

# Dealing with Dementia in ICFs/ID

Treatment Considerations

Part 2

# Dementia treatment and care

The following strategies can ease the challenge of dealing with dementia:

- Watch for treatable changes. Depression, sleep disturbances, and medication interactions can make the symptoms of dementia worse and limit independence. Treating them may require lifestyle changes and medication.
- Create a dementia-friendly environment. Think happiness, independence, safety, and accessibility. Preserve health and autonomy for as long as possible by taking simple actions: encourage memories with pictures and familiar objects; remove tripping hazards; and increase lighting.

# Develop day-to-day routines

- Having a general daily routine in Alzheimer's and dementia care helps care-giving run smoothly. These routines won't be set in stone, but they give a sense of consistency, which is beneficial to the Alzheimer's patient even if they can't communicate it.
- While everyone will have their own unique routine, you can get some great ideas from your medical team or Alzheimer's support group, especially regarding establishing routines to handle the most challenging times of day, such as evenings.
- Keep a sense of structure and familiarity. Try to keep consistent daily times for activities such as waking up, mealtimes, bathing, dressing, receiving visitors, and bedtime. Keeping these things at the same time and place can help orientate the person.

# Develop day-to-day routines

- Let the person know what to expect even if you are not sure that he or she completely understands. You can use cues to establish the different times of day. For example, in the morning you can open the curtains to let sunlight in. In the evening, you can put on quiet music to indicate it's bedtime.
- Involve the person in daily activities as much as they are able. For example, a person may not be able to tie their shoes, but may be able to put their clothes in the hamper. Use your best judgment as to what is safe and what the person can handle.

# Communication tips

As the person's Alzheimer's progresses, you will notice changes in communication. Trouble finding words, increased hand gestures, easy confusion, even inappropriate outbursts are all normal. Here are some tips on communicating:

- Keep it simple. Call the person by name. Ask one question at a time, and give the person ample time to answer. Try again if the person doesn't respond.
- Body language is important, especially as Alzheimer's progresses. What feelings do you sense behind the words? Encourage the person to point or gesture if they can't remember what an object is called.
- Pay attention to your own body language as well. Make good eye contact. Take a short break if you feel your fuse getting short, and try again when you are calmer.

# Planning activities and visitors

As you develop routines for the day, it's important to include activities and visitors. What the person with Alzheimer's can handle will change over time, so stay flexible in your planning. You want to make sure that the Alzheimer's patient is getting sensory experiences and socialization, but not to the point of getting over-stimulated and stressed. Here are some suggestions for activities:

- Start with the person's interests. Ask family and friends for memories of interests the person used to have. You'll want to tailor the interests to the current level of ability so the person doesn't get frustrated.

# Planning activities and visitors

- Vary activities to stimulate different senses of sight, smell, hearing, and touch. For example, you can try singing songs, telling stories, movement such as dance, walking, or swimming, tactile activities such as painting, working with clay, gardening, or interacting with pets.
- Planning time outdoors can be very therapeutic. You can go for a drive, visit a park, or take a short walk. Even sitting in the backyard can be relaxing.
- Consider outside group activities designed for those with Alzheimer's. Senior centers or community centers may host these types of activities. You can also look into day programs which are partial or full days at a facility catering to older adults.

# Visitors and social events

Visitors can be a rich part of the day for a person with Alzheimer's disease. Plan visitors at a time of day when the person can best handle them.

Visitors can be briefed on communication tips if they are uncertain. They can also bring memorabilia your loved one may like, such as a favorite old song or book. Family and social events may also be appropriate, as long as the person with Alzheimer's disease is comfortable.

Focus on events that won't overwhelm the person; excessive activity or stimulation at the wrong time of day might be too much to handle.

What regulations<sup>1</sup> do I need to consider?

***All of them!*** Special attention should be paid to the following as they relate to treatment considerations.

# W124

Each individual, parent (if the person is a minor), or legal guardian, must be informed of the individual's medical condition, developmental and behavioral status, attendant risks of treatment, and of the right to refuse treatment.

# W196

Each individual must receive a continuous active treatment program that is directed toward:

- (1) The acquisition of the behaviors necessary to function with as much self determination and independence as possible; and
- (2) The prevention or deceleration of regression or loss of current optimal functional status.

# W196

Interventions that are necessary to prevent or decelerate regression are considered to be part of the overall active treatment program.

# W196

Active treatment for elderly individuals may need to focus on interventions and activities that promote physical wellness and fitness, socialization, and tasks that stress maintaining skills.

# W214

The individual's needs, skill deficits, and functional limitations are clearly described in functional terms in the assessments.

Identified needs are current, accurate, complete and reflect the individual's observed functional status.

# W224

The comprehensive functional assessment must include adaptive behaviors or independent living skills necessary for the individual to be able to function in the community.

# W233

The IDT identifies which objectives are the most important to work on now.

Skills and behaviors which significantly impact the individual's day-to-day functioning are worked on first.

# Additional medical treatment considerations

- Medications like Aricept and Exelon have been found to slow the progression of Alzheimer's disease.
- High cholesterol levels can negatively impact people with Alzheimer's disease.
- Low estrogen levels can negatively impact women with Alzheimer's disease.
- Review the dosage and time medications are given based on symptoms.

# Additional therapeutic and programmatic considerations

- Activity Programs
- Acupressure
- Aroma Therapy
- Behavioral Programming
- Communication Programs
- Environmental Modifications

# Additional therapeutic and programmatic considerations

- Horticulture
- Massage Therapy
- Memory Aids
- Music Therapy
- Music Therapy and Massage
- Nutritional Supplements/Meal Modification

# Additional therapeutic and programmatic considerations

- Pain Management
- Pet Therapy
- Reminiscence
- Rocking Chair Therapy
- Snoezelen (a controlled multisensory environment)
- Therapeutic Touch
- Validation Therapy

# Additional Resources

- **Center for Excellence in Aging Services** has compiled a list of resources and interventions related to dementia and Alzheimer's disease. ([albany.edu](http://albany.edu))
- **Hands-On Skills for Caregivers** – Gives practical, insightful tips for how to physically approach a difficult patient; how to talk to them respectfully; and how to get them to co-operate with you, both physically and mentally. (Family Caregiver Alliance/National Center on Caregiving)

# Additional Resources

- **Animal Therapy Group Listing** – Offers an international directory of organizations that offer assisted animal therapy. (Land of Pure Gold Foundation)
- **Home Safety Behavior-By-Behavior** – Offers ways to make the home safe for the Alzheimer's patient who wanders, who rummages or hides things, who hallucinates; tips for social occasions and for adjusting the environment to compensate for failing senses. (ADEAR: Alzheimer's Disease Education & Referral Center)

# References

<sup>1</sup> *State Operations Manual Appendix J - Guidance to Surveyors: Intermediate Care Facilities for Persons With Mental Retardation*. Retrieved from [http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107ap\\_j\\_intermcare.pdf](http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107ap_j_intermcare.pdf)

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***Send your comments or questions to  
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