



## Building a Person-Centered Culture for Dementia Care

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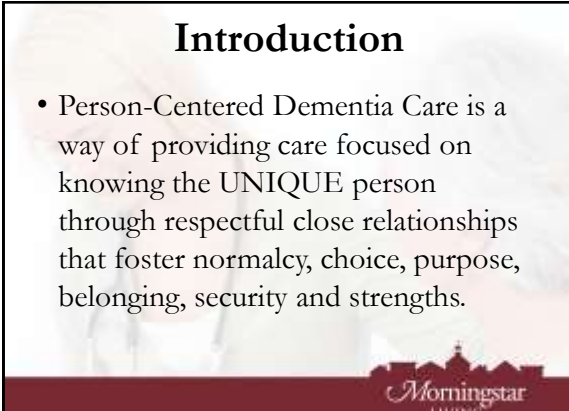
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## Introduction

- Person-Centered Dementia Care is a way of providing care focused on knowing the **UNIQUE** person through respectful close relationships that foster normalcy, choice, purpose, belonging, security and strengths.

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- 5.5 Million Americans are living with Alzheimer's Dementia.
- 1/10 people age 65 years or older have AD.
- 2/3 of Americans with AD are women.
- African Americans are 2 times as likely to have AD or other Dementias.
- Hispanics 1 ½ times as likely.
- 60% of older adults with Dementia reside in the community.
- 25% live alone.
- 42% of residents in Assisted Living have AD or other.
- 61% of Nursing Home residents have moderate or severe cognitive impairment.
- By age 80, 75% of people with AD are admitted to Nursing Homes.

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## Program Objectives

1. Core Values and Philosophy – Person-Centered Culture
2. Structural Elements to Support a Person-Centered Culture
3. Personalized Practices and Programs
4. Community Practice Recommendations
5. Video – “Person-Centered Matters”
6. Dementia Friendly Lehigh Valley (Promo)
7. Q& A




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“Humanizing dementia care is a human rights issue.”

- Kim McRae, family caregiver




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## Core Values & Philosophy

- Foundation
- Set of Beliefs
- Examples of Person-Centered Culture:
  - Positive interactions are key
  - Direct involvement in decision making
  - Treating the person, not the disease
  - Understanding unique histories and preferences
  - Maintaining dignity and autonomy
  - An individualized approach recognizing uniqueness (Person-Centered Assessments and Care Planning)




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## Core Values & Philosophy

- Examples – *continued*
  - Understanding the world from the perspective of the individual living with dementia
  - Providing a supportive environment
  - Promote normalcy
  - Welcome families
  - Provide meaningful activities
  - Flexibility in routines
  - Focus on strengths and capabilities
  - Relationships over tasks



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“Within all of us resides the need to be whole.”

– *Oliver Sacks, M.D.*



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## Structural Elements Building Blocks

- Relationships and Community
- Leadership/Governance Support
- Care Partners/ Workforce
- Services
- Meaningful Life and Engagement
- Environment
- Accountability



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“Service is Compassion Made Visible.”

- Karen Love




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**Personalized Practices**




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“Music can lift us out of depression or move us to tears – it is a remedy, a tonic, orange juice for the ear. But for many of my neurological patients, music is even more – it can provide access, when no medication can, to movement, to speech, to life. For them, music is not a luxury, but a necessity.”



- Oliver Sacks, M.D.  
Professor of Neurology,  
New York University School of Medicine




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“One of the blind spots people have is seeing the distress as the problem rather than a symptom of a larger need, so they treat the distress and never get to the heart of the matter.”



- Dr. G. Allen Power,  
author of “Dementia Beyond Drugs.”



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### Examples of Personalized Practices

- Patience, openness, authenticity in each interaction.
- Helping family/friends acknowledge changes.
- Developing policies and procedures to support person-centered outcomes in an organization.
- Commitment to fully train and build knowledge and skills for staff.
- Leaders coach and model effective practices.
- Leaders create and sustain meaningful relationships with residents and family members.
- Staff training and stability.
- Consistent staffing assignments.
- Holistic – Non-Pharmacologic interventions first.



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### Examples of Beneficial Personalized Practices

- Art – Worth, expression, calmness, self-confidence.
- Children/Teens
- Music – iPods
- Pets – Non-judgemental!
- Social Interaction
- Solitude
- Spiritual, Religions, End of Life
- Touch – Beneficial
- Bathing/Dressing/Grooming



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## Examples of Beneficial Personalized Practices

- Movement/Exercise – All Stages
- Therapeutic Smells
- Light and Lighting
- Noise/Sound
- Outdoors/Nature
- Sensory Stimulation
- Sustainability

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“I want all my senses engaged.”

– *Maya Angelou*

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## Special Programs

- Montessori
- Music and Memory
- Brain Fitness – (Saïdo, Dakim, It’s Never 2 Late)
- Art in the Moment
- Hand in Hand
- Bathing Without a Battle
- Compassionate Touch
- Spirit Alive
- Red Plate
- Timeslips

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## Community Practice Recommendations

- Make information about brain health and cognitive changes available to older adults and their families.
- Maintain routine procedures for detection and referrals for diagnostic evaluations and assessments.
- Provide education and support EARLY in the disease to prepare for the future.
- Provide education and information on the transitions associated with a progressive disease.
- Introduce technology that provides support.
- Connect with agencies in the community with expertise with Dementia.




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## 2018 DEMENTIA CARE PRACTICE RECOMMENDATIONS



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## Glossary

- **Holistic** – Refers to a bio-psycho-social-spiritual orientation to healthcare and well-being.
- **Personalized Approach** – Term preferred by experts rather than “non-pharmacologic” as the latter has a medical model of care connotation instead of a holistic one.
- **Personalized Practices** – This term defines specific person-centered practices. These practices are individualized and are intended to support the personhood and authenticity of each person who is living with dementia.
- **Person-Centered Core Values & Philosophy** – There is a moral and ethical responsibility to support persons living with dementia as holistic, existential beings. Every person has his/her own meaning of life and authenticity (personality, spirit and character) that supersedes any physical condition. This forms the foundation for person-centered dementia care.
- **Person Centered Operational Practices** – This term refers to the bread processes that anchor and operationalize person-centered dementia care.
- **Person-Centered** – Has its roots in humanistic psychology and the seminal work of Carl Rogers and Abraham Maslow based on the understanding that people are multi-dimensional beings and the psychosocial context of health and well-being is as important as the physical/medical aspects.
- **Personhood** – “Standing or status that is bestowed upon one human by others in the context of relationship and social being. Personhood implies recognition, respect and trust.”

*“Dementia Care” The Quality Chasm – published by the Dementia Action Alliance*




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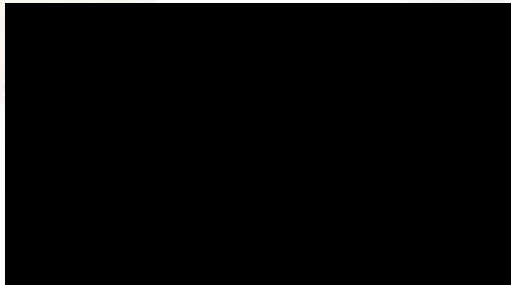
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## “Person-Centered Matters”



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## Thank You

References for Presentations:

- Dementia Action Alliance
- “Dementia Care: The Quality Chasm”  
*published by the Dementia Action Alliance*
- CCAL Advancing Person Centered Living
- Alzheimer’s Association Dementia Care Practice Recommendations

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## Dementia-Friendly Lehigh Valley

- Who we are?
- Mission, Vision, Goals
- Initiatives
- Website: <https://www.dfamerica.org/>  
[Info@DementiaFriendlyLV.org](mailto:Info@DementiaFriendlyLV.org)

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