

DEMENTIA MANAGEMENT

Practice recommendations for assisted living residences and nursing homes

EFFECTIVE DEMENTIA CARE

- “Person-centered”
- Comprehensive assessment of a resident’s abilities/needs
- Care planning and provision
- Strategies for addressing behavioral and communication changes
- Appropriate staffing patterns
- Environment that fosters community

RECOMMENDED PRACTICES

	Routine Assessment	Approach
Food and Fluid Consumption <i>To maintain proper nutrition and hydration, avoid health complications, and promote mealtimes as enjoyable activities.</i>	<ul style="list-style-type: none">• Difficulty chewing and swallowing, or changes in swallowing ability• Poor utensil use• Refusing substitutions• Low attentiveness to a meal or wandering away during the meal• More than 25 percent of food uneaten during a meal	<ul style="list-style-type: none">• Evaluate cause of swallowing difficulties• Engage residents in the mealtime experience and stimulate appetite• Encourage residents to function independently whenever possible• Provide a pleasant, familiar dining environment free of distractions• Prepare food to maximize acceptance
Pain Management <i>To ease distress associated with pain, improve quality of life, prevent behavioral symptoms, and unnecessary use of psychotropic drugs.</i>	<ul style="list-style-type: none">• Site of pain• Type of pain• Effect of pain on the person• Pain triggers• Acute or chronic pain• Positive and negative consequences of treatment	<ul style="list-style-type: none">• PREVENTION of pain• Non-pharmacological approach (i.e. relaxation, physical activities, superficial heating)• Analgesics or narcotic pain medications (Consider side effects, including those affecting dementia and cognitive functioning)• Appropriate referrals
Social Engagement and Meaningful Activities <i>To offer opportunities for providing a context with personal meaning, a sense of community, choices and fun.</i>	<ul style="list-style-type: none">• Capacity for physical movement• Capacity for mental stimulation• Interest in social interaction• Desire and ability to participate in religious and spiritual practices• Cultural values and appreciation• Various specific recreational interests and preferences	<ul style="list-style-type: none">• Design interactions to do <i>with</i>— not <i>to</i> or <i>for</i>—the resident• Make available activity materials• Encourage residents to use their remaining skills in daily activities• Provide chances for involvement in the community• Acknowledge that some residents with dementia experience increased confusion, agitation and movement in the early evening• Consider the resident’s level of functioning, group dynamics, and overall mood

REFERENCES

Adapted from: Alzheimer’s Association. *Dementia care practice recommendations for assisted living residences and nursing homes*. Chicago (IL): Alzheimer’s Association; 2009. 15p.

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