

DISCUSSION GUIDE: Supporting Clients with Dementia

Key Information	Considerations and Potential Responses
<p>Scenario 1</p> <ul style="list-style-type: none"> ● Jean has become too agitated to have her bath. ● This is the third week in a row that this has happened. ● It happens in the bathing room. ● Her regular HCA is the only one involved so far. ● It seems that she doesn't want her clothing removed. ● It is going to require some kind of intervention soon, since she has not had a bath for three weeks now. 	<ul style="list-style-type: none"> ● What time of day did Jean usually bathe when she lived on her own? Could her bath time be adjusted? ● Has another HCA tried to bathe her? Perhaps Jean feels shy with the regular HCA for some reason. ● How did the HCA approach Jean before attempting to remove her clothing? Could she have moved more slowly or communicated her plans more clearly? ● Is Jean warm enough? If she is cold, perhaps this accounts for her reluctance to have her clothing removed. Check the temperature of the room. You could try wrapping her in a large warm towel before removing the clothing underneath. Is it necessary to remove her clothing or could she sit in the tub with her clothing on? ● What is the bathing room like? Is it bare and sterile looking? Could it be painted a warmer colour? Would adding candles, plants, or calling it the "spa room" make it more inviting?
<p>Scenario 2</p> <ul style="list-style-type: none"> ● It is difficult to keep Mary in bed after 2:00 a.m. ● Mary gets up and starts to wander the halls at 2:00 a.m. ● Only the night staff is involved; Mary does not go into the rooms of the other residents. ● According to Mary, the reason is that she needs to take care of the baby. ● It may not require intervention. If Mary is not upset, if she is safe, and if she is not disturbing others, there may not be a concern. 	<ul style="list-style-type: none"> ● Is Mary getting too much sleep? Perhaps Mary could go to bed later. She is getting 6 hours of sleep, which may be enough for her. Perhaps Mary needs to walk off her extra energy and will then return to bed quietly on her own. ● Staff might offer to walk with her. This could be reassuring to her and might calm her down enough so that she feels ready to go back to bed. ● Is Mary experiencing pain? If she is taking painkillers, her medication may have worn off by 2:00 a.m. ● Is there a regular sound that occurs around 2:00 a.m. (e.g., staff doing rounds, something outside the building, or a furnace that starts noisily)? Something specific may be waking her up. ● Does Mary have to go to the bathroom? She may be getting up because she needs to go to the bathroom, but then gets side tracked as she heads down the hallway. Try limiting her fluid intake at night. ● Is Mary hungry? Staff could place a snack by her bedside, which may redirect her and prevent her from leaving her bed. ● If Mary is worried about her baby, staff may tell her not to worry about the baby – a friend is caring for the baby tonight. ● She may calm down if given a doll and then returned to bed. If a doll is used, Mary's family should be informed. Despite the efficacy of using dolls for some people with more advanced dementia, families may see it as disrespectful or feel that their family member is being treated like a child if they do not understand why this approach is being taken.

<p>Scenario 3</p> <ul style="list-style-type: none"> ● Marjorie is very upset with what she perceives to be the “poor care” her mother is receiving. ● Though this is not typical, Marjorie may think that variations of this scenario occur periodically. ● This is a situation involving Marjorie and the care staff. Fiona is happy. 	<ul style="list-style-type: none"> ● Maria recognizes that Fiona’s actions today were significant since she has not dressed or groomed herself without help for some time. She knows that people with dementia, like everyone else, want to feel productive and her response was aimed at enhancing Fiona’s dignity. ● Although Fiona has lived at the care home for a couple of years, Marjorie may still be grieving her mother’s loss of freedom or her own inability to care for her. She may be feeling like she has broken a promise by admitting her mom into a care home. She may be experiencing grief over the loss of her mother, as she once was. ● Her mother is changing and Marjorie may feel that her mother is slipping away – the way she dresses herself feels like proof of that. She may feel that allowing her mother to be seen in an “unkempt way” robs her of her dignity as her appearance was always so important to her. ● Families experience a unique kind of grief in these situations, since the person with dementia is still alive. This grief is not typically acknowledged or validated by others, who may even say things like, “At least you still have your mother.” ● Perhaps the best gift Maria, or another staff member, could give Marjorie would be to name the grief and empathize. “It’s so hard seeing the changes in your Mom, isn’t it? It’s like one long grieving journey.” ● Marjorie could connect with the Alzheimer Society of B.C. It might help to talk to someone separate from the home, or even to attend a support group. ● The goal for Maria and the staff should be to collaborate with Marjorie in Fiona’s care. The best way to do that is through compassion. Getting upset with Marjorie because she doesn’t understand what an accomplishment her Mom’s dressing was, or dismissing her “obnoxiousness” by saying she is in denial, would only further antagonize the situation.
<p>Scenario 4</p> <ul style="list-style-type: none"> ● The biggest challenge for Albert will be to maintain resilience. He will need to accept the situation at the facility, but work to make small changes. He cannot change the workload; he can change his attitude. Perhaps others will follow suit over time. ● Albert may face discouragement from other people he works with. It might be hard to feel like he is the only person wanting to make a difference. 	<ul style="list-style-type: none"> ● Despite his new job being task-oriented, Albert can still work to accomplish these tasks with kindness and respect for the clients he is caring for. His sincere desire to know as much as possible about his clients will help him to use a person-centred approach. ● Using a person-centred approach might even help him reduce responsive behaviours, taking less time overall. ● Albert might find opportunities to share his learning or successes with his colleagues at staff meetings, huddles, or through the communication book. ● Over time, Albert may be able to find opportunities to support newer staff to contribute to a better culture. ● If Albert sees situations or behaviours that are of concern, or if he is concerned about workload, he can speak to his supervisor and/or union. ● Albert may decide to find a job where his values and the workplace culture are a better fit.