Helping Dementia Residents through COVID-19 Challenges

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Nursing Homes and Assisted Living: On The Frontlines of the COVID-19 Crisis

*48% of nursing home residents are living with dementia.

*42% of residents in residential care facilities, including assisted living communities, have Alzheimer’s or another dementia.

*Residents with dementia are particularly at risk to COVID-19 due to their age, their significantly increased likelihood of coexisting chronic conditions, and the community nature of these settings.

*According to some estimates, more than 27,000 residents and workers have died from the coronavirus at nursing homes and other long-term care communities.
What are some challenges in providing dementia care in Nursing Homes and Assisted Living during COVID-19?

*Have your memory care residents had a difficult time following social distancing, washing their hands, avoiding touching their face, and wearing a face mask?

*Have the changes to resident routines, disruptions in daily schedules, use of unfamiliar equipment, or working with unfamiliar caregivers can lead to fear and anxiety resulting in increased depression and behavioral changes such as agitation, aggression, or wandering?

*Has the lack of family visitation or volunteers accounted for behaviors?

*Have your residents had an increased number of falls?

*Any weight loss?
Responses to providing dementia care during COVID-19

*How is your facility dealing with feeding assistance?* Some residents have actually gained weight due to being more sedentary”, “All staff have been assisting with feeding during this time”

*Have the residents exhibited weight loss?* No weight loss has been noted

*Has there been an increased number of falls?* No increased fall were noted.

*How is your facility approaching hygiene for their residents?* “All residents, along with staff have attend in services on proper hand washing”, “Residents are on a supervised handwashing schedule”, “We disinfect every day the railings, bathrooms, all door knobs, all light switches, all chairs, all tables, and game pieces, everything that is touched- daily”, “We have marked the floor with duct tape to ensure the recommended social distance of six feet.”

*How have activities changed in response to the crisis?* “Everyone sits 6 feet apart, only 2-3 participants per table, seated 6 feet apart”, “All activities are done one on one in resident’s individual rooms.”

*How is your facility engaging family communication and updates?* ”Phone calls and/or video calls with residents' families are scheduled to connect on a regular basis. Families also visit their loved ones through window visits at the facility.”
As a response to the COVID-19 crisis, person-centered care is one of the most important steps in providing quality dementia care

*Person-centered care is tailored to fit each resident’s special, cognitive and social abilities. Con Person centered care is designed to enhance the strengths of all residents and to connect with their personal life memories, which enables them to function at a higher ability level and to live in greater well-being on a daily basis.

*It is recommended that a nurse, or social worker or staff under the supervision of licensed clinicians completes a HIPAA-compliant personal information form for each person and keeps it in an easily accessible place, such as inside a closet door in a folder attached to the back of a door.
Person-centered information form can include:

1. Individual’s preferred name (and pronouns).
2. Cultural background.
3. Religious or spiritual practices.
4. Past hobbies and interests.
5. Names of family and friends.
6. What upsets the person and what calms him or her down.
7. Sleep habits; eating and drinking patterns and abilities; typical patterns of behavior; and normal daily structure and routines.
8. Remaining abilities, motor skills, verbal processing and communication abilities and methods.
Persons with Alzheimer’s and dementia depend on schedule, structure, and routine. With this current crisis, maintaining as much structure as possible keeps the memory care residents comfortable and feeling safe. However, keep in mind that dementia-related behaviors may occur due to the changes.
Strategies to observe and respond to dementia-related behaviors include:

* Rule out pain, thirst, hunger or the need to use the bathroom as a source of agitation.

* Speak in a calm low-pitched voice.

* Try to reduce excess stimulation.

* Ask others what works for them.

*Validate the individual's emotions. Focus on the feelings, not necessarily the content of what the person is saying. Sometimes the emotions are more important than what is said.
...Strategies to observe and respond to dementia-related behaviors include continued

*Understand that the individual may be expressing thoughts and feelings from their own reality, which may differ from generally acknowledged reality. Offer reassurance and understanding, without challenging their words, can be effective.

*Through behavioral observation and attempted interventions, try to determine what helps meet the person’s needs and include the information in the individualized plan of care.

* Be aware of past traumas (veterans, abuse survivors, survivors of large-scale disasters).

* Never physically force the person to do something.
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