

Individualized Dementia Assessment and Care Planning

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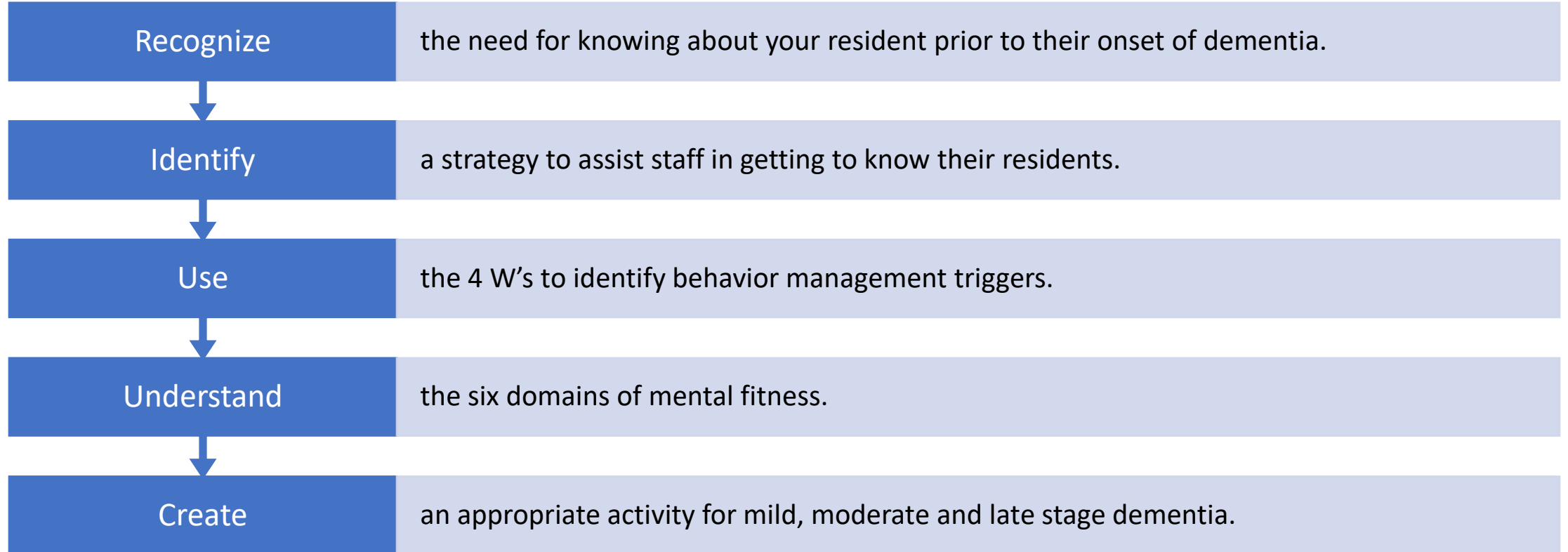
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Disclosures

None

Objectives



Understanding My Journey Will Help You Understand Me



Getting to Know the Resident with Dementia

- Understanding the resident's life:
 - Enables the resident with dementia to share who they are and enhance their sense of identity
 - Leads to better understanding the residents needs
 - Enables staff to better engage with the resident and provide more personalized care
 - Awareness and sensitivity to sociocultural differences

The Information

A photo of the person when they were young

Name I like to be called

Where I lived as a child, young adult, and adult

My favorite things (to talk about, food, music, TV shows)

Pet names

Accomplishments

Places I traveled

Current and past interests

Jobs and occupations

Important daily routines

The Information (continued)

How best to communicate

Prefers bath or shower

Wakes in the morning around this time

Goes to sleep around this time

Sleep pattern/any concerns

Family names and their relationship

Faith based or spiritual beliefs

What makes me feel better when I am anxious or upset

Personality traits

Additional Information

Confidential Information (Family relationships (+) or (-); Traumatic life events)

Logistics for Gathering this Information



Appoint a dept. to be responsible for distributing and tracking the return of the “Getting to Know Me” document



Initiate during the inquiry process or care plan meetings



Share that completing the “Getting to Know Me” document is voluntary



Identify where these documents will be housed i.e. notebook or electronic medical record



Include additional pages for staff observations of what worked and what didn’t work



Include a communication form for notification of changes to the documents

Meet Glendora Neilson

Inquiry process:

- 86-year-old, married, heterosexual, non-Hispanic White woman
- Husband has been caring for her over the last three years due to dementia
- Mrs. Neilson's previous work-up revealed mild/moderate dementia
- Mrs. Neilson now requires more assistance that her husband can provide
- Mr. Neilson reports that his wife:
 - loses her balance a few times when walking
 - lost weight over the last six months
 - needs her clothes laid out and assistance with dressing and undressing



Glendora's Journey

- **Name I like to be called** – Glendora
- **Where I lived as a child, young adult, and adult** – grew up in San Francisco
- **Attended college** in San Diego and have lived in Pasadena for over 40 years
- **My favorite things (to talk about, food, music, TV shows)** – I love to talk about all my travels and vacations with my husband and children, classical music, French and Italian food. I really enjoy watching Jeopardy . My favorite TV channel is PBS because it offers interesting history, music, drama and science .
- **Pet names** – my grandchildren call me Nana
- **Accomplishments** – I have been married to my husband Tom for 60 years . We have a son and a daughter and 5 grandchildren . I have been a member of the Pasadena Historical Society serving as Past President . I have served on the Women's Committee of the Pasadena Symphony and in 1985 chaired the *Holiday Look In Tour* – a fundraiser for the Pasadena Youth Symphony.
- **Places I traveled** – We have traveled extensively in Europe and the US. Tom is originally from New York City so we have spent holidays and vacations there with family. Reminiscing about my travels is something I love to do.
- **Current and past interests** – I have enjoyed playing golf for many years with my husband although I haven't played in over four years. I also enjoyed walking and yoga.
- **Jobs and occupations** - I was an elementary school teacher for 40 years.
- **Important daily routines** – I'm an early riser. I read the newspaper when eating breakfast. In the afternoon I take a break with a cup of tea.

Glendora's Journey (continued)

- **How best to communicate** – verbally
- **Prefers bath or shower** – shower
- **Wakes in the morning around this time** – 7:00am
- **Goes to sleep around this time** - 9:00 pm
- **Sleep pattern/any concerns** – starting to wake up in the middle of the night
- **Family names and their relationship** –
 - Husband - Tom – retired engineer with JPL
 - Son - Patrick Daughter - Regina
 - Grandsons - Pat, Mike and John
 - Granddaughters - Liz and Glenn
- **Traumatic life events** - Loss of parents – both died at early ages , death of only sister
- **What makes me feel better when I am anxious or upset** – listening to classical and spiritual music and talking about my travels.
- **Personality traits** – generally good humored, friendly and cares deeply for her family. Enjoys conversations with others.
- **Additional Information...** Since Glendora retired her social connections and activities have diminished. She spends most of her time alone with Tom at home. Their children and grandchildren do not live locally but call often. Tom feels her mental and physical condition would improve with more social interaction.

Care Planning

Knowing the resident
Understanding resident behaviors
Assessment and planning



Glendora's Care Plan Includes:



- Involve Glendora is choosing her daily outfit
- Assist with self-care
- Engage in conversations that involve travel and vacations
- Provide newspaper during breakfast
- Engage in conversations about current events
- Participate in small group cluster activity/conversation for mild/moderate stage dementia
- Encourage golf-putting in the outdoor patio area when husband visits
- Assist with daily outside walks (weather permitting)
- Participate in group exercise
- Provide time for spiritual enrichment
- Provide Zoom time for connecting with children/grandchildren

An elderly woman with short, grey hair is sitting in a hospital bed. She is wearing a light blue hospital gown. Her hands are pressed against her face, covering her eyes and nose, suggesting she is crying or distressed. The background shows a hospital room with a window and a metal bed rail.

Yesterday This Happened...

- **Glendora was not herself**
 - **8:00 - 9:00am - Ongoing yelling**
 - **11:00am – Continuous hand-wringing**
 - **12:00pm – Did not eat lunch**
 - **3:00pm – Did not participate in group activity**
 - **Woke up frequently throughout the night**

Root Cause Analysis - RCA

What is RCA?



- Process to identify the behaviors, triggers and strategies to address challenging behavioral events:

- Reconstruct the event
- Determine the triggers
- Eliminate situations that trigger the event

Conduct a Root Cause Analysis

- What is the root cause of the behavior?
 - What may have triggered it?
- The 4 W's
 - **What** was happening? What was the resident doing?
 - **Who** was present?
 - **Where** was it happening?
 - **When** was it happening?

Basic Steps to Behavioral Management

1

1. Identify the Behavior

- No behavior happens for no reason
- All behaviors communicates something
- All behaviors have a trigger (reason)

2

2. Identify the triggers (reasons; root cause) of the behavior

3

3. Identify individualized, person-centered interventions

Factors that Contribute to Behavioral Challenges

Trigger Category/Unmet Needs	Examples
Medical/Physical	Pain, other discomfort, hunger, thirst, constipation, sensory loss, medication induced
Emotional/Psychiatric	Depression, anxiety/fear, trauma-history/retraumatization, psychosis (delusions, hallucinations)
Cognitive/Communication Difficulties	Dementia, MCI, delirium, aphasia
Environmental/Interpersonal	Over-/under-stimulated, lack of meaningful activities, change in staff/shift, staff behaviors, noise, lighting, temperature
Adjustment Difficulties	Loss, functional decline, reduced sense of control, less personal space, first time with roommate, new routine

Here's What the Team Identified

Emotional/Psychiatric

- Glendora was uncharacteristically quiet over the last three days.

Environmental/Interpersonal

- Glendora did not get her morning paper with breakfast because her primary CNA who usually delivers the paper is on vacation.
- Glendora did not participate in activities over the last three days.

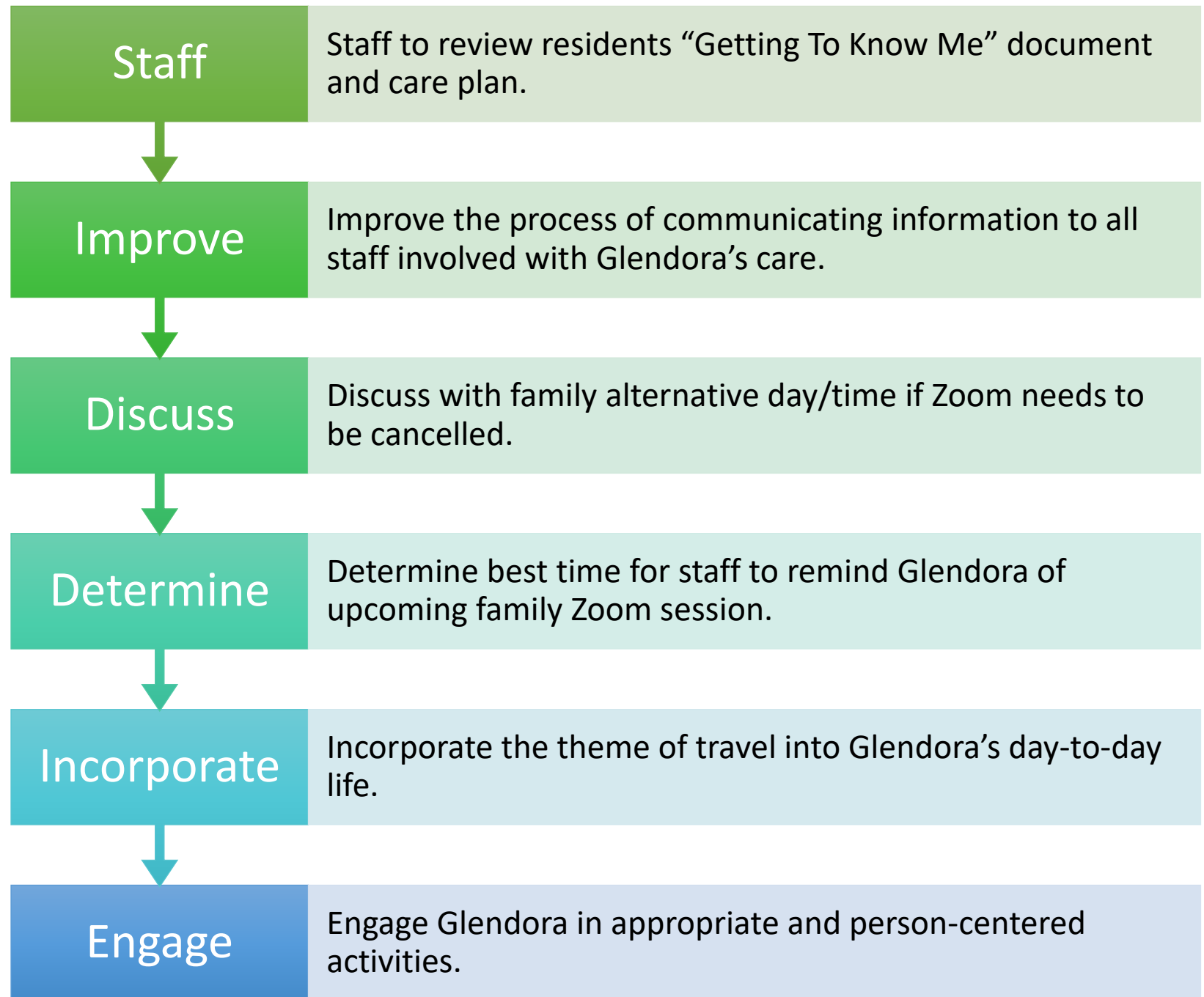
Adjustment Difficulties

- Glendora's family cancelled the morning Zoom meeting at the last minute.

As a Team – What Can We Do for Glendora?



Addressing the Situations that Caused the Triggers



Why is it Important to Adapt Activities for Each Stage ?

Successful resident engagement

- We must understand and adapt activities for each stage
- Activities should be new to the brain and a mental stretch

We want each resident to age successfully

Stimulating and appropriate activities provide residents with a sense of purpose and a strong social connection

Mild and Moderate stages include activities that continue to stimulate the brain cells

Late-stage dementia activities rely on more sensory experiences that are more familiar and result in Use

Stages of Dementia

Mild

A person may function independently but have memory lapses. Common difficulties include:

- Coming up with the correct word or name
 - Difficulty performing tasks
 - Forgetting material just read
 - Increased trouble planning or organizing
-

Moderate

Dementia symptoms are more pronounced. Common difficulties include:

- Confusing words
 - Getting frustrated or angry/ act in unexpected ways
 - Difficulty expressing thoughts and perform tasks without assistance
 - Wandering
-

Severe

Dementia symptoms are severe. Common difficulties include:

- Losing one's ability to respond to the surroundings
 - Difficulty carry on a conversation
 - Difficulty controlling one's movement
 - Difficulty initiating activities (but can still participate/benefit)
-

6 Domains of Mental Fitness for Dementia Care

1. Critical Thinking

- Important for person to practice organizing ideas
GOOD ACTIVITY – Dissecting proverbs and idioms
- **Example: “TRAVEL TEACHES US TO SEE”**
 - **Mild stage** – discuss at length – what does this mean to you
 - **Moderate stage** - adapt discussion with more prompts
 - **Late stage** – Read articles from travel magazines, put travel posters in room – hearing and sight

6 Domains of Mental Fitness for Dementia Care

2. New Learning

- Keep using brain reserves
- ACTIVITY- Learn a new word
- Example: I would like to introduce you to a new word – you like new words
- **Mild Stage:** The word is about traveling.
 - Don't worry most people aren't familiar with this word. I will tell you the word, use it in a sentence, give you three choices to pick the meaning.
 - The word is HODOPHILE
 - She spent all her time seeing the world, she was a total HODOPHILE
Does it mean A. a person who is talented, B. someone who loves to travel, C. a scientist
- **Moderate Stage:** Introduce a simpler word i.e., globetrotter
- **Late Stage:** Show a picture of a vacation site, help the person do a watercolor

6 Domains of Mental Fitness for Dementia Care

3. Memory Games

- Challenge your brain by listing items with specific categories
- **ACTIVITY:** List words about travel and leisure beginning with the letter “B”

Example: Backpack, boat, barbeque, beach, biking, bugs

- **Mild Stage** – Play for 5 to 10 minutes
- **Moderate Stage** – Shorten the time of play
- **Late Stage** – Play songs related to travel: Leaving on a Jet Plane, Take Me Home Country Road, Travelin’ Man

6 Domains of Mental Fitness for Dementia Care

4. Long Term Memory

- Use memory in making decisions, following directions, step by step sequencing
- FUN ACTIVITY – Place words in alphabetical order
- **Example: List of words: campground, museum, train, adventure, parade, vacation, luggage, relax, explore, hike, sunscreen**
 - Mild Stage** – Use list of about 12-14 words in 1-2 minutes
 - Moderate Stage** – Use less words / modify the complexity of the words / give hints
 - Late Stage** - Make a picture collage of the words – talk about

6 Domains of Mental Fitness for Dementia Care

5. Analytical Thinking

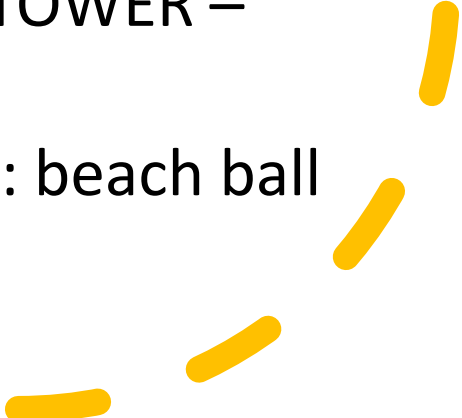
- Problem solving skills, makes person think
- ACTIVITY – “Solving the Triplets” What is the one thing in common in the following sets:
- Example:
 - **Mild Stage:** Fishing pole, Broken leg, Broadway Show (All have casts)
 - **Moderate Stage:** Captain, Chief, Chef (All are leaders)
 - **Late Stage:** Show three pictures, which two are alike

6 Domains of Mental Fitness for Dementia Care

6. Memory Body Movement

- Simultaneous mind/memory/body movement
- ACTIVITY - Square dancing, Draw a figure

Example:

- **Mild Stage:** Look at a simple figure – LIGHTHOUSE – draw it, then hide it, draw again from memory
 - **Moderate Stage:** Simpler figure – TOWER – draw it while Tower is in view
 - **Late Stage:** Give objects to hold Ex: beach ball or sandbag
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References and Resources

- Provider Magazine –August 2014 A Passport Into My Life – Understanding My Journey will Help You Understand Me.
- Creating a Life Story Dementia UK <https://www.dementiauk.org/get-support/maintaining-health-in-dementia/creating-a-life-story/>
- Getting to Know Me Scotland <https://www.AlzScot.org>
- This Is Me <https://www.Alzheimers.org.uk>

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THANK YOU