

DISCUSSION GUIDE

Person-Centred Care in Practice

Person-Centred Care

- Focuses on the individual, rather than the condition.
- Focuses on the person's strengths and abilities, rather than their losses.
- Recognizes that the personality of the person with dementia is not lost, just increasingly changed by the disease.

How can HCAs provide person-centred care for people with dementia?

- Focusing on people with dementia as individuals – understanding the person's history, values, likes, and dislikes.
- Trying to understand each person's reality.
- Remembering that all behaviour has meaning.
- Mastering effective and meaningful communication.
- Recognizing every person's potential to engage socially and spiritually.
- Talking to and about the person with dignified, non-judgmental and respectful language.
- Providing choices, taking the person's wishes into consideration, and obtaining consent, if possible.
- Recognizing feelings and providing support.
- Demonstrating empathy.
- Involving and supporting family and friends.
- Focusing on bringing out the best in the person and helping them to have a good day.
- Bringing these values into the last stages of dementia and the end of life.

What does it mean to *understand* another person's reality?

- A person's reality does not actually have to be objectively real to be their reality.
- It is not helpful to try to "set the person straight" about what is really happening.
- Sometimes understanding the world from the perspective of the person with dementia means not only speaking to them, but also to family and friends and being attentive to non-verbal cues. It helps to have a sense of where a person's memory is at any given time. Putting their reality into a context of time and place can help you understand their reality; for example, if a person is talking or acting like they are in their 30s, it might make sense that they are talking about having a young daughter.

How can you involve and support family and friends?

- First and foremost, the staff needs to recognize what a move to long-term care might represent for a family or care partner.
- HCAs should recognize that grief is a constant companion for families who are on the dementia journey.
- Families are valuable members of the care team.
- Families provide a sense of continuity for the person with dementia and can familiarize staff with the person's likes and dislikes, values, wishes, and personality.

- A collaborative relationship with families benefits the person with dementia, their family members, and the staff of the care home.
- Some families will be very difficult, for a variety of reasons. A referral to counselling or the Alzheimer Society of B.C. might be the best choice under such circumstances.

“Come on, sweetie. Let me help you get dressed.” Is there anything wrong with this statement?

- Ask yourself if referring to someone under your care as “sweetie” is dignified and respectful.
- Do you talk to your parents that way?
- Most care staff would say that using endearments like “sweetie,” “dear,” “honey,” or “mama” is not done with bad intentions. They want to be nurturing, which is a commendable intention. But these terms are likely not appropriate under the circumstances.
- What are other ways that you can be nurturing, yet respectful of the person’s dignity?

Would you say Dawn is providing person-centred care? Please explain why you answered the way you did.

- This is *not* person-centred care.
- Dawn does not speak to Mr. Peterson; she talks *about* him to the HCA, as if he was not there.
- Just because he hasn’t participated in the past does not mean that he can’t change his mind and decide to participate today. Dawn is disregarding Mr. Peterson’s potential to engage socially.

How can you provide choices to the person who appears unable to choose? Why is this important?

- Choice is a key component of personal agency; we are able to make choices for ourselves as adults. Removing any sense of choice from the person with dementia robs them of their independence.
- You can incorporate the values, beliefs, cultural, and spiritual backgrounds of people with dementia and their families into the planning and delivery of care.
- You can recognize that dementia does not diminish a person. Rather, it changes the person’s capacity to interact with their environment.
- As dementia progresses and it becomes increasingly difficult to obtain fully informed consent from people with dementia, it is still possible to involve them in the decision-making process to some extent. Keep them informed and find out from their family, representative or temporary decision maker what their preferences are.
- Respect dissent. This is often expressed through behaviour, like turning their head away, biting, pushing or walking away.
- Frame your words and actions in “choice” language, so even if you really are only offering one choice, it still appears to be a choice and not an imposition.