

Best Practices in Dementia Care

Building Hands On Skills for Communication and Interactions

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Reality Check #1:

As a Caregiver,
You Will Make Mistakes!
Get Over It!!!!

*AH OHs!
Lead to
AH HAs!*

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Time Out Signal



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Resisting Resistance JUST Increases Resistance

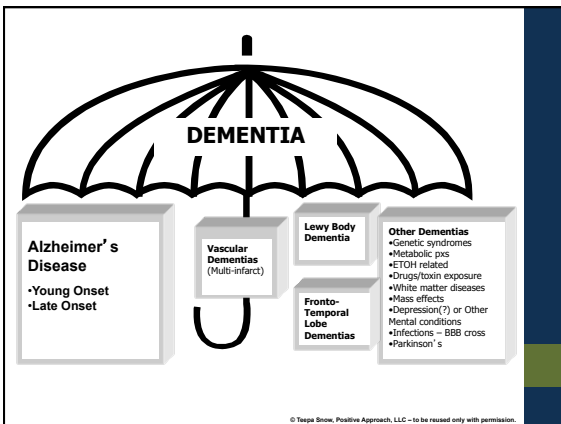
If It Isn't Working:
STOP & Back Off
Think About It
Try Again – But Change Something

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Five Ways to Say “I Am Sorry!”

- I'm sorry, I was trying to help
- I'm sorry I made you feel (emotion) angry, irritated, frustrated, sad, isolated....
- I'm sorry I made you feel (intellectual capacity or relationship unequal) like a child, stupid, like an idiot...
- I'm sorry that happened (their perspective)
- I'm sorry, this is HARD! (for both of you)

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Learning How to Communicate When Dementia is in the Picture

How You Do What You Do Matters!

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Communicating

Using ALL Five Senses and Connectors

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Understanding the world – FIVE Senses

- 1st – what you see
- 2nd – what you hear
- 3rd – what you feel/touch
- 4th – what you smell
- 5th – what you taste



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Getting Info In – FIVE Senses

- 1st – Vision
- 2nd – Hearing
- 3rd – Touch
 - Temperature
 - Texture
 - Pressure
 - Movement
- 4th – Smells
- 5th – Tastes



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Giving Information

- 1st – Show
- 2nd – Tell
- 3rd – Touch
- 4th – Scents & Aromas
- 5th – Tastes



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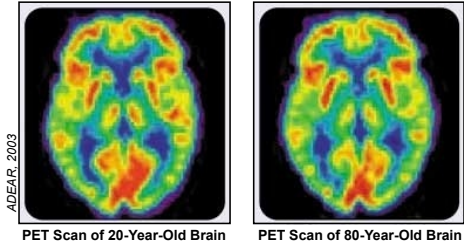
Connect

- 1st – let them see you – use props & demo
- 2nd – use a FEW words – match to ‘show’
- 3rd –offer friendly touch then guide
- 4th – match then guide emotions to safety
- 5th – Know the person & use preferred name



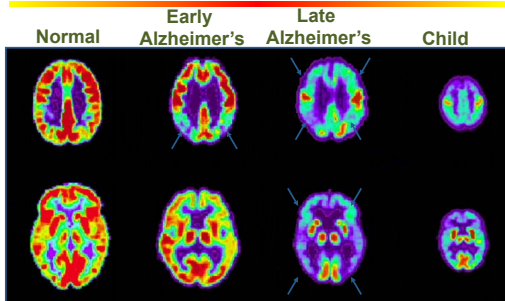
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PET and Aging



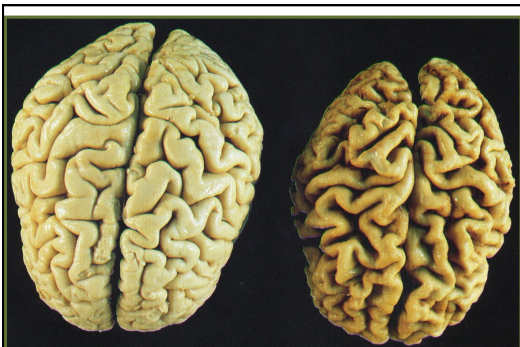
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Positron Emission Tomography (PET) Alzheimer's Disease Progression vs. Normal Brains



G. Small, UCLA School of Medicine.

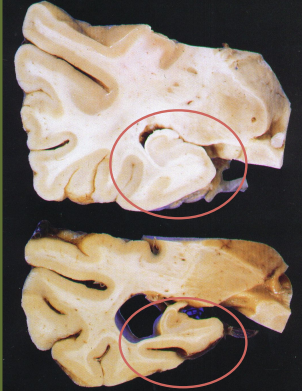
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Normal Brain

Alzheimer's Brain

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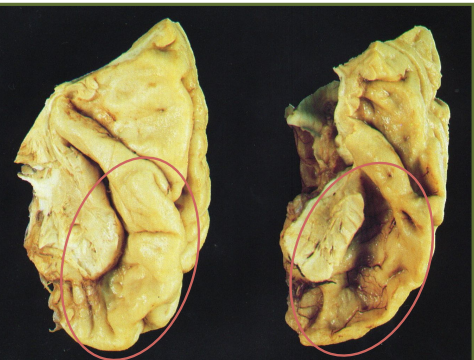


**Learning &
Memory
Center**

**Hippocampus
BIG CHANGE**


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Understanding Language – BIG CHANGE



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Hearing Sound – Not Changed



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**Sensory Strip
Motor Strip
White Matter
Connections
BIG CHANGES**

**Automatic Speech
Rhythm – Music
Expletives
PRESERVED**

**Formal Speech &
Language
Center
HUGE CHANGES**

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Hand-Under-Hand Assistance

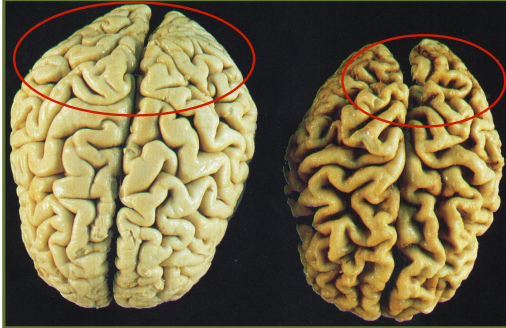
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**Executive
Control
Center**

Emotions
Behavior
Judgment
Reasoning

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Vision Center – BIG CHANGES



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Visual Cues

- Signs
- Pictures
- Props – Objects
- Gestures
- Facial expressions
- Demonstrations

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Building Hands On Caregiving Skills for Dementia

Learning to Use What Remains to
Help Provide Life Worth Living

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Five Skill Areas

- Getting Connected
- Ways of Cueing & Helping
- Hand-under-hand Assistance
- Progression of Dementia
- Time Out Signal

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Your Approach



- Use a consistent positive physical approach
- pause at edge of public space
- gesture & greet by name
- offer your hand & make eye contact
- approach slowly within visual range
- shake hands & maintain hand-under-hand
- move to the side
- get to eye level & respect intimate space
- wait for acknowledgement

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Getting Connected

Say Something Nice
Form a Relationship FIRST!

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Getting Connected

- Do Introductions
 - Give your name ... “and you are...”
- Share something... (you first... and then them)
 - “I’m from ____ and you are from...?”
- Give a compliment (about the person)
 - beauty, strength, brains
- Make a positive observation (about stuff)
 - “those are beautiful flowers/children...”
- Find out about the person – (keep it simple)

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Ways of Cueing and Helping

- Visual Cues - Show
- Verbal Cues - Tell
- Tactile Cues - Touch

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How you help...



- Sight or Visual cues



- Verbal or Auditory cues



- Touch or Tactile cues

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How Do You Get Information from People Living with Dementia about What They Want, Need, or Think?

- What they show you- how they look
- What they say – how they sound
- What they do – physical reactions

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Progression of Dementia Understanding the levels

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Stages – in a positive way



Sapphires

Diamonds

Emeralds

Ambers

Rubies

Pearls

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GEMS
a positive approach...


- **Sapphires** – True Blue – Slower BUT Fine
- **Diamonds** – Repeats & Routines, Cutting
- **Emeralds** – Going – Time Travel – Where?
- **Ambers** – In the moment - Sensations
- **Rubies** – Stop & Go – No Fine Control
- **Pearls** – Hidden in a Shell - Immobile

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Brain Failure

The person's brain is dying

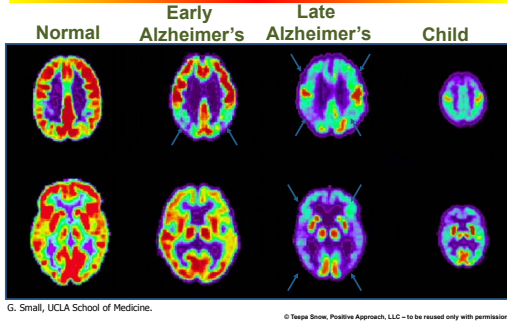
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Normal Brain **Alzheimer's Brain**

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Positron Emission Tomography (PET) Alzheimer's Disease Progression vs. Normal Brains



Three Reasons to Communicate

- Get something DONE
- Have a conversation
- Help with distress

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Form a relationship FIRST Then Work on Task Attempt

- Communication -
Getting the person to DO Something

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Connect

- 1st – Visually
- 2nd – Verbally
- 3rd – Physically
- 4th – Emotionally
- 5th – Individually

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To Connect

Use the Positive Physical Approach

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Your Approach

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Hand-under-Hand

protects aging, thin, fragile, forearm skin



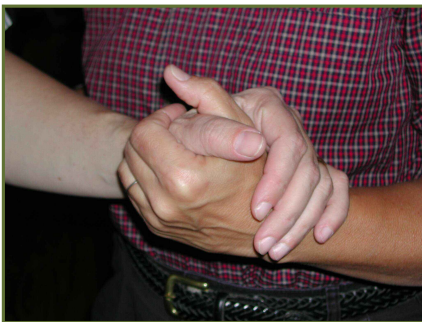
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High Risk



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Hand-Under-Hand Position



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THEN – Connect Emotionally & Personally

- Make a connection
 - Offer your name – “I’m (NAME) and you are...”
 - Offer a shared background – “I’m from (place) and you’re from...”
 - Offer a positive personal comment – “You look great in that” or “I love that color on you...”
 - Notice how the person is feeling – “Sounds like you aren’t liking it here... You look like you re having a great time....”

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THEN – Get it GOING!

- Give SIMPLE & Short Info
- Offer concrete CHOICES
- Ask for HELP
- Ask the person to TRY
- Break the TASK DOWN to single steps at a time

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ALWAYS REMEMBER – V-V-T

- Always use this sequence to CUE:
 - VISUAL
 - VERBAL
 - TOUCH
- Make cues ‘bigger’ and SLOWER as the dementia progresses-pause longer
- GIVE FEEDBACK CUES – positive!!!!

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Give SIMPLE INFO

- USE VISUAL combined VERBAL (gesture/point)
 - "It's about time for..."
 - "Let's go this way..."
 - "Here are your socks..."
- DON'T ask questions you DON'T want to hear the answer to...
- Acknowledge the response/reaction to your info...
- LIMIT your words – Keep it SIMPLE
- WAIT!!!!

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When Words Don't Work Well...

- Hand-under-Hand
 - Uses established nerve pathways
 - Allows the person to feel in control
 - Connects you to the person
 - Allows you to DO with not to
 - Gives you advance notice of 'possible problems'
 - Connects eye-hand skills
 - Use the dominant side of the person

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Use of Hand-Under-Hand

- Connecting – comforting and directing gaze
- Guiding and helping with movement
- Getting eye contact and attention
- Providing help with fine motor
- Offering a sense of control, even when you are doing almost everything

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Use Supportive Communication

- Repeat a few of their WORDS with a ? at the end
- LISTEN...
- Then –
 - Offer EMPATHY
 - "Sounds like..."
 - "Seems like..."
 - "Looks like..."
- LISTEN...
- AVOID Confrontational QUESTIONS...
- Use just a FEW words
- Go SLOW
- Use EXAMPLES...
- Fill in the BLANK...
- LISTEN!!!

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More Supportive Communication...

- Validate emotions
 - EARLY – "It's really (label emotion) to have this happen" or "I'm sorry this is happening to you"
 - MIDWAY – repeat their words (with emotion)
 - LISTEN for added INFO, IDEAS, THOUGHTS
 - EXPLORE the new info BY WATCHING & LISTENING
 - LATE – CHECK OUT the WHOLE Body –
 - Face, posture, movement, gestures, touching, looking
 - Look for NEED under the words or actions

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Once Connected & Communicating...

- Move FORWARD
 - ADD New Words...
 - Move to a New Place – Location
 - Add a NEW Activity
- EARLY – Redirection
 - Same subject
 - Different focus
- LATER – Distraction
 - Different subject
 - Unrelated BUT enjoyed

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For ALL Communication

- If what you are trying is NOT working...
- STOP
- Back off
- THINK IT THROUGH... THEN
- Re-approach –
- Try something slightly different

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Dementia can be treated

- With knowledge
- With skill building
- With commitment
- With flexibility
- With practice
- With support
- With compassion

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