



Practical Communication Tips when Caring for Someone with Dementia!

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A Positive Physical Approach for Someone with Dementia

1. **Knock** on door or table - to get attention - signal your approach
2. **Stop moving** at the boundary between public & personal space – **6 ft out** - get permission to enter or approach
3. **Open hand motion near face and smile** – look friendly and give the person a visual cue – make eye contact – open hand near face – cues eyes to look there
4. Call the person by preferred **name** OR at least say **“Hi!”** – avoid endearments
5. Move your hand out from near your face to a greeting **handshake** position – make sure they notice you hand out to shake – then stand tall and move forward **SLOWLY**
6. Approach the person from the **front** – come in within 45 degrees of center - visual
7. **Move slowly** – one step/second, stand tall, don't crouch down or lean in as you move toward the person
8. Move toward the right **side of the person** and offer your hand - give the person time to look at your hand and reach for it, if s/he is doing something else – offer, don't force
9. Stand to the side of the person at arm's length – respect intimate space & be supportive not confrontational – but don't go too far back' – stay to the front - visual
10. **Shake hands** with the person – make eye contact while shaking
11. Slide your hand from a 'shake' position to **hand-under-hand** position – for safety, connection, and function
12. Give your name & greet – “I'm (name). It's good to see you!”
13. **Get to the person's level** to talk – sit, squat, or kneel if the person is seated and stand beside the person if s/he is standing
14. NOW, deliver your message...

Approaching When the Person is DISTRESSED! -Some CHANGES –

1. *Look concerned* not too happy, if the person is upset
2. *Let the person move toward you, keeping your body turned to the side* (supportive – not confrontational) –
3. *If the person is seated & you DON'T get permission to enter personal space – turn sideways & kneel at 6' out – offer greeting & handshake again – look for an OK to come into their personal space – it will usually come at this time (submissive posture)*
4. After greeting... try one of *two options*...
 - a. “Sounds like you are (give an emotion or feeling that seems to be true)???”
 - b. Repeat the person's words to you... If s/he said, “Where's my mom?” you would say “You're looking for your mom (pause)... tell me about your mom...”
If the person said “I want to go home!”, you would say “You want to go home (pause)... Tell me about your home...”.

BASIC CARD CUES – WITH Dementia

- Knock – Announce self
- Greet & Smile
- Move Slowly – Hand offered in 'handshake' position
- Move from the front to the side
- Greet with a handshake & your name
- Slide into hand-under-hand hold
- Get to the person's level
- Be friendly -make a 'nice' comment or smile
 - Give your message... simple, short, friendly



Communicating - Talking

First -

ALWAYS use the **positive physical approach!**

Then -

- Pay attention to the **THREE** ways you communicate

1 - How you speak

- **Tone** of voice (**friendly** not bossy or critical)
- **Pitch** of voice (**deep** is better)
- **Speed** of speech (**slow and easy** not pressured or fast)

2 - What you say

THREE basic reasons to talk to someone

1 - To get the person to **DO something** (5 approaches to try)

- 1 - give a short, direct message about what is happening
 - 2 - give simple choices about what the person can do
 - 3 - ask the person to help you do something
 - 4 - ask if the person will give it a try
 - 5 - break down the task - give it one step at a time
- ** only ask "Are you ready to..." If you are willing to come back later **

2 - Just to have a **friendly interaction** - to talk to the person

- ◆ go slow - Go with Flow
- ◆ acknowledge emotions - "sounds like..., seems like..., I can see you are..."
- ◆ use familiar words or phrases (what the person uses)
- ◆ know who the person has been as a person what s/he values
- ◆ use familiar objects, pictures, actions to help & direct
- ◆ be prepared to have the same conversation over & over
- ◆ look interested & friendly
- ◆ be prepared for some emotional outbursts
- ◆ DON'T argue... - BUT don't let the person get into dangerous situations

REMEMBER - the person is doing the BEST that s/he can
AND GO with the FLOW!

3 - Deal with the person's **distress or frustration/anger**

- ◆ Try to figure out what the person really **NEEDS or WANTS** ("It sounds like..." "It looks like..." "It seems like..." "You're feeling...")
- ◆ Use **empathy** not forced reality or lying

- ◆ Once the person is listening and responding to you **THEN** -
 - **Redirect** his attention and actions to something that is OK **OR**
 - **Distract** him with other things or activities you know he likes & values

Always BE CAREFUL about personal space and touch with the person especially when s/he is distressed or being forceful

3 - How you respond to the person

- ◆ use positive, friendly approval or praise (short, specific and sincere)
- ◆ offer your thanks and appreciation for his/her efforts
- ◆ laugh with him/her & appreciate attempts at humor & friendliness
- ◆ shake hands to start and end an interaction
- ◆ use touch - hugging, hand holding, comforting **only IF** the person wants it

If what you are doing is NOT working -

- **STOP!**
 - BACK OFF - give the person some space and time
 - Decide on what to do differently...
 - *Try Again!*

Key Points About 'Who' the person Is....

- preferred name
- introvert or extrovert
- a planner or a doer
- a follower or a leader
- a 'detail' or a 'big picture' person
- work history - favorite and most hated jobs or parts of jobs
- family relationships and history - feelings about various family members
- social history - memberships and relationships to friends and groups
- leisure background - favorite activities & beliefs about fun, games, & free time
- previous daily routines and schedules
- personal care habits and preferences
- religious and spiritual needs and beliefs
- values and interests
- favorite topics, foods, places
- favorite music and songs - dislike of music or songs
- hot buttons & stressors
- behavior under stress
- what things help with stress?
- handedness
- level of cognitive impairment
- types of help that are useful

Types of Help - Using Your Senses

Visual -



Written Information - Schedules and Notes

Key Word Signs - locators & identifiers

Objects in View - familiar items to stimulate task performance

Gestures - pointing and movements

Demonstration - provide someone to imitate

Auditory -

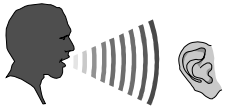
Talking and Telling - give information, ask questions, provide choices

Breaking it Down - Step-by-Step Task Instructions

Using Simple Words and Phrases - Verbal Cues

Name Calling - Auditory Attention

Positive Feedback - praise, "yes", encouragement



Tactile - Touch -

Greeting & Comforting - handshakes, hugs, 'hand-holding'



Touch for Attention during tasks

Tactile Guidance - lead through 'once' to get the feel

Hand-Under-Hand Guidance - palm to palm contact

Hand-Under-Hand Assistance - physical help

Dependent Care - doing for & to the person

Personal History

Areas to Explore	What Did You Find Out?
Preferred Name	
Preferred Hand	
Living Situations & history (where are you from today & originally, who do & did you live with, what type places did you live in (house, apt, farm...))	
Marriage history & status (who's involved, has been involved, and how do you feel about them?)	
Family history & membership (who's who and how do you feel about them? Think about several generations....)	
Work history (what jobs have you had in your life? How did you feel about them? What are some jobs you would have loved to do, but never did?)	
Leisure history (what do and did you do for fun and in your spare time? How do you feel about 'having fun'? What would you like to do if you had the money? time? Skill?)	
Spiritual history (what religion do you and did you follow, how involved are you and were you, and how important is it to you? How do you feel about other religions?)	
Personal care practices & history (eating habits, sleeping habits, grooming habits, bathing habits...)	
Time Use History (schedules & routines.... When do you and would you like to do things?)	
Important Life Events (what are some things that were very important to or happened to you? Do others know about these events?)	
Hot Buttons (what are things/activities /topics/ actions that really tend to upset you?)	

Having a Conversation

To Start Talking.....

First –

- **Recognize** the person and their situation or feelings (don't lie and don't be cruel...)
- **Use EMPATHY** – “it looks like...”, “it sounds like...”, “it seems like...”

Then –

- If in *early stages* of the disease, gently offer orienting information
- If in the *middle or later stages* of the disease, figure out the meaning of the behavior or words and use...
 - ◆ **Redirection** – same type of activity in a more acceptable manner, or with ‘safer’ materials, or in a safer space (Example: cleaning out cabinets rather than the crash cart)
 - ◆ **Distraction** – changing to a different but equally valued activity (Example: looking for her cat that no longer exists to helping to put away dishes from the dish drainer and clean up the dining room)

When having a conversation...

- use familiar phrases or words to help the person 'talk'
- use familiar objects or actions to give a focus for the interaction
- be prepared to have the SAME conversation over, and over, and over.....
- use your non-verbal interaction skills to show interest and engagement
- be prepared for unexpected emotional shifts and outbursts
(*remember* - it's part of the disease)
- don't try to correct the person... GO WITH THE FLOW! - use empathy not reality!

Communication - When Words Don't Work Anymore...

Keys to Success:

- Watch movements & actions
- Watch facial expressions and eye movements
- Listen for changes in volume, frequency, and intensity of sounds or words
- Investigate & Check it out
- Meet the need

It's all about Meeting Needs...

- Physical needs
- Emotional needs

Probable Needs:

Physical

- Tired
- In pain or uncomfortable
- Thirsty or Hungry
- Need to pee or have a BM or already did & need help
- Too hot or too cold

Emotional

- Afraid
- Lonely
- Bored
- Angry
- Excited
- In Pain

What Can You Do?

- *Figure it out...Go thru the list*
- *Meet the need... Offer help that matches need*
- *Use visual cues more than verbal cues*
- *Use touch only after 'permission' is given*

Connect – Visually, Verbally, Tactilely

Protect Yourself & the Person – use Hand Under Hand & Supportive Stance techniques

Reflect – copy expression/tone, repeat some key words, move with the person

Engage – LISTEN with your head, your heart, and your body

Respond – try to meet the unmet needs, offer comfort and connection

***** IF IT DOESN'T seem to be working – STOP, BACK OFF – and then TRY AGAIN – changing something in your efforts (visually, verbally, or through touch/physical contact)*****

When Helping Physically to Do THINGS...

Remember to do things WITH the person, NOT TO the person!

Always CONNECT first

**Visually
Verbally
Physically
Emotional
Spiritually**

Take it slow – look for and wait for responses before moving on... Double check CUES!

Take a look around - Check out the environment or setting and set-up –

Is it clear what is supposed to happen?

Is it possible something is triggering the behavior or refusal?

Is it possible to create a stronger sense of privacy and competence?

Does the person feel OK, having you there?

Are you respecting intimate space & personal space?

If what you are trying is NOT working, STOP and BACK OFF!

Think about what might be getting in the way, change something, then try to re-approach

Make Sure – you are:

Limiting verbal information

Sending POSITIVE and FRIENDLY non-verbal cues

Taking your time to CONNECT

Letting the person know what you want – THINK about ONE step at a time

Show them what you want – model it, gesture through it, point to it...

Respecting personal & intimate space

ALWAYS, be willing to give up your agenda if you are having trouble getting the connection – you can always come back and try again, if they like you!

If it seems like they are getting upset with you...

Consider saying, “I’m sorry, I am bothering you, I didn’t mean to...”

Consider asking for a very ‘short’ commitment –

“Help me for 2 minutes & then I will leave”

Consider saying “Do you want to be alone?”

Stop talking or TRYING for a while and see what happens