



**Editor's remarks:** Happy 2015! January is the national Alzheimer's awareness month and a great time to reflect on what we can do better to support Patients With Dementia (PWD) and their families. We are also happy to celebrate our 10<sup>th</sup> edition of PRC-PC Newsletter, providing quick tips and useful information to fit your fast-paced practice to help you in the care of PWD. In this edition we will share 10 tips for effective communication with PWD. Due to changes in the brain PWD may perceive and experience situations and the environment differently. Understanding the PWD experience can be useful when communicating with a PWD in order to avoid unnecessary distress and anxiety on their part and to help us achieve our goal of providing a safe and pleasant care environment and the best care possible (Einat Danieli – OT.Req. Ont; PRC-PC).

## TIP OF THE MONTH x 10

Tips on how to effectively communicate with people with dementia:

1. Talk directly to the person and include him/her in the conversation as much as possible.
2. Talk from the front in the person's eye level
3. Smile! Keep your tone of voice, expression and body language warm and calm, use touch if appropriate.
4. Use short sentences and simple one step instructions
5. Avoid long complicated explanations and questions. When necessary try to limit to Yes or No questions
6. Focus on the emotion rather than the content or factual information. "I can see that you are worried"; "It's ok we are here to help you".
7. Don't argue or rationalize, instead, validate the emotion and redirect. e.g. "I can see how much your mother means to you. Tell me more about her".
8. Use gestures and other non-verbal signs
9. Speak slowly keeping a normal tone of voice and allow the person time to respond.
10. Don't take it personally and help the caregivers do the same.

## OUR DEMENTIA 'TOOLBOX'

How to Handle Challenging Behaviours – [tool](#)  
Communication tips [Alzheimer's Society of Toronto](#)  
And [Alzheimer's Society UK](#)  
Video examples: [Link1](#); [Link 2](#); [Link3](#);

## WORKSHOPS, CONFERENCES AND ARTICLES OF INTEREST: **SAVE THE DATE!**

The Education Consortium, of the Behaviour Support for Seniors Program is offering a **FREE** Education Day on "[Living at Risk with Dementia](#)" on Feb' 6<sup>th</sup> at Baycrest. [Spaces are limited](#). For more details about registration follow this [link](#) for registration

## STORIES FROM THE PRC-PC CONSULT LINE

**Situation:** Patient with dementia in the moderate stage living with her daughter who is her main caregiver. In the past few months the daughter has gradually become frustrated with her mom's behaviours stating that she has been doing the opposite of what she is asking her i.e. taking the cup of coffee and spilling it when asked to leave it on the table; closing the door when asked to leave it open, etc. The daughter feels it might be her mother's way of telling her she is not happy with the care she is receiving.

**Physician's main concern:** What is the nature of these behaviours? How can I help resolve this situation? What kind of support can I offer the daughter?

**Background:** Patient is a woman in her late 70's she has been a widow for 10 years and 5 years ago her daughter moved in with her in order to take care of her as her dementia progressed.

### Assessment: Things to consider:

- Any physical cause such as pain or discomfort that might be causing agitation
- Possibility of Depression
- What is the patient's ability to understand instructions? Is Aphasia present?
- How is the daughter communicating with her mother? Could she be unintentionally triggering the behaviours?

### Recommendations:

- Assess for physical pain using the [DS-DAT](#) or [PAIN-AD](#) and overrule other physical causes.
- Look for signs to indicate depression using [SIG E CAPS](#).
- Conduct a cognitive screen using a tool such as [GP-cog/MMSE](#) to explore comprehension
- Observe patient/daughter communication to identify sources of misunderstanding.
- Refer to the [Behaviour Support Outreach Team](#) to assess the behaviour at home, identify possible triggers and develop an intervention plan accordingly. ([Referral form](#))
- Refer the daughter to caregiver support services through [the Alzheimer Society of Toronto](#) and the Reitman Centre [CARERS Program](#) to get more information and insight into her mother's behaviour and gain tips and skills on how to effectively communicate with her mother.

### Outcome and the importance of education

After completing the assessment we realized that the patient was indeed experiencing aphasia and in fact was likely trying to comply with her daughter's instructions but was responding to her gestures to the cup/door rather than her spoken words. PRC-PC provided tools and information regarding communication strategies. The physician explained to the daughter about the changes in her mother's ability to function and communicate and discussed alternative strategies. By providing this information the physician helped the daughter feel better about her caregiving abilities and her relationship with her mother.

For additional information, support, resources or case-based consultation, please contact your PRC-PC directly at: 416-586-4800 ext. 5251 or [edanieli@mtsinai.on.ca](mailto:edanieli@mtsinai.on.ca) or visit our website at [www.mountsinai.ca/reitman/prc-pc](http://www.mountsinai.ca/reitman/prc-pc)