

Volunteer

Dementia Training

Dementia and Delirium Team



hello



my name is...

Dementia is now the UK's biggest killer



1 in 3 people over the age of 65 will die with dementia

82% don't realise that dementia is a terminal disease

Wendy Mitchell's Story



University Hospitals Dorset
NHS Foundation Trust

**A Visual Representation of
The Effects of a Deteriorating
Short Term Memory**
by the Brent Admiral Nurses

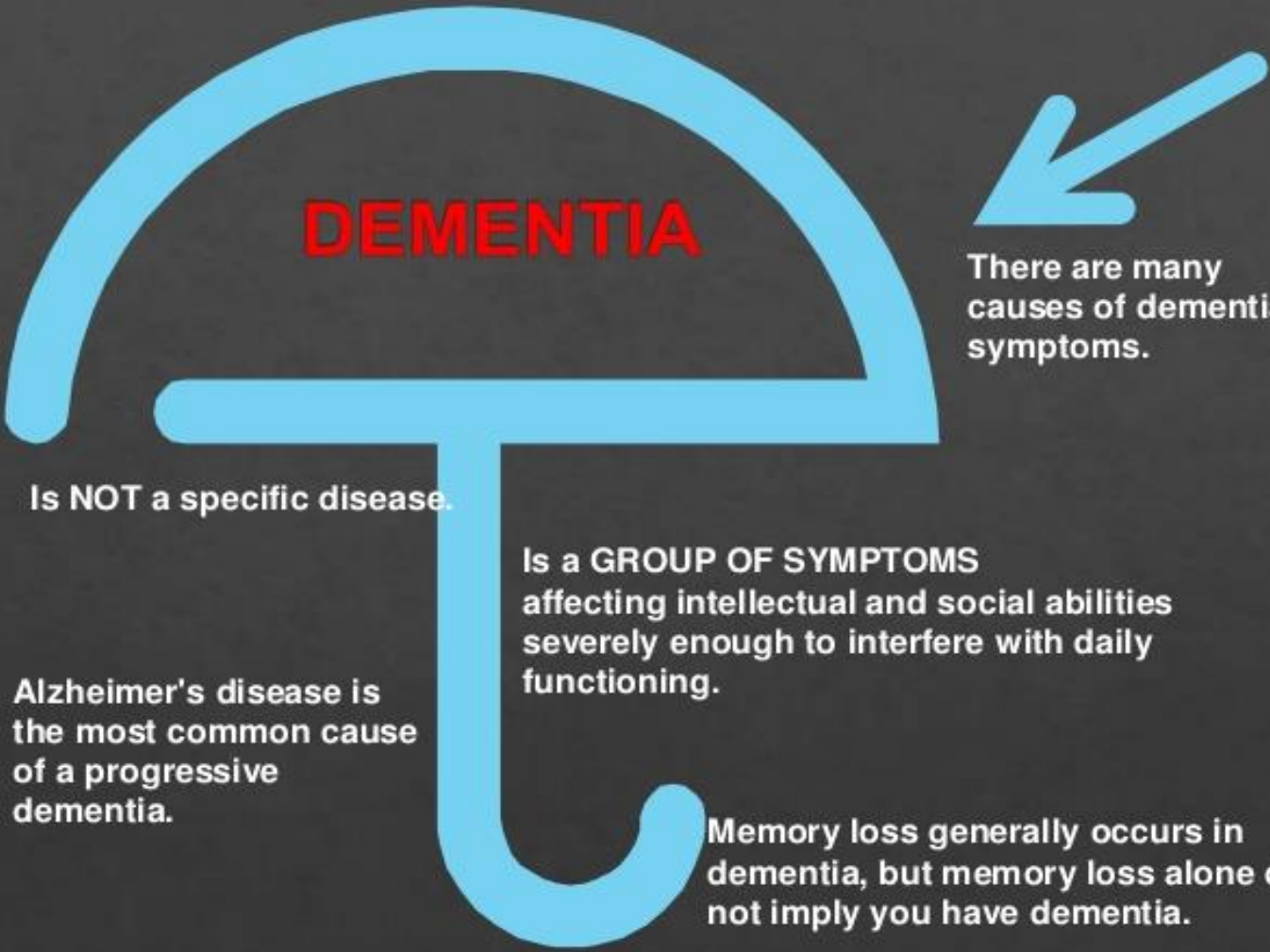
The Carers Information Programme started in January 2008. Each programme runs for seven weeks and covers new and innovative topics relating to dementia care. The courses are co-ordinated by Janice Pedersen and delivered with Sue Whiteman supported by Team Leader Susan Drayton.

Following a meeting in October 2007 between Brent Admiral Nurses it was agreed that a 'Carers Information Programme' would be set up by the team to help address the needs of family carers of people with dementia referred to the Admiral Nurses.

The groups are closed and have educative, social and psychotherapeutic elements.

Any carer of a person with dementia can attend as long as the person with dementia lives in Brent. It is a seven week programme for one and a half hours each week at Belvedere House meeting room.

<https://www.youtube.com/watch?v=8Nna8ZWr720>



DEMENTIA

There are many causes of dementia symptoms.

Is NOT a specific disease.

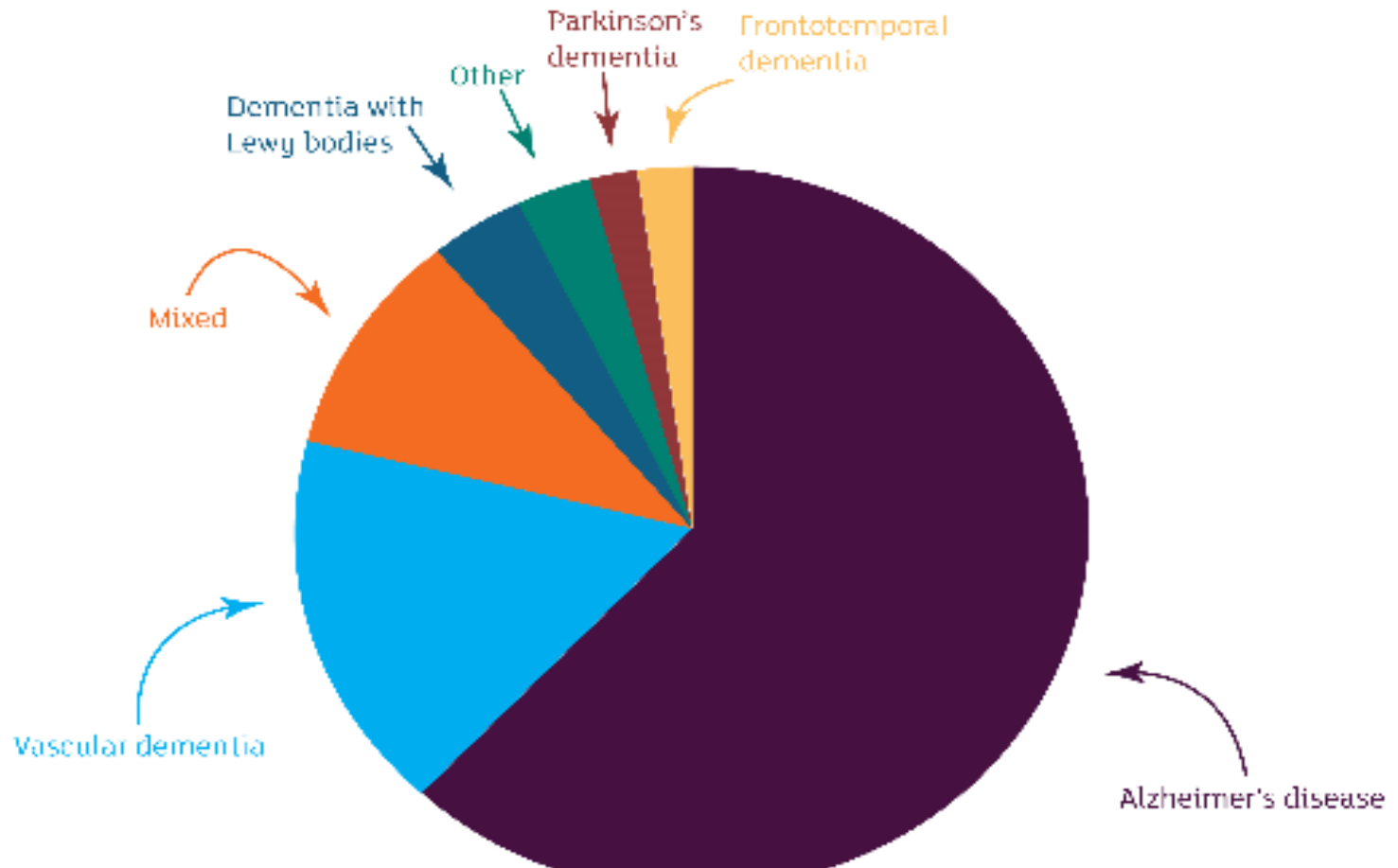
Is a GROUP OF SYMPTOMS affecting intellectual and social abilities severely enough to interfere with daily functioning.

Alzheimer's disease is the most common cause of a progressive dementia.

Memory loss generally occurs in dementia, but memory loss alone does not imply you have dementia.

Types of dementia

Causes of dementia



What is dementia?

Progressive disease leading to








- Memory issues
- Struggling with activities of daily living
- Inability to concentrate
- Lethargy or restlessness
- Personality changes and mood swings
- Issues with filtering
- Communication and word finding difficulties



- Acute onset
- Linked to triggering factors (can be more than one cause)
- Normally reversible
- Affects up to 50% older people in hospital, and 80% people in ITU
- Different types
- Can take up to 3 months to resolve

PINCHME

The *COMMON CAUSES* of *Delirium*

-  **P**ain
-  **I**nfection
-  **N**utrition
-  **C**onstipation
-  **H**ydration
-  **M**edication
-  **E**nvironment

nursingnotes

Living well in hospital

- **Staffing** – training and education
- **Partnership** – carers, discharge planning
- **Assessment** – need, risk, end of life
- **Care** – person centred, preferences, support independence
- **Environment** – comfortable, safe, minimised distractions and noise, orientation
- **Governance** – specialist team and lead, steering group, audit
- **Volunteers** – trained, supported



Therapeutic engagement



Person centred

Keep it simple

Social engagement

Give a sense of purpose and reason

Problem solving techniques

Actively engage people

Promote independence

Music therapy

Orientation and distraction



Communication Changes

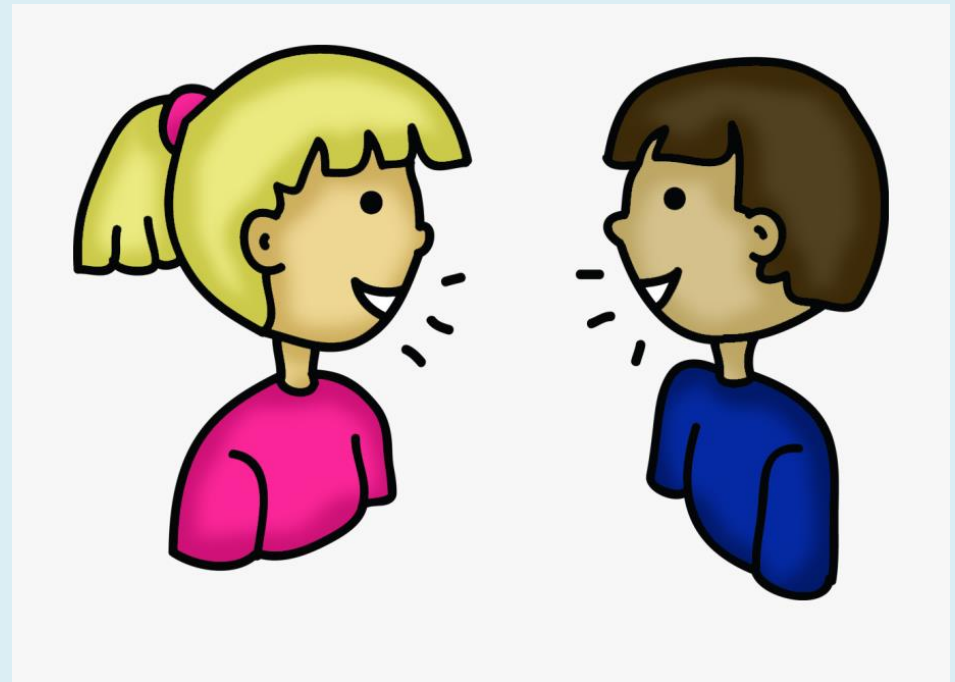
- Word finding difficulties
- Person may 'talk around' the subject
- Reduced fluency
- Difficulties in comprehension of complex sentences
- Reduction of language use
- Difficulties in producing words/phrases
- Becoming 'stuck' on words
- Be disorientated



To Help Communication

- Ensure the person knows you are speaking to them, **use clear non-verbal communication:**

- facial expression
- Eye contact/gaze
- gesture
- body movement
- posture
- touch
- spatial behaviour
- clothing appearance.



Communication

- **Avoid looking rushed**, make that 5 minute conversation your sole focus at that time.
- Make sure **glasses, hearing aids** are clean, in place and turned on.
- **Good lighting** to avoid shadows can decrease anxiety.



- **Use distraction** when necessary
- **VERA model**
 - Validation
 - Emotion
 - Reassure
 - Activity

Cover over mirrors if the person finds their own image alarming/confusing.

Involve the person with dementia and their families to identify communication difficulties and strategies to overcome them.

Communication

- **See the person** NOT the diagnosis and value the humanity of the person
- **Active listening** - Live in the present with that person, accept their reality.
- **Use gestures, pictures and objects as well as words.**
- **Offer visual choices** if the person is having difficulty in making verbal choices, e.g. offer two plates of food instead of filling out a written menu.
- **Prompt the person** about the topic of conversation if they go off track, for example 'You were just telling me about your daughter, Susan'.





This is Me



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The Royal Bournemouth
and Christchurch Hospitals
NHS Foundation Trust

What matters to me....

Name:.....

By sharing this information we hope to make your stay with us more comfortable

Things I would like you to know about me

Please call me...	
The people who know me best are...	
Likes	
Dislikes	
In my life, I...	
I would like you to know...	
What matters to me?	

This document should be accompanied by a 'This is Me' - if you have one at home, please bring a copy in or ask your nurse for one to complete



Look for clues to understand reasons for behaviour:

- More **confused** – infection, medication?
- **Sleepy** – medication, pain, other physical cause, relaxed, contented?
- **Aggressive** – feeling threatened, pain, fear?
- **“Wandering”** – bored, lonely, need the toilet, previously active?
- **Distressed** – unfamiliar setting, confused, fear, lonely, remembering trauma?
- **Unmet need** they are trying to communicate to you.



Nutrition and Hydration in Dementia

- Maintain independence and choice
- Recognition, sensory impairment and food temperature
- Maintain good oral hygiene
- Get up, eat at a table or even together
- Offer fruit squash drinks
- Finger foods and food on the go
- Is patient on a food or fluid chart?



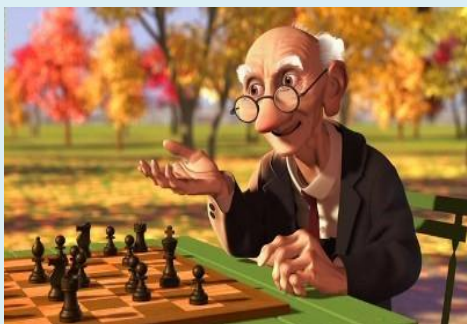
Dementia and Delirium Care at UCH



Therapeutic engagement



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Person centred

Invest five minutes get an hour back

Keep it simple

Social engagement

Give a sense of purpose and reason

Problem solving techniques

Actively engage people

Promote independence

Music therapy

Orientation and distraction





Person with DEMENTIA
PERSON with dementia



12 top tips in caring for a person with dementia



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1 Remember the person

- 'This is me'
- Personal effects

2 Smile!

- The person will notice
- Body language

3 Slow down

- Relax
- Promote independence

4 Help with orientation

- Hello, my name is..
- Routine and reorientation

5 Communicate

- Keep it simple
- Sensory aids

6 Step back

- Keep yourself safe
- Try again later

7 Keep it quiet

- Stop and listen and reduce noise
- Avoid overstimulation

8 Don't argue

- Go with the flow
- Acknowledge and respect

9 Engage

- Meaningful activity
- Encourage and praise

10 Distract

- Talk about their life
- Give them something to do

11 Talk with others

- Share good practice
- Document interventions

12 Be aware of sudden changes

- Consider Delirium
- Refer to Dementia and

Any Questions?

If concerned about a patient please contact our team or ask the ward staff for advice. Please feel free to make use of our therapeutic equipment in our office or ask the wards where their activity boxes are.

Dementia and Delirium Team

Ext: 5512 / 5335

Specialist Nurses Bleep: 2822 / 2127

Support Workers Bleep: 2681

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NHS

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<https://www.youtube.com/watch?v=9UQ5mjFzHTA>

We are **caring** **one team** **listening to understand** **open and honest** **always improving** **inclusive**

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