

The Care Plan

Care at Night

Continence Care

Daily Life

Dementia

Eating & Drinking

Emergencies

End of Life Care

Family & Friends

Listening & Talking

Mouth & Teeth Care

Privacy & Choice

Dementia



It is highly likely that you will be supporting residents living with some form of dementia. So it is essential you understand its effects and the difficulties people will face as the illness gets worse. They will need your help to feel safe, respected and part of the care home community.

Seeing the person not the illness

Find out all you can about the person from the care plan and from relatives and friends close to them. Knowing something of their life history, talents and interests, as well as medical and care needs, helps you connect with who they really are.

A person may be confused or blur facts with fiction, or may simply be unable to say what they really mean. They may not be able to tell you that they are in pain, or tell you they have eaten, when they haven't.

Dementia can affect memory, word finding and behaviour, as well as causing visual and hearing difficulties. Other health problems and their own personality will affect each person's experience of dementia and ability to cope.

Too often we dismiss a person's behaviour as part of their dementia, without looking more carefully at the causes.

Your body language

A person's emotional sensitivity can be one of the last things to be affected. People can be comforted by expressions of kindness, even if they do not understand the words you are saying. But remember it also works the other way.

Take a moment to check yourself. Feeling stressed or distracted can show in your face or body language or tone of voice and can undermine your efforts to help or reassure a resident.

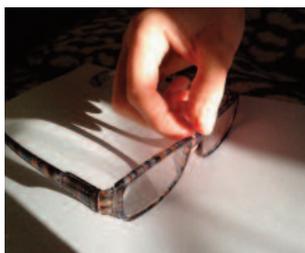
Keep your sense of humour; it can bring you closer to the person, and bring relief to difficult moments or misunderstandings.

Their body language

It is important to recognise signs of distress and act upon them. Restlessness, face pulling, agitation, shouting or screaming may be because

GOOD DEMENTIA CARE IS A LEGAL REQUIREMENT

Care homes must treat residents with dementia with respect and dignity and always act in their best interest at all times. *Mental Capacity Act 2005*. Care homes must meet the welfare and safety needs of residents. *The Health & Social Care Act 2008 (Regulated Activities) Regulations 2014: No 9 Person centred care, No 10 Dignity and respect, No 11 Need to consent, No 12 Safe care and treatment, No 13 Safeguarding service users from abuse and improper treatment, No 14 Meeting nutritional and hydration needs*



NOT MY GLASSES

Samita, Mrs Patel's keyworker, was surprised to learn that Mrs Patel had been refusing care. She quickly realised that Mrs Patel had been shouting and throwing away her glasses because they weren't hers and were making her sight worse. Having helped Mrs Patel put on her spare pair, she suggested to the manager that glasses be marked so carers would not misinterpret her reactions again.

Keynotes

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LETTING CARE SHOW

Sandra had to intervene when Mrs Cohen was found taking clothes from other residents' rooms. Having admired Mrs Cohen's neatness and manner, Sandra felt she was simply collecting the washing.

It was decided that Mrs Cohen should be encouraged to join staff on the laundry rounds, which she seemed to enjoy and she then stopped going into other residents' rooms uninvited.

they are anxious, frustrated or bored, or may be signs of pain, needing medical attention.

Try to find out the cause, but don't force them to stop or discount their anxiety. Offer reassurance and acknowledge their feelings. Some people may respond well to a hug or placing your hand on theirs, but respect their personal space.

If it is not clear what is causing distress or how to resolve it, ask for support. Dementia training has proved very effective for many care homes, staff and residents.

Keeping involved

Dementia can make people confused about themselves and those around them, but they can still be helped to make their own decisions about their care and how they wish to spend their day.

Supporting them to join in can make all the difference. Involving people in gardening, cooking, and choosing menus can keep them interested in eating.

Help them to join conversations and talk about what interests them, whether past or present.

Family and friends often have good ideas to help residents to do what they enjoy best. Skills, hobbies and habits often remain with them and can be shared and enjoyed. But as a person's memory falters, family and friends might then need your help and support to maintain their relationship.

Sharing the knowledge

It is crucial to report any changes in behaviour and seek help where needed. Keep records updated, including care plans, and be sure to act upon them.

GOOD PRACTICE

British Geriatrics Society and the British Pain Society strongly advocate the regular use of pain assessment tools as, in general, people with dementia are prescribed and given less pain relief medication (analgesia) than other older people despite being just as likely to be in pain. (Kimberly S. et al 2008)



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