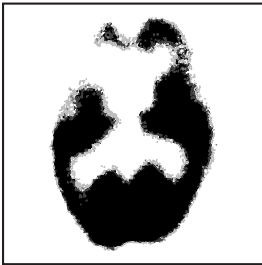
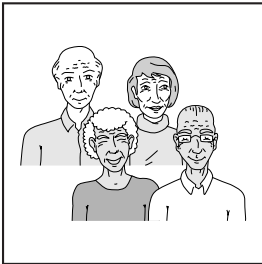
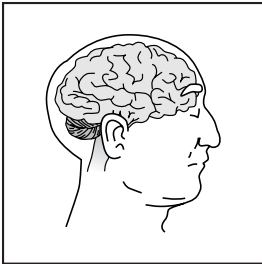


Caring for the Person with Alzheimer's or other Dementias

Paula Siciliano, MSN, GNC



Caring for the Person with

ALZHEIMER'S

or other Dementias

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NOTICE TO THE READER

Though the guidelines contained in this text are based on consultations with healthcare professionals, they should not be considered absolute recommendations. The instructor and readers should follow employer, local, state, and federal guidelines concerning healthcare practices. These guidelines change, and it is the reader's responsibility to be aware of these changes and of the policies and procedures of her or his healthcare facility/agency.

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Fran Gillen, of the Alzheimer's Disease Education and Referral Center, for her early assistance in collecting source material and for helping us put our customers in touch with the ADEAR Center. We strongly recommend that all in-service directors order the ADEAR catalog of materials; it is excellent.

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Four million Americans currently suffer from Alzheimer's disease and an estimated six to nine million will have the disease by 2040 if a cure is not found. Because half of nursing home residents are living with Alzheimer's, and an even greater number of people with Alzheimer's are living at home, it is essential that all healthcare workers, whether nursing assistants, home health aides, or others, be trained and supported in providing the best possible care for people living with Alzheimer's disease.

We have designed this in-service to help you ensure that your clients or residents with Alzheimer's or other dementias receive the best possible care. We hope these materials will help make your job easier and more rewarding.

This in-service is organized by learning objectives. Each objective follows a lesson plan, which is built around learning activities and teaching tools, such as transparency masters, handouts, and assessments. You may decide to use none or all of these tools in your presentation.

Because the in-service covers a lot of material, you may wish to divide your presentation into two parts:

1. Learning Objectives 1-6
2. Learning Objectives 7-11

We have indicated on the assessments where to break if you are teaching this in-service in two sessions.

Some additional resources on Alzheimer's can be ordered from various agencies and organizations. We include order forms at the back of this SourceBook to request these materials. Be sure to send the order forms promptly as it can take time to receive the materials.

Please note that limited permission is granted to photocopy the handouts for use at the site originally purchasing this in-service. Photocopying other parts of this in-service, including the lesson plan, is expressly prohibited.

To use handouts, photocopy the number needed for your group. Consider using different colors of paper to organize the different handouts or to make some stand out.

Convert transparency masters to acetates for use with an overhead projector. You can do this by purchasing transparency film at an office supply store and photocopying the transparency masters onto the acetates, or you can have a copy company do it for you. If overhead projection is not convenient for your presentation area, you may wish to copy the information from the transparency masters onto a chalkboard, flip chart, or dry erase board.

Happy Teaching!

Introduction and Assessment

Estimated Time: 5-15 minutes

Tools: Handout Intro-1 Assessment A
Handout Intro-2 Assessment A Answer Key
or
Handout Intro-3 Assessment B
Handout Intro-4 Assessment B Answer Key

Handout Intro-5 Note-Taking Worksheet
Handout Intro-6 Key Terms

Learning Activity: **Lecture**

The learning objectives in this in-service are designed to cover:

- Understanding dementias (including Alzheimer's) and their causes
- Developing skills to work with people who have dementia

Learning Activity: **Assessment**

**Distribute
Handout Intro-1
Assessment A
or
Handout Intro-3
Assessment B**

Two different assessments are provided for your use: one has true/false questions and one has multiple choice. You may choose to use either one as a pre-test and post-test, or you may want to use the true/false assessment as a discussion tool to introduce the in-service and use the multiple choice assessment as a more formal post-test. If you are using one assessment as a discussion tool in your introduction, consider having the participants complete the assessment in small groups, then ask each group how they think they did. Ask which questions they feel certain they answered correctly. This will make a good lead-in to the learning objectives.

Learning Activity: **Discussion**

**Distribute
Handout Intro-5
Note-Taking
Worksheet**

Tell participants to take notes during all lectures and discussions to help them organize and remember the information presented.

**Distribute
Handout Intro-6
Key Terms**

Depending on your preference this handout can be used to preview or to review the terms used in the in-service. Cross off or skip over any terms your group does not need to know.

Assessment A

Name: _____ Date: _____

True or False. For each of the following statements, write “T” for true or “F” for false.

Part I

1. ___ A person with dementia was born without the mental abilities necessary to care for him- or herself.
2. ___ An irreversible disease, like Alzheimer’s, can be cured with proper treatment.
3. ___ Alzheimer’s is the most common cause of dementia in the elderly.
4. ___ All forms of dementia are irreversible.
5. ___ A person with Alzheimer’s can live from three to twenty years after symptoms appear.
6. ___ Half of all nursing home residents have Alzheimer’s or a related disorder.
7. ___ No cure exists for Alzheimer’s disease.
8. ___ The stages of progression of Alzheimer’s are the same in all patients.
9. ___ In the “late dementia” stage of Alzheimer’s, people have no verbal abilities and need help with all activities of daily living.
10. ___ People with Alzheimer’s can purposely be rude and angry with their caregivers.
11. ___ Taking good care of yourself is an important part of caring for dementia victims, since the job can be so draining.
12. ___ When communicating with someone who has Alzheimer’s, you may need to repeat yourself or use drawings to get your point across.
13. ___ If a person with dementia wants to talk about the past all the time, you should redirect conversation to current events.

Part II

14. ___ As soon as people are diagnosed with Alzheimer’s, they must be confined to their rooms at all times and their activity must be restricted.
15. ___ People with dementia should always wear identification in case they wander away.
16. ___ Marking stairs with brightly colored tape can help prevent falls.
17. ___ When caring for a person with dementia, you should respect their privacy by not asking about bowel movements and toileting needs.
18. ___ The amount of personal care a person with Alzheimer’s needs is likely to increase as the disease progresses.
19. ___ Sundowning means that people with Alzheimer’s tend to become more alert and cooperative towards the end of the day.
20. ___ Depression is common among people with dementia.
21. ___ Exercise can help reduce restlessness and have other benefits for the person with dementia.
22. ___ Excellent care for a person with Alzheimer’s involves promoting the person’s dignity and independence for as long as possible.
23. ___ Marking rooms with signs or pictures is a bad idea because it can confuse a dementia victim.
24. ___ Everyone can benefit if family and friends are involved in Alzheimer’s care.
25. ___ Respite care services are a good way for families of people in home care to get a break.

Assessment A Answer Key

Part I

- 1. False.** Dementia is not inborn. It can be caused by an irreversible disease (like Alzheimer's) or a potentially reversible condition (like drug intoxication or a tumor) that occurs during a person's lifetime. (Objectives 1 and 2)
- 2. False.** An irreversible disease cannot be cured. (Objective 1)
- 3. True.** (Objective 2)
- 4. False.** Dementia caused by certain conditions, like alcoholism or malnutrition, can be reversible if the cause is found and treated. (Objective 2)
- 5. True.** (Objective 2)
- 6. True.** (Objective 3)
- 7. True.** (Objective 3)
- 8. False.** Although there are general stages used to categorize people with Alzheimer's, each person with the disease may show different symptoms at different times. (Objective 4)
- 9. True.** (Objective 4)
- 10. False.** People with Alzheimer's often have no control over what they say or do. Caregivers should never take words and actions personally. (Objective 5)
- 11. True.** (Objective 5)
- 12. True.** (Objective 6)
- 13. False.** Talking about the past or reminiscing can be beneficial for people with Alzheimer's and it can help you learn more about how to provide the best care. (Objective 6)

Part II

- 14. False.** People with Alzheimer's will need different levels of care at different stages of the disease. Many activities can be very therapeutic for people with Alzheimer's and should be encouraged, not restricted. (Objective 7)
- 15. True.** (Objective 7)
- 16. True.** (Objective 7)
- 17. False.** Maintaining and documenting a toileting routine is essential to protect the physical health of a person with dementia. (Objective 8)
- 18. True.** (Objective 8)
- 19. False.** Sundowning means that people with Alzheimer's can become more agitated and restless towards the end of the day. (Objective 9)
- 20. True.** (Objective 9)
- 21. True.** (Objective 9)
- 22. True.** (Objective 10)
- 23. False.** Marking rooms with signs or pictures can help a dementia victim remain oriented. (Objective 10)
- 24. True.** (Objective 11)
- 25. True.** (Objective 11)

Assessment B

Name: _____ Date: _____

Multiple Choice. Choose the correct answer.

Part I

1. A loss of mental abilities that interferes with activities of daily living is called:
 - a. activity therapy
 - b. sundowning
 - c. dementia
 - d. respite care
2. Alzheimer's disease is:
 - a. a reversible condition that can be cured
 - b. an irreversible condition that cannot be cured
 - c. a result of hardening of the arteries
 - d. a result of drug abuse
3. Alzheimer's is the _____ leading cause of death among adults.
 - a. first
 - b. second
 - c. fourth
 - d. tenth
4. Of all the people with Alzheimer's:
 - a. most live at home
 - b. most live in nursing facilities
 - c. most are hospitalized
 - d. most are homeless
5. All the following statements about Alzheimer's are true EXCEPT:
 - a. No cure exists for Alzheimer's.
 - b. Gradual memory loss is often an early symptom.
 - c. The only definitive diagnosis is by autopsy.
 - d. Alzheimer's is caused by high blood pressure.
6. In the "late dementia" stage of Alzheimer's, a person will not be able to:
 - a. speak
 - b. control bladder or bowels
 - c. eat without assistance
 - d. do any of the above
7. In order to determine how much mental ability has been lost, we may use:
 - a. reminiscence therapy
 - b. a mental status questionnaire
 - c. blood tests
 - d. MRI
8. All of the following are helpful attitudes when working with people with Alzheimer's EXCEPT:
 - a. Treat all people with Alzheimer's the same way, to be fair.
 - b. Work with family members.
 - c. Work with the symptoms and behaviors you see.
 - d. Do not take words or actions personally.
9. The goals of care for a person with dementia should be:
 - a. to provide security and comfort
 - b. to promote dignity and self-esteem
 - c. to encourage independence
 - d. all of the above
10. When people with Alzheimer's are frightened or agitated, you should:
 - a. physically restrain them
 - b. call their doctor immediately; it could mean they are very sick
 - c. move and speak slowly and calmly
 - d. quickly and loudly instruct them to calm down
11. Good strategies for communicating with people with Alzheimer's include:
 - a. repeating yourself when necessary, using the same words
 - b. using non-verbal communication, like gestures and pictures
 - c. both a and b
 - d. none of the above