

Responsive Behaviours Transcript

[00:00] Responsive behaviours.

[00:02] Judy, a person with dementia, wakes up in the morning and doesn't recognize the room she is in, even though she has slept in it for the past 15 years. She panics and begins to scream for help.

[00:13] Judy's son hears the screaming and rushes into the room to try and comfort her. Judy doesn't recognize her son and feels afraid. She begins to throw things at him in self defense.

[00:24] In an attempt to calm her down and preserve her things, her son tries to restrain her before using his words. Judy begins to cry.

[00:33] Thomas has had a long and generally happy life. He now feels frustrated that his body doesn't respond the way it used to. He recently suffered a stroke that left him paralyzed on the left side of his body. As a result, he is unable to speak clearly and struggles to move around independently.

[00:49] It was a beautiful day and Thomas wanted to go sit outside. He knew he wouldn't manage it alone and would need support to go out. During a visit from his nurse, Thomas tried to communicate what he wanted by pointing towards the window. The nurse did not understand what Thomas was communicating, smiled politely, completed their tasks and left. The next day the nurse noticed that Thomas was withdrawn and began to worry that he might be depressed.

[01:16] Judy and Thomas have both shown what are called responsive behaviours. Responsive behaviours are physical or verbal actions that are a meaningful response when a person's needs are not met or when they are under stress.

[01:27] Responsive behaviours are not the result of neuropathological symptoms.

[01:32] These behaviours may be challenging or upsetting for care providers. Examples of responsive behaviours include: distress, agitation, and aggression.

[01:43] Here are some things that can trigger responsive behaviours. The care approach of care providers, bowel or urinary issues, hunger or thirst, feelings of pain or discomfort, and environmental factors, such as the temperature or lighting of the room.

[02:00] Dementia and other conditions, often cause individuals to experience responsive behaviours.

[02:05] Using a person-centred care approach, will help all carers to try to understand the situation from the client's perspective. In turn, this approach aims to identify the unmet needs underlying

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the responsive behaviours, and focuses on addressing these needs rather than reacting to the responsive behaviours.

[02:23] If we think about these clients as violent, aggressive, or difficult, it can negatively affect how the client thinks about themselves, our relationship with the client, and the quality of care we provide.

[02:34] Remember that caring for clients that display responsive behaviours, can also be challenging for family members, especially if they have not learned about responsive behaviours.

[02:43] Family or other caregivers may have informal support networks, but very few seek out formal support to talk about their experiences.

[02:51] When needed, speak to your supervisor or interprofessional team about arranging discussions with family members to talk about the supports that are available.

[03:00] To demonstrate understanding of responsive behaviours, formal and family care providers need to be aware of their actions, thoughts, attitudes, and reactions.

[03:10] Education and training on how to support clients that display responsive behaviours, has shown to improve care provider confidence.

[03:17] Staff supporting clients with dementia, should engage more frequently in reflective practice, ongoing education, and decision making.

[03:25] Reflective practice is an approach that professionals use when faced with uncertain or difficult moments in practice. Responsive behaviours fit this description.

[03:35] A reflective practitioner continually questions assumptions and uses experience and knowledge to create solutions that best suit the situation. Reflective practitioners reflect inaction, adapting on the fly during challenging moments. They also reflect on action, to think through how things went, and what they could do differently in the future.

[03:55] If you believe one of your clients is showing responsive behaviours, here are some questions to ask yourself.

Who – Who was in the room during the responsive behaviour? Who was with the client before?

What – What was the client feeling? What were they trying to communicate? What was different about the client's environment?

Where – Where in the home did the behaviour take place?

When – At what time of day did the behaviour take place? Sundowning, means dementia can lead to more of these behaviours later in the day. When did the client last take their medication?

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Why – Why did the client react in the way that they did?

How – How often did the behaviour happen? How long did it last?

[04:43] Let's dig a little deeper. Please pause the video as needed to reflect on your views and assumptions for the following prompts.

[04:51] What behaviours do you consider to be responsive behaviours? Can you describe two recent experiences?

[04:58] What supports do you need in the home care environment to deliver care to people with dementia who show responsive behaviours?

[05:06] What challenges do you experience when providing care to people with dementia and responsive behaviours?

[05:14] What other support services do you feel would help you care for people with dementia and responsive behaviours?

[05:21] What education support would help you to care for people with dementia and responsive behaviours?

[05:27] When a client shows a responsive behaviour, it is important to ensure that the client is not in a position to harm themselves. It is equally important to keep yourself out of harm's way. Give the client space, and if necessary and safe to do so step out of the room. Take a moment to assess the situation. Try and identify the triggers of the responsive behaviour. Can you reduce the trigger or remove it completely?

[05:52] In some situations, you cannot remove the trigger. For example, the client is reacting to you being in the room. In that case, try using the following strategies.

[06:04] Reassure the client, be compassionate and consider what they may be feeling at that time.

[06:09] Use a calm tone when speaking and remind them that they are safe.

[06:13] It may help to remind the client of where they are and the time of day.

[06:17] Explain the purpose of the visitor task.

[06:20] Then, ask the client for permission to continue providing care. This shows respect, and that you are treating the client as a person.

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[06:28] Shift the client's focus towards something they enjoy. For example playing or singing their favorite song.

[06:34] Once the client is calm, reassess the situation. Decide whether to continue or discontinue care, and explain this to the client and/or their family members.

[06:44] Some clients may respond well to complementary therapies, such as music therapy, exercise, and aromatherapy.

[06:52] Clients may show responsive behaviours if they are in pain. This could be muscle pain, joint pain, or problems with bowel movements.

[07:00] To assess and support clients that have pain or discomfort, ask the client to communicate the location and level of pain they are feeling.

[07:08] Make sure that the client is taking their medications properly.

[07:11] Report the event to the client's care team.

[07:16] You can take actions to prevent responsive behaviours.

[07:19] Speak to the client's family and learn about the client's sleeping habits, daily routines, and possible triggers.

[07:26] Try to reduce the number of triggers around the client. You can do this with the help of another professional like an occupational therapist.

[07:33] If possible, give the client autonomy, and encourage the client to perform tasks on their own.

[07:39] Remember, every client is unique. A strategy that works for one client, may not work for another. It is important to get to know your clients and tailor care to meet their individual needs.

[07:51] Keeping track in a journal or log can help you notice patterns of behaviour, potential triggers, and helpful activities.

[07:57] The information collected in tracking logs may be very helpful to other care professionals, and the organization when making decisions about client care. If you're not sure whether your organization has behaviour tracking logs, speak to your supervisor.

[08:11] It's important to understand the different roles of the providers involved in the client's care. This improves communication and helps to make sure that concerns are handled effectively. The client will receive better quality care, and support as a result.

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[08:26] As a care provider, you may understand the importance of giving a client time to adjust to changes in their environment. Try to reassure your client before engaging them. This helps to calm them.

[08:38] In Judy's case, you could take some time to speak to her son about the challenges his mother is facing.

[08:44] Then suggest some resources that will help him handle these situations in the best way possible. Some examples of resources are, education through the Alzheimer's society, or community groups that help families adjust to having a family member with dementia.

[08:58] Care providers often do not have enough time with a client to learn all their likes, dislikes, habits, and responsive behaviours. However, a little can go a long way.

[09:09] In Thomas' case, with knowledge of what responsive behaviours are, the nurse may have realized what he was trying to communicate. This may not have added much time to the nurse's workday, and may have made a positive impact for Thomas' overall well-being.

[09:24] Further, it can be beneficial to engage in discussions with interprofessional team members, such as an occupational therapist, or psychologist. As they may have additional suggestions to help address Thomas's unmet needs.

[09:36] Education on dementia and responsive behaviours has been shown to improve the confidence of care providers when working with clients of that nature.

[09:43] It is widely accepted that dementia education needs to be accessible to all staff, and a collaborative approach is necessary in order to develop management guidelines and support strategies.

[09:55] For resources and support on dementia and responsive behaviours, the Alzheimer's society's website may be useful. Please also complete our CACE Home Care Curriculum, which provides more education about dementia, as well as delirium and depression. Care providers may also be able to get support from their employee assistance programs, colleagues, and regional behavioural support organizations.

[10:18] In summary, you must be aware of clients actions or gestures. These actions maybe a type of responsive behaviour.

[10:26] Try to learn as much as possible about your clients. This will reduce the chance of triggering responsive behaviours.

[10:32] If a client displays a responsive behaviour, first ensure your safety, and then the safety of the client. Next, try various strategies to support the client.

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[10:43] Use reflective practice to improve your ability to prevent, notice, and respond to responsive behaviours.

[10:50] Share information with the interprofessional team about effective strategies, potential triggers, and anything else that seems important.

[10:57] By working on this with the whole team, you can have a big impact on the client's care experience.