Exercise is challenging but achievable; Exercise gives pleasure and strength; Exercise evokes body memories; and Togetherness gives comfort, joy, and encouragement”* (Lindelof et al., 2017). Concerning this, although the highly tailored exercises which were adapted to each individual participant in the study were perceived as challenging however, they were achievable, and also gave the participants pleasure in addition to improvements in bodily as well as mental strength. Furthermore, having aroused memories of their past physical activities, the exercises helped the participants rediscover their past bodily capabilities. The results also indicated the overall importance of individualized as well as supervised exercises in small groups whereby, they created general feelings of encouragement, coherence as well as safety (Lindelof et al., 2017).

 **Ethical Consideration**

One of the main ethical considerations in the research studies is with regard to informed consent (Lindelof et al., 2017; Hunter et al, 2020). Concerning this, Alzheimer and dementia are progressive diseases that cause the degeneration of brain cells resulting in poor thinking skills, reduced cognitive abilities, memory loss and confusion, problems understanding and completing tasks. As such, given the decline in cognitive abilities, it is hard for people with Alzheimer’s and dementia to give informed consent with regard to their participation in the research. Given this fact, in the two qualitative studies, the participants were asked to give oral consent; thus, in participating in the study which was then affirmed by their next of kin in order to ensure informed consent. The participant were also provided all necessary information regarding the studies in order to ensure their decisions to participate were informed.

Use of these Findings in Nursing Practice.

In conclusion, the implications for the first research study include the fact that use of mobility aids leads to increased independence; thus, for individuals with Alzheimer’s disease as well as their caregivers. Caregivers strongly perceive mobility aids as effective means to reduce the overall risk of falls (Hunter et al, 2020). Furthermore, although most of these patients fail to see a healthcare professionals upon receiving mobility aids, these professionals in according to the research play a critical role not only in the prescription but also in the provision and training these patients on the use of the mobility aids in order to increase both their uptake and safe use. Therefore, these findings can be incorporated into all health care setting by ensuring all health professional participate in the prescription, provision and most importantly training of these patients as it is associated with reduced risks of fall, ensuing better balance and overall increasing the safety of dementia patients. Furthermore, given their benefits as indicated in the second qualitative research study, high-intensity functional exercise (HIFE) programs can be incorporated into the healthcare and nursing homes care settings for all patients with dementia and Alzheimer’s. This is because these exercises are associated with pleasure, as well as improvements in mental and also bodily strength among these patients. However, these exercise programs should be tailored exercise and also adapted to each patients, healthcare professionals should also ensure they are individualized and to a great extent supervised exercise in significantly small groups as it is associated with feelings of encouragement, coherence, and also safety among the older patients with dementia/Alzheimer.

References

Hunter, S. W., Meyer, C., Divine, A., Hill, K. D., Johnson, A., Wittich, W., & Holmes, J. (2020. The experiences of people with Alzheimer’s dementia and their caregivers in acquiring and using a mobility aid: a qualitative study. *Disability and Rehabilitation*, 1-8.

Matthews, K. A., Xu, W., Gaglioti, A. H., Holt, J. B., Croft, J. B., Mack, D., & McGuire, L. C. (2019). Racial and ethnic estimates of Alzheimer's disease and related dementias in the United States (2015–2060) in adults aged≥ 65 years. *Alzheimer's & Dementia*, *15*(1), 17-24

Lindelöf, N., Lundin-Olsson, L., Skelton, D. A., Lundman, B., & Rosendahl, E. (2017). Experiences of older people with dementia participating in a high-intensity functional exercise program in nursing homes:" While it's tough, it's useful". *PloS one*, *12*(11).