

# Today's Webinar:



LTCCC WEBINAR

## What Does Good Care Look Like for People Living with Dementia?

Tuesday, October 18, 2022 | 1-2PM ET

**Register:** [bit.ly/webinar-dementia](https://bit.ly/webinar-dementia)



Join us as **Dr. Jonathan Evans**, dementia care expert and geriatrician, discusses quality care practices to support people living with dementia.

For materials from today's webinar, visit  
[nursinghome411.org/webinar-dementia-care/](https://nursinghome411.org/webinar-dementia-care/)



# About Jonathan Evans, MD MPH FACP

- **Geriatrician** who has focused most of his career on understanding dementia, how it affects individuals and families, and de-coding so-called 'behaviors' that people living with dementia often express
- **President of the National Consumer Voice and Chair of their Board of Directors**



# + Interaction welcome...



- Today's speaker will discuss case studies and encourages audience participation
- To comment, please use the “**Raise Hand**” feature at the bottom of your Zoom screen.
  - **Introduce yourself (Richard Mollot from LTCCC!)**
  - **Please keep comments short and on topic (30 seconds)**  
and/or
- You may also use the **Chat function** to participate in the discussion.

‘Behaviors’ Exhibited by People  
Living with Dementia:  
What are They Trying to Say?

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Jonathan M. Evans MD MPH FACP



# Dementia is:

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- “A loss of brain function bad enough to interfere with daily activities”
- In essence, a ‘disability’, not a ‘sickness’
- People living with dementia are still themselves, still have many abilities.
- Helping them live their best lives requires understanding, patience,
- Optimism, basic knowledge about likely challenges/impairments
- Understanding who they are, what their life was like up until now

# Behavior is Communication: That's a very good thing

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- “Challenging” behaviors Most often represent a *conflict between the individual and their environment*
- Especially the human environment
- Patients disabled by dementia cannot comprehend their environment and cannot conform as a result



# Behavior is Communication

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- Primary Task: Figure out *meaning*

.... *What (or whom) are they reacting to ?*

.... *What are they trying to say?*

- Easiest way to do this is **to put yourself in their shoes**
- *Interpret behavior in the context of one's life experience*
- *What does your behavior tell them?*

# 70-year-old man living at home with wife

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- Sees car in driveway and immediately wants to go to work
- Becomes very upset when told he cannot drive (license revoked due to prior incidents)



# 76-year-old retired nun 'resisting care'

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- Screams when incontinence care is provided or when staff attempts to take to shower room

# Behaviors in Dementia

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- “Undesirable” behaviors not planned, thoughtful, premeditated or even conscious
- Individual may have no awareness or recollection
- Individual must conform to environment, rules but cannot because of cognitive impairment



# 80-year-old woman

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- Wanders into other resident's rooms
- Last evening she was found undressed getting into another resident's (unoccupied bed)



# 30-year-old woman in a nursing home

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- 'Wanders 'into other resident's rooms frequently
- Very occasionally gives medicine to the 'wrong' resident

# 74-year-old 'retired' nurse living with Dementia

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- Fights with other residents
- Always busy: Frequently Pushes other residents in their wheelchair (who don't want to be moved)
- (Put one resident in the elevator and sent her down to the ground floor)



# 82-year-old farmer with Alzheimer's Disease

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- Newly admitted to nursing home for long-term care. Staff report 'sundowning'
- Every evening around dinner time he begins 'hollering' (loud, repetitive unintelligible vocalization). It bothers other staff and residents. He 'resists' staff efforts to 'redirect'. He is not distressed until staff intervene



# 84-year-old man with Alzheimer's awakens at 2 am every night

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- “Agitated” Impossible to Redirect. Demands breakfast
- Told it is nighttime. Go back to bed. Its not breakfast time.
- Family is called every time.

# General approach

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- What are they trying to say?
- What are they reacting to?
- What was happening before the 'behavior' occurred?
- Who was there before?  
During? After?
- My 3-minute rule





# Behavior is Communication

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- *Are they upset or are they merely upsetting others?*
  - Or are they merely causing 'distress' to others (breaking a rule/norm)?
  - i.e. 'wandering', urinating in trash can, repetitive vocalizations



# Wandering is Normal

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- Many normal reasons: Exercise, boredom
- Pain/stiff arthritic joints
- Looking for something, Looking or acting upset
- Room, bed, bathroom, food
- The need to exit a stressful situation
- Search for something familiar and comforting
- What to do:
  - People need to move. Help them move everyday
  - Steer them where you want them to go

# Agitation is not a thing!

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- It's not a disease. It is made up medical jargon that simply means:
- That patient is looking or acting upset
- Figure out why they are upset
- If you are making them upset, stop what you are doing immediately
- Instead of the term 'agitation' say "visibly upset" instead. It will help you and your team identify underlying precipitants or causes instead of being fooled into thinking the patient has a disease requiring medication (which doesn't work)



“Resisting Care” is a bad and  
potentially dangerous thing to cause  
or even say

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- Resisting care = self protection in response to a perceived threat
- Pay attention to who says it and who causes it

# “Aggression,” “Danger to self and others”:

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- Pejorative accusatory terms used to justify the unjustifiable
- Generally speaking, flat out wrong
- Represents fundamental misunderstanding of dementia, as well as other basic precepts such as resident/patient rights: Why?



# Summary

- Behavior is Communication
- Even “undesirable behaviors” are a normal response/reaction to something Help others to put themselves in another’s shoes/ reframe things to allow them to see things more clearly
- Coach others to be more successful and confident

# LTCCC's November Webinar:

- **Back to Basics: What You Need to Know about Nursing Homes and Long-Term Care**
  - Tuesday, November 22, 1pm ET (the 4<sup>th</sup> Tuesday of the month!)
  - Presenter: Richard Mollot
  - Register: <https://bit.ly/ltc-basics>

A purple and blue geometric-patterned graphic for a webinar. In the top left corner is the logo for the Long Term Care Community Coalition, which consists of the words 'LONG TERM CARE' stacked vertically above 'COMMUNITY COALITION'. The text 'LTCCC WEBINAR' is centered in the upper half. Below that, the title 'Back to Basics: What You Need to Know About Nursing Homes and Long-Term Care' is displayed in large white font. Underneath the title, the date and time 'Tuesday, November 22, 2022 | 1-2PM ET' are shown. A registration link 'Register: https://bit.ly/ltc-basics' is provided. In the bottom left, there is a circular portrait of Richard Mollot, a man with glasses and a goatee. To the right of the portrait, a text box describes him as the Executive Director of LTCCC and mentions his expertise in nursing home resident rights and family support.

**LONG TERM CARE**  
COMMUNITY COALITION

LTCCC WEBINAR

**Back to Basics: What You Need to Know About Nursing Homes and Long-Term Care**

Tuesday, November 22, 2022 | 1-2PM ET

**Register:** <https://bit.ly/ltc-basics>

**Richard Mollot** (Executive Director, LTCCC) on the foundations of nursing home resident rights and offers tips to support families, caregivers, and advocates.

**Register: <https://bit.ly/ltc-basics>**



# Head to NursingHome411...



- For materials from today's webinar, visit <https://nursinghome411.org/webinar-dementia-care>
- For LTCCC's Dementia Care Toolkit, visit <https://nursinghome411.org/learn/dementia-care-advocacy-toolkit/>

Thank You For Joining Us Today!

**For updates & invites to future programs:  
[www.nursinghome411.org/join/](http://www.nursinghome411.org/join/).**

**LTC Ombudsmen: Look out for an email confirming your attendance of this program on Thursday.**

