COMMUNICATION TIP SHEET for redeployed staff working in long-term care with residents with cognitive impairment





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Background Information

- Dementia impacts brain function. The term "responsive behaviour" describes the person's response to a situation, attempt to communicate, or express an unmet need.
- Personal Support Workers (PSWs) and nurses develop strong relationships with residents in long-term care (LTC) homes.
- Each resident has a Care Plan that includes Activation/Recreation Therapy notes.
- Each facility has designated supports (e.g., Behaviour Support Lead, psychiatrists and geriatric psychiatrists, Behaviour Support Specialist, Behaviour Support Outreach Team, Psychogeriatric Resource Consultant).

Practical Suggestions

- ☐ Acknowledge the emotion behind the behaviour and remember that the resident is not "doing this on purpose".
- ☐ Collaborate with LTC staff to find out more about the resident's likes and dislikes, their care, and communication preferences.
- □ Where primary care staff are not available, consult the resident's Care Plan to learn more about the resident's medical and functional status, and communication and care needs.
- ☐ For additional strategies, ask the LTC home's senior leadership about consultations with designated supports. Most services are providing phone or virtual support.

This tip sheet is not meant to be a comprehensive communication guide; it highlights some common scenarios when what we say can inadvertently escalate a situation. The recommendations given are alternate, person-centred scripts to try but may require further refining with the support of LTC staff. Providers are encouraged to stay calm, be patient and build collaborative relationships with their residents.

Communication Tips: Do's and Don'ts

If you see	Avoid saying	Instead try
The resident going into the room of a resident who is in isolation.	"You can't go there! Please come out."	"Hi I was looking for you! Would you like to come with me?"
The resident who is positive for COVID-19 attempts to leave their room.	"Stop!! You can't come out of your room! Go back!"	"There is a bug going around and I want you to be safe by staying in your room."
The resident refuses care/shower.	"You need my help." OR "I have to do this, it's part of my job."	"Hi I was wondering if you'd like to freshen up? I can get things set up for you."

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Communication Tips: Do's and Don'ts (cont.)			
If you see	Avoid saying	Instead try	
The resident does not recognize new staff and becomes anxious.	"Don't you remember? I already told you yesterday/this morning/an hour ago! I am the new nurse/PSW."	"Hi I'm, your nurse/PSW today. I know I probably look strange in a mask and gown. I'm wearing it because there is a bug going around and I want to keep you safe."	
The resident calls out for the nurse or uses the call bell repeatedly.	"I'm busy right now. You have to wait."	"Hi You are my next person to see; I will be with you soon."	
The resident repeatedly asks to go home.	"You can't leave. This is your home. You live here"	"Sounds like you miss home. Do you have pictures in your room? Can you show me?"	
The resident asks for family members.	"They can't come because we are in a lockdown."	"You must love your daughter/son very much. Shall we talk to (Activation/Recreation staff) and see if they can help you talk to your daughter/son?"	

Resources

The person behind the mask: Communicating with clients living with dementia while protecting ourselves. Alzheimer Society of Peel and Mississauga Halton Behaviour Supports Ontario Acute Care Team. *One page document giving general recommendations for communicating while using PPE.

<u>Communication Tips</u>. Alzheimer Society of Ontario. *Two minute video highlighting key communication recommendations.

<u>Do's and Don'ts of Communication and Dementia</u>. Alzheimer's San Diego. *Five minute read explaining the emotional content of communication and its implications. Includes community-based scenarios with do's and don'ts.

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