



Dementia: Safety and Support Through Care

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After reading the newsletter, the home health aide should be able to:

1. Define dementia and delirium.
2. Identify three risk factors associated with dementia.
3. Discuss needs and care of the client with dementia.

Dementia is a decline in brain function that primarily affects people aged 65 and older. It is a devastating, progressive condition that, over time, robs affected persons of their mental and physical abilities, and their connections with loved ones.

Millions of Americans are affected by dementia, and this number is expected to increase greatly as the aging population grows. Therefore, it is important that healthcare providers be prepared to meet the needs of this growing population.

This newsletter will discuss care of the client with dementia, including an overview of the disorder, risk factors and supportive care.

Overview of Dementia

Dementia is a term used to describe progressive loss of normal brain function. This affects memory, thinking, reasoning, communication, judgment, problem-solving, planning, carrying out tasks, and other mental activities that normally occur every day. This decline is severe enough to affect daily activities and relationships with others. Dementia typically comes on gradually and becomes progressively worse over time, usually months to years. It is not usually reversible. The most common cause of dementia is Alzheimer's disease. Other causes are vascular dementia and Lewy body dementia.

It's important to understand that not all people who are confused have dementia—they may have delirium instead. Delirium is confusion that is

often caused by a treatable condition, such as infection or medication side effects. Signs of delirium usually occur more suddenly than dementia, and the client's condition and behavior may change rapidly.



Risk Factors for Dementia

Much is still not known about why some people get dementia and others do not. Some factors have been identified, however, that seem to increase the risk of dementia:

-Age over 65: This is the strongest risk factor, since the risk of dementia increases significantly with age.

-Family history: Having relatives who developed dementia tends to increase this risk for an individual.

-Damage to the heart or blood vessels: Conditions that reduce blood flow may increase risk of dementia. These include high blood pressure, stroke, heart attack, atherosclerosis, high cholesterol and diabetes.

-Head trauma: A previous brain injury increases the risk of dementia in later years.

-Down syndrome: Some people with Down syndrome may develop early-onset dementia as early as their 40s.

-Depression: Older adults with depression are at increased risk for dementia, although this relationship is not clear.

-Smoking: Reduced blood flow and oxygen as a result of smoking may increase the risk of dementia.

-Alcohol: Drinking large amounts of alcohol may damage nerve cells in the brain.



Client Care and Support

As you work with your clients, pay attention to their mental state, memory and communication skills. When a client develops confusion or signs of possible dementia, these changes should never be ignored and blamed on just "getting older." This is not a normal part of the aging process, and new signs should be reported to the nurse immediately. A thorough medical evaluation is needed to identify any physical problems that may be causing changes in brain function. This is very important, since many physical conditions, such as infection, dehydration, vitamin deficiency, thyroid problems or medication side effects can cause delirium, with symptoms that look like dementia. But unlike dementia, these can often be treated to restore normal brain function.

The client with dementia has a great many needs, especially as the condition progresses:

-Communication: Communication is often difficult for clients with dementia. Approach the client in a calm, unhurried manner. Always use the client's name when speaking to her, and use short, direct statements. Say, "Mrs. Keen, it's time for your bath" Keep your tone of voice and facial expression pleasant. The client will often respond to the way you sound and act more than the words you say. Use touch, such as a light touch on the arm, if the client seems to be soothed by it. If this causes stress, avoid the use of touch.

The client may speak in a confused or irrational way. If the client is in the early stages of dementia, briefly re-orienting her may be all that is needed. For example, if she thinks it's Christmas in June, you could say, "It's June now. It's hot outside." If she is in later stages, re-orienting is usually not helpful. It's better to lead her into another discussion, such as, "What was your favorite Christmas?"

-Behavior: Clients with dementia are usually most comfortable in a familiar, quiet setting with a limited number of familiar people. A set daily routine is also very helpful to avoid stress and upset. Behavior is most likely to get out of control when the client feels stressed, rushed or angry. This may also occur if the client has pain, needs to go to the bathroom, or is hot, cold, hungry or tired. Help to prevent an outburst by maintaining a calm, pleasant, predictable environment and anticipating the client's needs. Learn to watch your clients for early cues that something is wrong, and try to determine what it is. The client may become suddenly upset, for example, believing that something has been stolen. If this occurs, do not try to argue, reason with or correct the client. Simply say something calming and diverting, such as, "I'll help you find that, let's take a walk first." Playing some of the client's favorite music can also be very



soothing and enjoyable. Likewise, if the client is doing something that you must stop, such as trying to leave the house, do not tell him that he cannot do this. A better way is to distract him, such as by saying "Let's go get a snack."

-Safety: Safety is a major concern, since dementia affects judgment. If the client wanders or paces, make sure the client's bedroom and other areas of the home where he may wander are safe. There should be no objects that he could hurt himself with, such as razor blades. If he tries to eat non-food items, make sure to remove anything that could be toxic, such as aftershave lotion. Also, be careful to observe fall precautions. Remember your own safety, too. Don't wear dangly pierced earrings or other jewelry that the client could grab. Be alert for changes in mood, and stay at a safe distance if he/she becomes violent.

-Physical needs: The client with dementia may not recognize her own physical needs. She may forget to eat, drink, or go to the bathroom. She may not realize that she needs a bath or change of clothing, so provide care to meet these needs. For example, taking her to the bathroom on a regular schedule may help to decrease accidents.

-Sleep: Sleep problems are common in clients with dementia, particularly waking at night. Having a set bedtime routine each night helps, including a trip to the bathroom. Stimulants such as caffeine, chocolate and sugary foods should be avoided from afternoon until bedtime. Keeping the client busy during the day with walking, puzzles or other activities prevents excessive napping and helps the client to sleep well at night. The room should be softly lit at night, to help prevent confusion from waking in the dark.



-Emotional needs: As with all clients, those with dementia must be treated with dignity and respect. Call the client by his/her preferred name, and do not "talk down" or use baby talk. Be careful not to cause stress or embarrassment for the client. Don't put him on the spot by routinely asking such questions as, "Do you know who this person is?" The client should be encouraged to perform any self-care tasks that he is able to, rather than having everything automatically done for him. At mealtime, for example, instead of feeding the client, you may need to remind him to take another bite, since he may forget to eat. Limited choices should be offered, whenever possible. Avoid overwhelming the client with choices, such as, "What do you want to wear today?" Instead, say "Do you want the blue shirt or the white one?" If offering choices causes the client stress, then avoid this.

Your good care helps your clients to maintain their abilities as long as possible and improves their quality of life.



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NAME: _____ DATE: _____ UNIT: _____

Directions: Place the letter of the one best answer in the space provided.

- ____ 1. Dementia is most likely to result in which of the following changes?
 - A. rapid onset of confusion, progressing over several days
 - B. progressive loss of brain function over months to years
 - C. slow loss of brain function, followed by a gradual return to normal
 - D. alternating periods of normal function and severe confusion, lasting several weeks each

- ____ 2. Dementia causes changes in which of the following brain functions?
 - A. memory
 - B. reasoning
 - C. problem-solving
 - D. all of the above

- ____ 3. Alzheimer's disease and other dementias can occur in people younger than age 60.
 - A. True
 - B. False

- ____ 4. Which of the following is the strongest risk factor for dementia?
 - A. smoking
 - B. family history
 - C. heart disease
 - D. age over 65

- ____ 5. Dementia and delirium are different, in that delirium:
 - A. causes confusion and memory problems
 - B. is often reversible
 - C. affects daily activities and relationships
 - D. is slowly progressive

- _____ 6. The home health aide notices that Mrs. Howe, a 78-year old client, is slightly confused today, and thinks she is at her daughter's house. Mrs. Howe has always been well-oriented before. The home health aide should:
- A. tell Mrs. Howe that this is normal — it will happen as she gets older
 - B. do nothing, since Mrs. Howe appears to be comfortable and happy
 - C. wait to see if Mrs. Howe is still confused after several more hours
 - D. report this immediately to the nurse
- _____ 7. Which of the following is the best example of how to help the client with dementia make choices?
- A. "Do you want the brown shoes or the white shoes?"
 - B. "What do you want to wear today?"
 - C. "What shoes do you want to wear today?"
 - D. "Here are your brown shoes—put them on before we walk."
- _____ 8. Mr. Jones is a client with dementia who often wanders. When he tries to leave the house, the home health aide should:
- A. place him in his wheelchair and fasten the seat belt snugly
 - B. say, "You can't go outside right now, Mr. Jones."
 - C. tell Mr. Jones that his wife doesn't want him to leave the house
 - D. say, "Mr. Jones, let's go to the kitchen for some ice cream."
- _____ 9. A client with dementia may forget to eat, drink or go to the bathroom.
- A. True
 - B. False
- _____ 10. The best way to prevent a client with dementia from becoming upset is to:
- A. have many people around to prevent loneliness
 - B. give a lot of choices, so the client feels independent
 - C. keep a calm, low-stress environment for the client
 - D. give the client a full explanation of why he can't do something that he wants to

