

Educational Handout

Nursing Home Alzheimer's Disease and Related Disorders Training for LTC Staff

Learning Objectives for Section 1: Introduction to Dementia

The LPN (or other nursing staff) will be able to:

- Define "dementia"
- Describe the differences among the cognitive changes of normal aging, delirium, and dementia
- Describe and recognize the characteristics of the early, middle, and late stages of dementia
- Define "quality of life" and "quality of care" and recognize their importance by individualizing a care plan
- Understand and explain the person-centered care approach to residents with dementia

Questions for Section 1: Introduction to Dementia

1. Dementia is defined by changes in which of the following abilities? (Mark all that apply.)
 - A. Memory
 - B. Abstract thinking
 - C. Digestion
 - D. Communication ability
2. Little or no memory remaining is most likely to occur in which stage of dementia?
 - A. Early
 - B. Middle
 - C. Late
3. Mild confusion is most likely to occur in which stage of dementia?
 - A. Early
 - B. Middle
 - C. Late
4. Moderate to severe communication difficulties are most likely to occur in which stage of dementia?
 - A. Early
 - B. Middle
 - C. Late
5. Visual hallucinations are usually associated with:
 - A. Normal aging
 - B. Delirium
 - C. Dementia

6. "Progressively unable to care for himself, eventually requires total assistance" best describes:
- A. Normal aging
 - B. Delirium
 - C. Dementia
7. "Mild forgetfulness, but able to use reminders" best describes:
- A. Normal aging
 - B. Delirium
 - C. Dementia
8. Which of the following describes quality of life? (Mark all that apply.)
- A. High quality of life resides in the full expression of life's potential
 - B. Is not important for dementia residents
 - C. Is made better through improved communication, environment, activities, etc.

Summary of Section 1: Introduction to Dementia

In summary, dementia has many causes, but the most common cause is Alzheimer's disease. The signs and symptoms of dementia may vary from person to person, but in general, the signs and symptoms continue to worsen over time. The loss of function caused by dementia often results in the need for long-term care.

Delirium can be mistaken for dementia. Delirium is a very different disease, with a rapid onset of confusion often caused by a sudden illness, infection, or pain. Delirium is a medical emergency.

The quality of life of the resident with dementia can be improved by using an interdisciplinary team approach to care planning. The LPN is a core team member. The person-centered care approach is essential to quality care because it recognizes the resident as a person and prioritizes the resident's preferences and needs.

Learning Objectives for Section 2: Communication

Through this training the LPN will be able to:

- Understand the basic components of human communication, including verbal and nonverbal modalities
- Understand the progressive changes in communication that occur during the progression of dementia
- Recognize nonverbal expressions of pain and discomfort
- Demonstrate basic skills of communication with residents with dementia including those with challenging behaviors
- Describe cultural differences in communication

Questions for Section 2: Communication

1. Increased difficulty in comprehending others is a common problem in which stage of dementia?
 - A. Early
 - B. Middle
 - C. Late
2. In which stage of dementia is vocabulary often reduced to a few words or phrases?
 - A. Early
 - B. Middle
 - C. Late
3. In which stage of dementia is difficulty finding words a common problem?
 - A. Early
 - B. Middle
 - C. Late
4. Which of the following are good ways to improve verbal communication? (Mark all that apply.)
 - A. Allow time to respond and present one idea at a time, minimizing information overload.
 - B. Use the resident's formal name instead of the name used by friends and family.
 - C. Praise and encourage the person; show affection.
 - D. Speak warmly, quietly, and with eye contact (when appropriate).
5. Which of the following are good ways to improve nonverbal communication? (Mark all that apply.)
 - A. Smile.
 - B. Use simple gestures to enhance what you say.
 - C. Maintain a reserved, cool expression.
 - D. Approach interactions in a calm matter.
6. Which communication behavior(s) are always good to use regardless of the resident's cultural background? (Mark all that apply.)
 - A. Give simple choices.
 - B. Maintain eye contact and close proximity.
 - C. Use nonthreatening gestures.
 - D. Ask personal and family questions.

Summary of Section 2: Communication

Communication is crucial to interaction with residents with dementia. Incorporating basic communication skills that take into consideration cultural and ethnic differences will facilitate the care of residents with dementia. As verbal communication skills decline, behaviors often become the usual form of communication. Acquiring good communication skills lessens the possibility that you will miss important medical problems. Good communication can also reduce distress behaviors and result in improved quality of life and care for the resident with dementia.

The TNH consortium members hope you have found this DVD-based curriculum valuable and useful. As you apply your new knowledge and skills, you will be a better professional, and more importantly, your residents will receive a higher level of care and enjoy improved quality of life.