

How to Use Personal Information in Care-giving Tips for Health Care Providers



My Life Reflections

- Talk with the person about their memories – use long term memory to support their self esteem and identity as a unique individual, provide cues during care.
- Recognize the person's achievements, significant social roles, hobbies and interests (e.g., Head cook, community volunteer, raised a family, held a steady job, grew the *best* tomatoes, built his own house, published a book, etc.).
- Encourage life continuity – keep life-long patterns going!
- Encourage the telling of familiar life stories – especially the funny ones.
- Prompt reminiscences of sensory experiences, good feelings, especially as a child (eating berries, riding a horse, exploring the barn, etc.).
- Honour the person's life long traditions, including religious values.
- Identify and provide opportunities to support the person as they are described by family or others: e.g., "very curious", "loves a joke", "very private", "a great thinker", "super organized", "artistic", "musical", "an amazing gardener!", "a devoted mother".
- Ask about "how it was back then" – explore life's learning's, how they coped, what gave them strength or personal convictions, what shaped their beliefs and values about privacy, work ethics, dignity, self-reliance, etc.
- Understand this person's past to make sense of their current "reality" – at whatever place they are living in their memory.
- Use life information in understanding their responses to stress, managing their social and physical environments, etc.
- Capture life information in the person's care-plan, validate with family members and share with the team to guide everyday care-giving, communication, and approaches to care.
- Other ideas?**



My Family and Home Life

- Listen for specific names about people, pets, significant others, and understand the relationship, its importance, etc.
- Talk with the person about family and significant others to:
 - provide meaning, pleasure, significance, comfort, connection.
 - engage social skills: talking, turn taking, listening, focusing
 - validate feelings about important people.
- Provide security and linkage with familiar names.
- De-escalate agitation or restlessness by engaging the person in a conversation about significant others ("You sound worried about your daughter, Molly – can you tell me about her?").
- Use names of significant others to provide distraction ("Tell me about your dog Jake").
- Other ideas?**

Helping Me in Everyday Life



- Use personal information directly into care-plans**, for example:
 - preferred sleeping position
 - bath vs. shower;
 - preferred articles of clothing, wears socks to bed
 - beverage choice (coffee, milk, tea) at particular times of the day

Other examples of personal care-related information:

- likes to read in the bathroom on the toilet;
 - reads a newspaper *every* morning with coffee (Note: even if the person can no longer read, there is symbolic value in maintaining this tradition if it provides the person comfort)
 - prefers to sit and quietly watch activity rather than actively participate in groups
 - is an early (or late) riser; preferred order of dressing and eating in the morning?
 - **There are as many preferences about care needs as there are individuals – one way does not fit all - ask!**
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- Negotiation** is an important technique in preserving personhood in dementia care. Where possible, provide choice that meets wishes and needs. **Consult, and negotiate compromise** with the person where tensions exist between their preferred schedule and organizational schedules. **Flexibility in care routines** is to be strived for, as it can enhance the individual's sense of control about their situation.

I look forward to.../Hopes and Dreams



As self-awareness becomes diminished or lost with advancing dementia, the sense of one's **future self**, and of personal aspirations, hopes and dreams becomes increasingly faded and uncertain. Moving into residential care, commonly seen to be "the end of life", compounds this belief that persons with dementia are only living in the present with no strong link to future. And yet, interviews with residents who were asked their care wishes identified they wanted staff to know "**we are living our lives**".

Creating (or helping to create) a sense of future is an important aspect of caregiving for people with dementia who can no longer do so themselves. This is an area seldom explored with residents and one in which opportunities need to be regularly provided, even if memory loss means they will forget shortly after. For persons with dementia in the early stages, they may still be able to identify their wishes, dreams, aspirations and hopes for the future. (e.g., "*I want to do that again*"; "*I hope that he will come see me tomorrow*"; "*I am looking forward to...*"). Ask family members to help you identify information that supports their sense of future.

Examples of using the concept of future in care practices that support personhood include:

- Mark and celebrate seasonal and traditional holidays with special events, environmental cues that stimulate the senses: e.g., colour, decorations, songs and music, etc.
- Honour each resident's birthday in a culturally meaningful way.
- Talk about the future with a sense of anticipation. Ask the individual what they would like to see, do, participate in, what they think it will be like, etc.
- Try asking the person what their hopes are for the future – and actively listen to the response.
- Use knowledge of the person to provide **a sense of life continuity and purpose**. e.g., provide opportunity for someone to "go to work" in a meaningful way – a simple job or task that is related to prior skills and knowledge and contributes to feeling productive (watering plants, "painting" (with water), folding laundry, stacking books, setting the table, etc.). These activities enhance self esteem and self-worth.