

Dementia is every Allied Health Professionals business

Dementia is increasingly becoming the core remit for Allied Health Professionals (AHPs) working within an acute setting, however, it is estimated that two thirds of people living with dementia stay in the community and one third reside within a care home setting. While dementia is often viewed as an isolated illness, people living with dementia may have other medical conditions. As a result, AHPs working in the community will also be working with people who have dementia, in their daily practice.

An estimated 90,000 people have dementia in Scotland, around 3,200 of whom are under the age of 65. People with dementia experience a decline in cognitive function that, over time, affects their ability to live independently and can shorten their life expectancy. Dementia can have not only a considerable impact on the quality of life of the person living with the condition but also their families and carers.

This resource has been designed for all Allied Health Professionals in Scotland, to help facilitate positive outcomes when working with people with dementia. AHPs include:

Art Therapists, Diagnostic Radiographer, Dietitian, Occupational Therapist, Orthoptist, Orthotist, Paramedic, Physiotherapist, Podiatrist, Prosthetist, Speech and Language Therapist, Therapeutic Radiographer



There are 5 things that you need to know about the AHP approach

1. The AHP approach is applicable for all people with a diagnosis of dementia in all health and social care settings
2. It is underpinned by principles of human rights as outlined in PANEL (Participation, Accountability, Non-discrimination and equality, Empowerment and Legality Alzheimer Scotland 2017)
3. The fundamental understanding driving the approach is that people living with dementia **can** benefit from AHP-led interventions

4. The AHP approach combines a biopsychosocial approach with an integrated and coordinated approach to providing AHP interventions
5. The five elements of the AHP approach are described separately but must be considered collectively within assessment and treatment sessions

This AHP resource will provide you with practical ways that you can support people living with dementia and their families/carers, in your everyday work.

Supporting families and carers as equal partners



Remember an informal carer could be a spouse, daughter/son, other relative, friend or neighbour who may still be employed. Carers are a key and equal partner in the person with dementia's care, view them as a source of expertise and remember their experience is unique to them.

Supporting family carers

- Carers need support and reassurance, be an empathetic but informed listener
- Ask the person with dementia if they want their carer involved in discussions/decisions about their healthcare. For example consider having carers attend assessments/treatment sessions, with permission copy carers into appointment letters
- Carers can act as a co-therapist and continue the treatment programme with appropriate guidance and support
- Keep family informed of input/actions/appointments and consider carer held records/diary/notepad to promote effective communication

Enhancing daily living



- The person with dementia may still be employed, consider a referral to an Occupational Therapist for Vocational Rehabilitation and liaise with employers

- Encourage the person with dementia to engage in daily activities using a risk-enabling approach
- Break down tasks into simple steps to allow the person with dementia to complete them successfully, seek advice, where appropriate, from an Occupational Therapist
- Supportive seating can provide pressure relief and postural support whilst facilitating engagement with others and in meaningful activity. It can also help with digestion and improve respiratory function. Consider referral to an Occupational Therapist for advice

Adapting everyday environments

At home

- Advise on small modifications and adaptations to the physical environment with regard to improving lighting, ensuring flooring/paving is consistent in tone, that the toilet is easy to find and reduce environmental trip hazards eg rugs
- Consider the use of assistive technology for example fall detectors, medication prompts, door exit sensors
- Refer to the local Fire and Rescue Service for a free home fire safety check
- Provide written advice as not everyone has access to the internet
- If the person with dementia experiences difficulty self feeding consider adapted cutlery (liaise with Occupational Therapist) or finger foods
- Consider the eating environment – is there too much clutter on the table?, seating position, distractions ie too much noise, is the lighting adequate and does the plate contrast with the colour of the table and the food
- Refer to Occupational Therapist for advice re environmental adaptations and social work re assistive technology

Maximising psychological well-being

Communication

- Find out what the person likes to be known as, always introduce yourself and explain why you are there
- Make sure glasses, hearing aids are of the correct prescription, working and the person is wearing them when needed

- Reduce background noise, for example, turn off the TV
- Direct your conversation toward the person with dementia, use good eye contact, short simple sentences, yes/no questions, speak slowly and give the person time to answer
- Try and understand the reason for stress/distress/agitation - eg pain, fatigue, fear, hunger, frustration etc, don't assume it is due to the person's dementia
- Remain positive and avoid interruptions
- Refer to a Speech and Language Therapist for expert assessment, advice and support around communication changes for people with dementia

Maximising physical well-being

Always ask the person with dementia if they can do something themselves before helping.

Activity and Exercise

- Programmes should be planned, structured, repetitive and purposeful, however, they should also be flexible enough to take account of the person's needs
- If the individual is experiencing unexplained falls consider liaising with the Pharmacist for a medication review as well as referring to Physiotherapy

Good Footcare

- Personal footcare includes the washing, drying and moisturising of the skin, encourage this to be done daily.
- If the individual is unable to self manage their footcare ask family, friends or a carer to help, provide advice on private help with foot care
- If the person with dementia develops foot pain, changes in colour or breaks to the skin, refer to the local Podiatry service.

Eating well and Hydration

- Food and drink help maintain health and well-being, if the person with dementia is reporting or observed as having difficulties with eating, drinking or taking medication, consider referring to a Speech and Language Therapist for specialist assessment.
- Weight gain/loss - remember the person with dementia may forget to eat or may have forgotten that they have already eaten (liaise with Dietitian)
- Check that dentures fit and whether the person likes to wear them for eating.

- Support good mouth care. Oral hygiene is very important for the enjoyment of eating and drinking as well as reducing the risk of respiratory tract infections
 - Factors which can influence eating and drinking can include – lack of motivation or visible prompt eg eating with others, issues with mouth care/dentures/teeth, constipation, medication side effects, pain, difficulties with shopping and preparing food
 - Ensure that all food and drink is within the person with dementia's sight, reach and that hearing aids/glasses are worn if required
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Further information/resources

- Alzheimer Scotland helpline 0808 808 3000
- Alzheimer Scotland (2017) Connecting People, Connecting Support
- Alzheimer Scotland: A guide to making general practice dementia friendly
- Carers assessment - contact local social services department
- Nutrition and Diet Resources (2014) Eating well with Dementia – A carers guide <http://www2.gov.scot/Resource/0044/00449379.pdf>
- Scottish Fire and Rescue Service <https://www.firescotland.gov.uk/your-safety/for-householders/home-fire-safety-visit.aspx>

Educational resources

- Learnpro modules