



The Dementia Leadership Course
Development. Knowledge. Practice. Networking.

Ability Focused Care

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Ability Focused Care

Creating a Culture of Well-Being with the Person Living with Dementia

THE TRUTH IS RARELY PURE AND NEVER SIMPLE

OSCAR WILDE

Polling Question

What is the biggest challenge you have as a caregiver for people living with dementia?

- Helping people to be successful in bathing and dressing
- Supporting a positive dining experience
- Understanding the meaning behind behavioral and psychological symptoms
- Knowing how to help the person with dementia to be in well-being
- Depending on the person and the situation, all of the above....



Each person wants and deserves to be..

- Recognized as a person of worth
- Known for their life history
- Valued for their contributions
- Known within the network of their meaningful relationships

<https://www.youtube.com/watch?v=0S8GFCw9Mr8>

PERSONHOOD

What is Personhood?

The state or fact of being a person

As care partners we see and accept the personhood of each person living with dementia.

Personhood implies recognition, respect and trust. For the person living with dementia, it becomes the affirmation of their own thoughts and needs, a personal identity, and a sense of self.

Domains of Well Being

Well-being is basically a state or condition of being content, comfortable, healthy, successful and happy.



IDENTITY—being well-known; having personhood; individuality; having a history

GROWTH—development; enrichment; expanding; evolving

AUTONOMY—liberty; self-determination; choice; freedom

SECURITY—freedom from doubt, anxiety, or fear; safety; privacy; dignity; respect

CONNECTEDNESS—belonging; engaged; involved; connected to time, place, and nature

MEANING—significance; heart; hope; value; purpose; sacredness

JOY—happiness; pleasure; delight; contentment; enjoyment



Communication – The Heart of Being Human

- The basis of human relationships and central to growth and well-being
- Communication helps shape our identity as individuals and member of groups
- The ways we communicate form a large part of how we are seen as unique individuals
- Human relationships are created by listening and being open to others

Teaching Empathy and Conflict Resolution *to* People with Dementia

A Guide for Person-Centered Practice



Cameron Camp and Linda Camp

Care Partners - the most important relationships

Our willingness to recognize well-being and ill-being in ourselves is critical to being our best selves and finding the most rewards in our work with Elders.

Modeling peace and empathy creates the readiness for that wellness and the entering into the other person's reality.

Three values - Respect, Dignity, and Equality

Josephine - Communication is Universal

Chat Box

What is Josephine communicating?

How is she communicating?

How are respect, dignity, and equality demonstrated in the care relationships?

Film from Everyone Wins!

Engaged with Others

In Nursing Homes

People with dementia are found to be engaged and interacting with others only 10% of the time

Of that 75% was between residents and their visitors

25% of interactions with staff

Of that 2.5% - 77 % is was about care and was primarily Carespeak

Carespeak

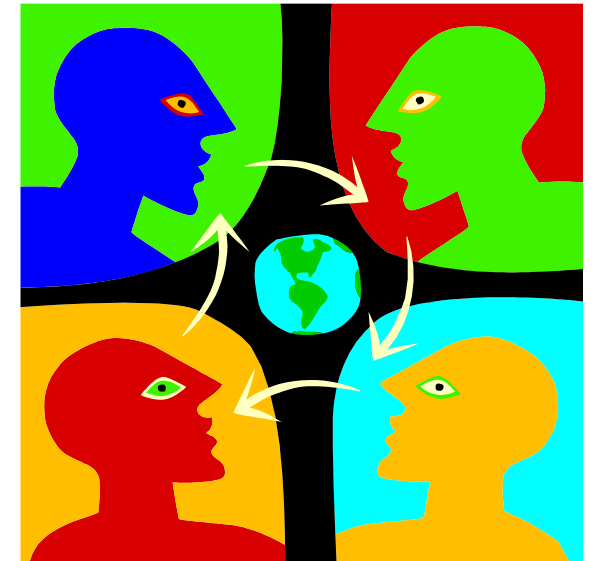
Carespeak is language focused on accomplishing a task e.g. giving instructions or correcting if the person was not following directions or brief approval for cooperation. Carespeak is one way communication, from the caregiver to the person being cared for. Carespeak does not invite communication from the person.

What are examples of Carespeak?

What is the effect of Carespeak on the Person with dementia?

What is the impact on the relationship between the care partner and the Person with Dementia?

(Ward, et.al 2008)



Enabling Elements - Communication built upon unconditional positive regard



How we come into each moment of engagement

The more acceptance and liking we feel towards the other person, the more a relationship will be created that supports communication and well-being.

How we engage with a person from a place of empathy, deep knowing and unconditional positive regard opens us up to understanding the person's current needs and feelings and supports meaningful relationships. Our genuine willingness to actively listen sets the tone for meaningful communication and understanding of each other.

(adapted from Carl Rogers, On Becoming a Person, 1961)

Imagining an Unmet Need

Think of the last time you were really tired.

What led you to know that you were tired?

What did you do in response?

Were you able to meet your needs? What might you have done if you were unable to meet your needs?

How did your exhaustion affect your thinking?

How did it affect your behavior?



Getting to Know Russell / Video



Communicating Unmet Needs

Behavioral and Psychological Symptoms of Dementia (BPSD)

- ▶ Physiological
- ▶ Psychological
- ▶ Social
- ▶ Environmental

Caring for ourselves and our personal needs is a human duty that can also give us great pleasure. Taking a warm bath, brushing our hair, choosing a comfy sweater, eating a favorite food, brushing our teeth, and crawling into a welcoming bed are all ways to respect and replenish our bodies and minds. You could say that this caring is a kind of self love!

What is your favorite aspect of your own personal care routine? Why is this your favorite? How does it make you feel?

Personal Care and Daily Rhythms





Bathing, dressing and maintaining continence can be difficult daily activities and cause much distress for people living with dementia.

Polling Question

True or False

50% of Demonstration of Behavioral and Psychological Symptoms are caused by receiving personal care

Breakout Rooms...

Why is personal care so difficult for some people living with dementia and what might cause the distress?

Understanding the Strengths of Elders

We often think about self-care skills as just having the physical ability to

perform the task - But it so much more complex!

It includes many skills and abilities.

The ability to start, sustain, and complete tasks

To safely and independently complete the activity

To understand the goals and purpose of the task

To set up the task by bringing all equipment and materials to the setting

Many Elders living with dementia will need some help and encouragement to continue to accomplish self-care.

What are some examples of assistance and encouragement?





Positive Physical Approach – Teepa Snow

- 1. Come from the front,**
- 2. Go slow,**
- 3. Get to the side,**
- 4. Get low,**
- 5. Offer your hand,**
- 6. Call them by name.**

<https://www.youtube.com/watch?v=xylQt7TxDwo&list=PLVI8vTLjje8HYzBqMC8d24T8jIQrHadAi>

Ways of Helping: Visual, Verbal and Tactile Cueing

Cueing is key to providing the just right help for Elders.

Cueing is defined as using visual, verbal or tactile techniques, such as hand signals or minimal words, to key the other person about the task. Cues should cater to the various verbal, visual and kinesthetic performance needs of the other person.

ASK: So many of you know these things. What gets in the way of you and staff using these approaches?

WAYS OF HELPING

Visual Cues

- Make eye contact, smile
- Use written schedules, notes, reminders
- Label areas and items with simple words to prompt
- Use pictures to remind about what is hidden
- Put things in view one at a time if they are to be used
- Use props to focus or provide choices
- Use gestures and pointing
- Use demonstration – show what you mean by doing it yourself

Verbal Cues

- Use the person's preferred name
- Keep information simple and short
- Say what's going on
- Offer simple choices
- Ask for help
- Ask to try
- Break requests into simple steps
- Always give positive feedback and praise

Tactile (Touching) Cues

- Shake hands to start
- Offer a hug or hand-holding if the person is distressed
- Touch for attention during tasks
- Guide movement – lead the person through once
- Do the harder parts of the task, have them do the easier ones
- Hand-under-hand assistance
- Be careful about rushing to doing for – let the resident do as much as they are capable of for themselves. Even if you need to initiate the task, they may be able to take over once they get it.

Environment Needs to be Supportive!

*What about your
environment
supports the
strengths of
Elders?*

The setting in which the task is performed:

- It includes the physical, social, and cultural environment.
- Consider the room size, temperature, lighting, sound, color, and care equipment. If these conditions are unfamiliar, overwhelming or threatening it can result in the Elder feeling unsafe and unsuccessful at the task.
- The environment in which the person with dementia is doing personal care should be logical.

For instance - If you want individuals to brush their teeth, they should be in a bathroom at a sink with a toothbrush, toothpaste, and glass of water and without extra noise or distractions

The person with dementia may experience problems in some areas but not in others. Keep identifying a persons strengths and needs.

Cueing in Action

Stanley getting dressed

What are his strengths and abilities?

What does Teepa know about him as a person?

What cueing does Teepa use?

How does it support Stanley?

Stanley

What are his Strengths and Needs?

How are they different in their response to the Care Partner?

What does their well-being look like?

Polling Question

Pain is often a factor in preventing success in personal care.

True

False

*Psychosocial
Approaches to Prevent
and Minimize Pain
in People With
Dementia During
Morning Care*

BY KAREN AMANN TALERICO PhD, RN, CNS, LOIS L. MILLER, PhD, RN, KRISTEN SWAFFORD, MS, RN, CNS,
JOANNE RADER, MN, RN, PHILIP D. SLOANE, MD, MPH, AND SHIRIN O. HIATT, MPH, RN

Unrecognized and untreated pain occurs in people with dementia, in large part, because of their inability to communicate verbally. It has been suggested that they communicate pain through behavioral symptoms such as aggression, resisting care, and distressed vocalizations. In this second of 2 articles, clinical results are presented from a pilot study of an intervention to prevent and reduce pain during morning care in nursing home residents with moderate and advanced dementia. Qualitative clinical findings from the psychosocial component of an intervention called CARE (Comfort And Responsiveness Enhancement) are summarized.

And another thing... Pain

ACKNOWLEDGE THE POSSIBILITY
OF PAIN

BECOME AWARE OF THE
BEHAVIORS AND VERBALIZATIONS
THAT MIGHT COMMUNICATE PAIN

CONSIDER WAYS STAFF MIGHT
STIMULATE PAIN AND DISTRESS
DURING MORNING CARE
ACTIVITIES



Breakout Room

What is one thing you are taking away from this discussion that you want to incorporate into your work with staff or families?



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Thank you for your participation and leadership with those living with dementia.

Join the Dementia Leadership Network at
www.DementiaLeaders.net

