

LeadingAge Wisconsin 2014 Spring Conference – “Winning Strategies” May 8, 2014

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Ignite the Fire Within: The Art of Exceptional Self- Leadership – Allison Massari

Allison was an inspirational speaker sharing her story of recovery from a tragic accident.

Intentional Happiness by Allison Massari

Joy and pain exist side-by-side.

Imagine that you have a mountain of your pain in one hand. And your joy is in the other. Focus on the joy, *even if it is the smallest thing*. The build your joy – *grow it and nourish it* – so much, that eventually your joy *towers over your pain*.

Choose love anyway.

There comes a point when we can learn to feel good, even if we are struggling. Our happiness is born in our ability to see all that is beautiful and good... AND all that is painful and unfair....and choosing compassion, kindness, and love alongside the pain that we feel. When times are challenging always ask,

“What if I could be happy anyway?”

Courage, tenacity, determination, Never give up.

Sometimes in life there is no break, no quick fix, you *dig deep* and survive it. It’s the synergy of these two qualities – love and guts - that creates total aliveness.

Person Centered Dementia Care: Who Wins? – Sonya Barsness

“By improving dementia care through the use of individualized, person-centered care approaches, CMS hopes to reduce the use of unnecessary antipsychotic medications in nursing homes and eventually other care settings as well.” – CMS, 2013

BEHAVIOR MANAGEMENT: WE DIRECT THEM VS PERSON-CENTERED CARE:
WE MEET THEM **WHERE THEY ARE** AND LISTEN TO **WHAT THEY ARE TELLING US**

“Dementia is a shift in the way a person experiences the world around her/him.”

Actions and Reactions

“Behaviors” might be just actions and reactions. There are reasons behind behavior.

BEHAVIOR IS A FORM OF COMMUNICATION. BEHAVIOR IS AN EXPRESSION OF NEED.

Non-Pharmacological Interventions: ◦Reminiscence Therapy ◦Validation Therapy ◦Acupuncture
◦Aromatherapy ◦Light Therapy ◦Massage. ◦ Music Therapy ◦Snoezelen ◦Pet therapy
◦Individualized approaches KEY ◦Move from INTERvention to PREvention, Invention

It is more than reducing Antipsychotic medications, it is better quality of life and care of residents, happier staff, other clinical outcomes, less “behaviors” ?

When is information collected? What tools are used to collect? who has access to it?, How often is it changed? How is it connected to the care plan?

Imagine six circles around a resident – Routine, Preferences, Interests, Life History, Social Pattern, and Stress Response

Know the Person – Who is the Resident? Tools to us: About Me, All About Me, 20 Questions, Life History, PELI (Preferences for Everyday Living Inventory)

Each person can and does make a difference. Relationship is the fundamental building block of a transformed culture. Respond to spirit, as well as mind and body.

Risk taking is a normal part of life Put person before task All elders are entitled to self-determination wherever they live Community is the antidote to institutionalization Do unto others as you would have them do unto you

Being with Persons with Dementia Means... Understanding things from their perspective.

Being with persons with dementia “where they are”.

Recognizing persons with dementia as whole individuals. Building on strengths. Connecting with persons with dementia and validating them as human beings and as equals. Recognizing that sometimes the best way we can support persons with dementia is to just be with them, to sit with them, and to listen to them.

“Winning Strategies for Understanding “Behaviors” – Sonya Barsness

What is a behavior?

“1 a : the manner of conducting oneself b : anything that an organism does involving action and response to stimulation c : the response of an individual, group, or species to its environment”

-Merriam Webster

Refer to Hand in Hand CMS Training Toolkit- Chapter 4. Action vs. Reaction

Research on Unmet Need

RCT- Compared two groups of residents with dementia

One group had individualized approaches specific to their identified unmet needs.

The other group just had educational presentation on agitation, behaviors, etc.

Intervention group had significant decreases in agitation, aggression, and increases in pleasure.

“Evidence shows that a large proportion of these so called behavior problems stem from an incongruence between the needs of people who suffer from dementia and the degree to which their environment fulfills those needs. Thus, many “problematic behaviors” represent a cry for help, a result of unmet needs, or an inadequate attempt to fulfill those needs.”

“He’s confused because he has dementia.” Or “I’m confused because I don’t understand what he is trying to tell me.” A. G. Power (2010) Dementia beyond Drugs

Why Are They Acting That Way?.... Health Conditions, Medications, Communication, Environment, The task, Unmet Needs, Life Story/Personality, YOU

Other Questions to Ask.... When? Where?... What happened before (and after)?... Who was involved?

Not Great Responses “No” “Don’t” “You Can’t” “That’s not true” Ignoring Arguing Correcting

Helpful “Go-to” Responses Yes, and....Yes, let’s..... I need your help....Let’s try...I’m sorry...

I didn’t mean to upset you.....Come with me...I don’t know. Yes, and.

From “In the Moment” by Karen Stobbe, <http://www.in-themoment.com/>

Great session, Thank you for allowing me to represent WRAP, I had a great time visiting with both Sonya Barsness and Cat Selman. They would both be wonderful speakers at a WRAP Conference!