

# Validation, Recognition, Protection and Calming of the Resident with Dementia or Mental Illness.

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# Warrigal Care Goulburn



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## Aerial view of Warrigal Care Goulburn



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# Program Design

- The strategies were formed to assist the individual resident to succeed and have positive experiences within their living environment.



# Program Design

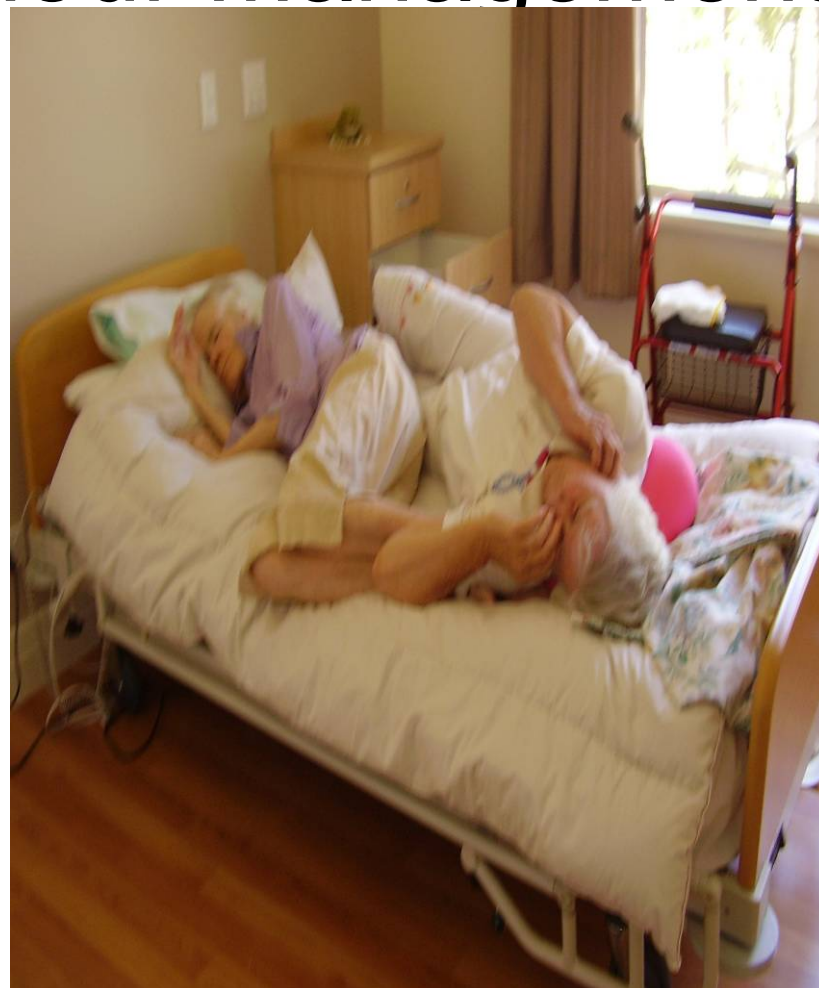
- The target group of our 25 residents breaks down to:-
- 32% with Alzheimer's Dementia
- 32% Other Dementia
- 28% Diagnosis of Depression
- 8% Diagnosis of Schizophrenia
- 8% Vascular Dementia
- 4% Frontal Temporal Dementia
- 4% with a diagnosis of severe anxiety
- 8% are under the age of 65
- And 100% require secure accommodation due to wandering or unsafe behaviors.

# Our strategies

- A Guide to Behaviour Management
- Individualised doors
- “My eyes are Blue”
- Mental Health First Aid Certificates
- Mobile Activities Cabinet
- Hydrotherapy

# A Guide to Behaviour Management

- This guide was developed as a easy care guide for the staff to manage the many different behaviors and needs of residents with dementia and mental illness.



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Resident	Causative factor of Behaviors	Behaviors	Day Interventions	Afternoon Interventions	Night Interventions	Special Instructions
<b>Marie</b> Bar Maid	Vascular Dementia Pain R) hip & R) Shoulder Diabetes Brain Stem CVA	Confabulation of life's events, wanders becomes lost and disorientated, Makes derogatory comments on others	Give jobs to like setting the table, washing up, setting table for lunch, folding linen.	Likes to sleep between 1300hrs-1400hrs, Leg and foot massage, talk about family and animals	Usually sleeps well. May need to be reoriented to time.	Give PRN pain relief need to watch for non verbal clues.
<b>Annabella</b> Nurse,	Alzheimer's Disease Depression	Becomes lost and disorientated, isolates self, will come out inappropriately dressed	Knitting, folding linen, Likes music & whiteboard quizzes	Likes to sleep between 1300hrs-1400hrs, Leg and foot massage.	Usually sleeps well	Need to ensure she eats and drinks enough
<b>Eileen</b> Homemaker	Vascular Dementia Depression	Delusions, Hallucinations, verbal aggression, refuse to eat, becomes lost and disorientated	Enjoys word games and music. Will peel veggies and make dough cookies	Likes to sleep between 1300hrs-1400hrs, Leg and foot massage	If she gets up toilet her, likes to have a talk give her a cup of tea & explain the time.	Need to ensure she eats and drinks enough – if she is anxious offer meal in her room.
<b>Shirley</b> Artist	Unspecified Dementia	Becomes lost and disorientated, derogatory comments about other residents., will come out inappropriately dressed	Painting projects, read to Shirley, very sociable likes the garden Goes to Day Respite Wednesday and Saturday	Leg & foot massage, as same as for day interventions	Can wake up very confused – needs reorientation and 1:1 time spent with her to settle	Shirley has been referred for review by SHMOP & ACMHT
<b>Audrey</b> Registered Nurse,	Alzheimer's Dementia	Verbal aggression, isolation, reorganizes her personal positions over and over, pack bags for trips, becomes lost and disorientated, Does not like to interact with other residents	Likes going for a walk with carer, 1:1, likes looking at gardens	Leg & foot massage Same interventions as for day	Likes to read sometimes, reorientate to time and place	Very deaf need to repeat yourself
<b>Maria</b> Executive Manager	Unspecified Dementia, Pain – Venous ulcers both legs	Verbal aggression, isolation, Derogatory comments about others, religion extremely important – carries bible for mass, will come out inappropriately dressed	Very Religious likes to sing & pray – take to all Catholic activities. Loves Poetry. Likes to dress well and wear lots of jewellery	Likes to rest between 1300hrs -1400hrs in blue electric recliner, Leg and foot massage, <b>Spa Bath in pm if agitated</b> Interventions the same as for day	Often wanders, reorientate to time and place, likes a cup of tea.	Catholic religion very important to her, ensure she is taken to Mass or Rosary whenever it is offered at ACF. Likes her bible with her

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# Individualised doors



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# My Eyes are Blue



# My Eyes Are Blue

- My Eyes are Blue

- To make eye contact with someone is engaging the person on an intimate level. To be able to identify some of the residents' most important memories, thoughts and feelings gives the carer an ability to communicate with meaning, feeling and validates the resident as a fellow human being.
- 1. What color are your eyes?
- 2. What do you like best about yourself?
- 3. What color was your hair when you were young?
- 4. What do you remember best about your wife/husband?
- 5. Tell me the best thing that happened to you?
- 6. Tell me the worst thing that happened to you?
- 7. What did you "want to be when you grew up" & what did you eventually do?
- 8. Does anything scare you now?
- 9. Where was the best place you lived?
- 10. Where was your favorite holiday?
- 11. Did you have a favorite pet?
- 12. What is your favorite plant/flower?
- 13. Do you believe in god or do you have any special spiritual beliefs?
- 14. Do you have any regrets?
- 15. Were you a good:-
- Cook
- Gardener
- Mechanic
- Builder
- Knitter

# My Eyes are Blue

Sewer

Mother/Father/daughter/son?

16. What do you like to read?

17. What is your favorite food and drink?

18. Do you like sport and did you play any when you were young?

19. What is your favorite color?

20. What makes you cross? Sewer

Mother/Father/daughter/son?

16. What do you like to read?

17. What is your favorite food and drink?

18. Do you like sport and did you play any when you were young?

19. What is your favorite color?

20. What makes you cross?

21. What type of music do you enjoy?

22. Who is your favorite movie/TV star?

23. What is the best fun you can have?

24. What is your best memory?

**Please take a photo of the resident looking their best.**

**Take a foot print and hand print.**

**If the resident is unable to give you the information please contact their representative who may be able to give you some insight.**

**“The eyes are the windows to the soul”**

**English Proverb**

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# Mental Health First Aid Certificates

- Staff able to intervene quickly when resident is in crisis
- Staff gain confidence
- Staff are competent
- Staff gain valuable knowledge
- Secures a good working partnership with Aged Care Mental Health.

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# Mobile Activities Cabinet



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# Hydrotherapy



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# Needs Analysis, Partnerships and collaboration.

- Develop a robust network of support
- Expand staffs knowledge
- Research & Resources
- Helping other services
- Demand for beds increasing
- ACMHT – Aged Care Mental Health Team
- SHMOP – Southern Health Mental Older Persons

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# Sustainability



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# Questions and Thanks



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