DEMENTIA

Dementia is an umbrella term for several diseases affecting memory, cognitive abilities and behaviour that interfere with a person's ability to maintain their activities of daily living (World Health Organization). Many types of dementia exist. The most common are: Alzheimer's, vascular dementia, Parkinson's dementia, Lewy body dementia and frontotemporal dementia.













Signs of dementia

- · Memory problems, particularly remembering recent events
- · Disorientation in new environments, getting lost
- · Not recognising loved ones or family/whānau members
- · Increasing confusion about time and place
- · Difficulty or loss of ability to do everyday or familiar tasks - managing personal care, preparing and cooking meals, managing finances
- Reduced concentration
- · Changes in personality, mood or behaviour
- · Difficulty making decisions, planning or solving problems

- Socially inappropriate behaviours yelling, physical and verbal aggression, racist or sexual remarks
- Hallucinations: seeing things (animals, people, objects that is not visual to others), auditory (hearing noises), tactile depression
- · Apathy, lack of motivation, withdrawal or depression
- · Delusions, for example, thinking that someone has stolen an item
- · Problems speaking or writing
- Difficulty understanding visual information, losing the ability to read
- · Withdrawal from socialising
- Misplacing things



LOOK OUT FOR

Remember: your resident may not be able to tell you if they are unwell, uncomfortable or need help

- Increased confusion (sudden) refer to Delirium
- Signs of pain and discomfort, such as body language, facial expression, distress, pacing, quiet, agitated
- Not eating, not drinking, weight loss
- Mobility: unsteady, changes in walking, increased falls
- Bowel and bladder: changes in bowel and bladderhabits, increased incontinence, difficulty moving bowels





DIAGNOSIS

Dementia is diagnosed by a general practitioner, specialist doctor or nurse practitioner who reviews the following:

- results of cognitive testing, investigations such as blood tests, urine tests and brain scans
- information from the resident and family/whānau around signs, symptoms and timeframe

Dementia is a life limiting disease and, over time, a resident's mental and physical health status and level of function will decline. It is important to identify the signs and symptoms of deterioration – are they gradual or acute?

Gradual decline

If you notice a gradual decline in your resident's level of function then identify the areas of increasing need and alter the resident's care plan. Report your findings to the registered nurse

Acute deterioration

Decline in health and functional status occurs over hours/days – see the Acute Deterioration Care Guide. This may be something that can be treated



KNOW YOUR RESIDENT

- Who are they? Family/whānau, previous occupation, personality, hobbies, interests, likes, dislikes
- Know their health history

Respect, dignity, compassion and patience are what your resident needs from you



Document in progress notes/update care plan

Behaviours of concern

- New or increased
- Start a behaviour chart see Behaviours of Concern Care Guide

Communication

- Clear, simple, concise instructions.
- Talk at eye level, smile and give the resident time to process the information and respond
- Encourage and praise often
- · Don't keep correcting
- No arguing
- Don't be bossy or rush them

Personal care

• Encourage independence but assist when required

