

**Teaching Front line staff to work with People who have dementia**  
De Minner RN, BSN

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**Objectives**

Participants will be able to:

- ▶ Recognize the importance of teaching and supporting staff in the use of relationship based care.
- ▶ Demonstrate knowledge of the need-based dementia-compromised behavior model and its use in training staff to understand behaviors, and to problem solve expressed needs.
- ▶ Discuss the analysis of care, interaction from the perspective of the individual with dementia.

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**Sounds a Lot Like Person-Centered Care**

- ▶ A complex system of care partnering and delivery
- ▶ Encompasses relationships, the Person's perspective, interactions, choice, comfort, health, social support, & respect for Personhood.
- ▶ It is difficult to define & often thought of as something different from day to day care, ie one more thing!

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**PCC starts with relationship-based care**

Care that uses connection and relationship to establish a bond of trust between carers and individuals. It creates a care partnership that makes care easier to accomplish. It honors the worth and value of the individual.

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- ▶ Person/Staff
- ▶ Staff/Staff
- ▶ Person/Internal & External Community

▶ Trust>Relationships>Collaboration  
>enablement>Personhood upheld

No Trust>No relationships>task oriented  
physical care> decline in skills &  
abilities>Personhood undermined

**Relationships necessary for PCC**

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Lowering my expectations has succeeded beyond my wildest dreams

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### How do I Teach Relationship Based Care?

- ▶ Modeling empathy & value in all relationships & interactions.
- ▶ Sharing Information.
- ▶ Welcoming all information.
- ▶ Clarity and continuity of message.
- ▶ Always consider staff perspective on systems.
- ▶ Encourage Leadership & problem solving at all levels.
- ▶ Give feedback on shared information.
- ▶ Accountability for all staff.

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- ▶ The foundation of Person Centered Care is at the relationship level.

*If there is no support for developing relationships, no matter what is done with the environment, creature comforts & activities you offer, you will not have trust or Person Centered Care!*

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### Need-Driven Dementia-Compromised Behavior Model

Need-driven, dementia-compromised (NDDC) behavior is the most meaningful response or communication a Person with dementia can make in any given situation.

Kolanowski, 2001.

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- ▶ It is influenced by:
- ▶ *limitations* from dementia &/or other debilitating illnesses,
- ▶ *strengths* from a Person's personality, abilities, & past,
- ▶ *challenges &/or supports* offered by the environment.

Kolanowski, 2001.

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### Words I Have Heard Used to Describe Residents

- ▶ Attention Seeking
- ▶ Manipulative
- ▶ Annoying
- ▶ Needy
- ▶ Frequent Flyer
- ▶ Demanding
- ▶ Disruptive
- ▶ Difficult
- ▶ Abusive
- ▶ Resistant to Everything
- ▶ Controlling
- ▶ Yeller
- ▶ Mean
- ▶ Feeder
- ▶ Clingy
- ▶ Ill-tempered
- ▶ Hostile
- ▶ Problematic
- ▶ Disgusting

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### 5 Core Psychological Needs

- ▶ ***Inclusion***—Being part of a group is important for survival of the human species. People with dementia are at risk for isolation even when in a communal setting.
- ▶ ***Identity***—Some of our identity is bestowed on us by interactions with others. Do interactions leave a person feeling valued?
- ▶ ***Attachment***—Creates a kind of safety net when the world is full of uncertainty. Without the reassurance that attachment provides, it's hard for anyone to function well.

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### 5 Core Psychological Needs

- ▶ ***Occupation***—To be involved in the process of life that is personally significant. It should draw on the Person's skills & abilities. Occupation is the opposite of boredom & hopelessness.
- ▶ ***Comfort***—The need for comfort can be especially great because of the sense of loss that arises when a Person must deal with failing abilities, or the ending of long standing way of life.

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### Indicators of Well-Being

- ▶ Assertiveness
- ▶ Bodily relaxation
- ▶ Sensitivity to needs of others
- ▶ Responding to & use of humor
- ▶ Creative self expression
- ▶ Showing pleasure
- ▶ Helpfulness
- ▶ Initiating social contact
- ▶ Showing affection
- ▶ Signs of self respect
- ▶ Expression of a range of emotions

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### Indicators of Ill-Being

- ▶ Unattended despair
- ▶ Intense anger
- ▶ Unattended grief
- ▶ Anxiety fear
- ▶ Boredom
- ▶ Physical discomfort
- ▶ Bodily tension
- ▶ Agitation
- ▶ Apathy
- ▶ Withdrawal
- ▶ Withstanding powerful others

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### The importance of Perspective

- ▶ The key is to teach your staff to work **WITH** the person's experiences not against them.

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### The Most Important Question!

- ▶ WHY??



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### Staff Behaviors that support Core Needs

<i>Enhances Comfort</i>	<i>Enhances Occupation</i>
› Warmth	› Empowerment
› Holding	› Facilitation
› Relaxed Pace	› Enabling
<i>Enhances Identity</i>	› Collaboration
› Respect	<i>Enhances Inclusion</i>
› Acceptance	› Recognizing
› Celebration	› Including
<i>Enhances Attachment</i>	› Belonging
› Acknowledgment	› Fun
› Genuineness	
› Validation	

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### Staff Behaviors that Undermine Core Need

<i>Undermines Comfort</i>	<i>Undermines Occupation</i>
› Intimidation	› Disempowerment
› Withholding	› Imposition
› Outpacing	› Disruption
<i>Undermines Identity</i>	› Objectification
› Infantilizing	<i>Undermines Inclusion</i>
› Labeling	› Stigmatization
› Disparagement	› Ignoring
<i>Undermines Attachment</i>	› Banishment
› Accusation	› Mockery
› Treachery	
› Invalidation	

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### VIPS Model

- › **V**- A value base that asserts the absolute value of all human lives regardless of age or cognitive ability
- › **I**- An individual approach recognizing uniqueness
- › **P**- Understanding the world from the perspective of the Person served
- › **S**- Providing a social environment that supports psychological need

Dr Dawn Brooker PhD

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### Where are the Gaps & Struggles?

- ▶ Understanding of breadth of care
- ▶ Understanding of disease processes that not only cause dementia but affect behavior expressions
- ▶ Understanding of contributing factors to stress reactions
- ▶ Understanding of psychosocial needs
- ▶ Time limitations
- ▶ Understanding of PCC
- ▶ Understanding of expectations of leadership
- ▶ Mixed messages

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### Wrap Up

- ▶ Model, foster & teach Relationship Based Care
- ▶ Encourage input, problem solving and leadership at all levels
- ▶ Insist that all behavior has meaning
- ▶ Teach staff what ill being and well being look like
- ▶ Use a universal language & defined behaviors to communicate among all types of staff
- ▶ Assess behavior expressions and stress reactions from the resident's pererspective!

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