Care Staff Helpsheet



Considerations for looking after a patient with dementia in an acute care setting



Background

When providing a service or treatment to someone with dementia, there are times when the condition creates difficulty with connection. This can be challenging within a hospital setting, especially in time critical situations or during lengthy admissions. Reducing the stress levels for a patient with dementia is not always easy and the following information has been compiled as a reference guide to assist you in your practice.

Getting to know the person

Keep in mind that the patient has gone from a familiar to an unfamiliar environment quite quickly. Dementia can make it difficult staying orientated in a constantly changing environment. With many new and unfamiliar faces there will not necessarily be context for who you are or what you do. With increasing confusion and anxiety, they may feel scared and frightened. Early connection will assist the person to feel supported and cared for.

Gathering information from family or care providers can aid in establishing a quicker rapport. You may find the following a useful start:

- How does the person like to be referred to?
- Is there anything that may be said or done that may trigger a negative response?
- Any like or dislikes you can think of?
- What can we do to assist your family member to feel more comfortable?

Ask family if there are personal objects, they could bring in that would assist in providing comfort and reassurance. Ensure family clearly label items.

If family are unable to stay with the patient ask them to write a note in large print saying something like – "Hi Mum, I am looking after the cat. I will make sure he is ok. I will see you soon. Love Jill x". This gives them something to hold and may be read by them or by staff for reassurance.

If they have an electronic device with them, get family to record an audio or video message saying something like, "Everything is ok mum, it's important for you to stay here while the doctors and nurses give you a check-up. You will be going home soon".

It is important to adjust expectations of what someone with a degenerative brain disease can provide and achieve during this time.

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Talking to the person with dementia

A calm and friendly manner will go a long way in connecting. Try to avoid explaining lengthy and complicated processes but still make them feel included using terms they will likely understand.

Provide regular reassurance and maintain connection, even if they outwardly appear calm. It is always difficult to ascertain what someone may be thinking or feeling inside.

Consider re-introducing yourself each time you speak or say something like "as your Doctor/Nurse today, I just need to check..." prior to any intervention.

Repeated questions or words are an indicator that the person is becoming more anxious or frightened. When replying to the person, it is useful to be aware of using a calm tone of voice. Reply like you are saying it for the first time. They will likely respond to the tone you are using rather than the words you are saying.

The hospital environment

If a patient appears unsettled or agitated, consider environmental factors such as:

- Needing the toilet but unable to ask or remember where it is.
- Hunger or thirst consider food tray and drink placement and holding food out to them.
- Lighting may be too bright or too dark and casting frightening shadows.
- Minimise overstimulation from noise and visual distractions as much as possible.

These strategies are designed to create a calm and safe environment in an area that will likely be stressful for your patient. They may not always be practical, but if considered, may lead to a decrease in more distressing and labour-intensive interventions.

SSURANCE SCTION, Utwardly Include the person in any conversations conducted near them, even if they do not appear to understand. This can be a time where yes or no questions may be more useful. Keep in mind that someone with

appear to understand. This can be a time where yes or no questions may be more useful. Keep in mind that someone with dementia may answer yes or no without fully hearing or understanding the question.

Charades may sound silly but can be used as an effective communication tool. They may also be an effective icebreaker if you give an Oscar worthy performance. For example, when asking if the person is thirsty, show them a drink bottle or do a drinking action so they have a better chance of understanding.

