

Caring for Difficult Patients

Satellite Conference and Live Webcast
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Faculty

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Caring for Difficult Patients

- How many times have you been assigned to a patient you just can't get along with?
- Have you found yourself in a difficult situation where family members are upset or angry and you didn't know what to do?

Caring for Difficult Patients

- Has a patient suddenly behaved in a strange way and you didn't know what to do?

Objectives

- Identify medical and caregiver situations that increase stress
- Develop ways to respond to patients and caregivers under stress
- Identify negative behaviors related to depression and learn ways to communicate with depressed patients

Objectives

- Identify negative behaviors related to dementia and delirium
- Develop methods to better communicate and care for patients with dementia and delirium

Caring for the Difficult Patient

- What does it feel like to be a home health patient?
- * EXERCISE

Factors Contributing to Stress

- Medical condition
 - Constant pain and discomfort
 - Lack of sleep
 - Inability to care for oneself
 - Loss of independence
 - Rapid decline
 - Poor prognosis

Factors Contributing to Stress

- Fear of the unknown:
What will happen to me?

Factors Contributing to Stress

- Caregiver stress
 - Sandwich generation: caring for a parent and children
 - Loss of income/financial strain
 - Loss of normal routine
 - Change in living arrangements
 - Multiple doctor appointments

Factors Contributing to Stress

- Family conflict, particularly regarding the care of a loved one
- Health problems
- Lack of sleep
- Lack of concentration
- Anger/frustration at situation

Reactions to Stress

- Anxiety
- Anger
- Frustration
- Depression
- Fear

Responding to Stress

- **Remain calm, even when others around you are not**
- **Place yourself in that “person’s shoes”**
- **Speak in a low, calm voice**
- **Do not argue or become defensive**
- **Lend a sympathetic ear**
 - **Listen carefully to what they are saying**

Responding to Stress

- **Stay focused on the care of the patient**
 - **Do not get involved in family conflicts**
- **Reduce stimuli in the room, such as a radio and TV**

Responding to Stress

- **Watch your posture and hand motions to avoid looking threatening and angry**
- **Contact supervisor, if necessary**

Depressed Patients

- **Behaviors associated with depression:**
 - **Demanding behavior**
 - **Poor hygiene**
 - **Memory problems**
 - **Confusion, delusions, or hallucinations**
 - **Anxiety and nervousness**

Responding to Depressed Patients

- **Be an active listener**
 - **Give your full attention to the patient at each visit**
- **Encourage the patient to talk about the past**

Responding to Depressed Patients

- **Reminiscing can help people learn and grow from their experience, can be a reminder of how much they are loved, and how they have helped others**

Responding to Depressed Patients

- Don't change the subject when the patient pauses
 - Depression often slows a patient's responses
 - They need additional time to gather their thoughts

Responding to Depressed Patients

- Acknowledge the sadness, irritability, or withdrawal
- Do not judge the patient
- Do not give advice
- Praise every accomplishment - no matter how small

Responding to Depressed Patients

- Be honest and promote realistic expectations
- Encourage patient to maintain a healthy diet
- Encourage the patient's interests such as gardening, music, pets, books
- Encourage exercise that they can do

Patients with Dementia

- Patients with Alzheimer's and dementia related illnesses act in unusual and unpredictable ways
- These behaviors can lead to misunderstanding, frustration, and tension
- Important to understand that the patient is not behaving this way on purpose

The Three-step Approach (Alzheimer's Association)

- The three-step approach to helping identify common behaviors and their causes
 1. Identify and examine the behavior
 2. Explore potential solutions
 3. Try different responses

The Three-step Approach

1. Identify and examine the behavior
 - What was the behavior?
 - Was it harmful to the individual or others?
 - What happened just before the behavior occurred?
 - Did something trigger it?

The Three-step Approach

- What happened immediately after the behavior occurred?
 - How did you react?

The Three-step Approach

- 2. Explore potential solutions
 - What are the needs of the person with dementia?
 - Are they being met?
 - Can adapting the surroundings comfort the person?

The Three-step Approach

- How can you change your reaction or your approach to the behavior?
 - Are you responding in a calm and supportive way?

The Three-step Approach

- 3. Try different responses
 - Did your new response help?
 - Did you need to explore other potential causes and solutions?
 - If so, what can you do differently?

Behaviors Related to Dementia

- | | |
|-------------------------|--------------------------|
| • Aggression | • Wandering |
| • Anxiety and Agitation | • Unpredictable Behavior |
| • Confusion | • Sleep Problems |
| • Repetition | • Hallucinations |
| • Suspicion | |

Aggression

- Verbal
 - Shouting or name-calling
- Physical
 - Hitting or pushing
- Aggression can occur suddenly, with no apparent reason, or can result from a frustrating situation

Aggression: How to Respond

- Try to identify the immediate cause
 - Is the patient tired because of lack of sleep?
 - Are medications causing side effects?
 - Is the patient unable to tell you they are in pain?

Aggression: How to Respond

- Is the patient affected by loud noises and a busy environment, or physical clutter?
- Does the patient feel lost?
- Are you asking too many questions or making too many statements at once?

Aggression: How to Respond

- Are your instructions simple and easy to understand?
- Is the patient picking up on your own stress and irritability?
- Are you being negative or critical?

Aggression: How to Respond

- Focus on feelings, not facts
- Don't get upset
- Limit distractions
- Try a relaxing activity
- Shift the focus to another activity
- Decrease level of danger
- Avoid using restraint or force

Anxiety

- Patients with Alzheimer's may become restless and need to move around or pace
- Patients may also become upset in certain places or focused on specific details

Anxiety

- Causes may include:
 - Moving to a new residence or nursing home
 - Changes in the environment or caregiver arrangements
 - Fear and fatigue resulting from trying to make sense out of a confusing world

Anxiety: Prevention

- **Create a calm environment**
 - Remove stressors, triggers, or danger
 - Move person to a safer or quieter place
 - Offer rest or privacy
 - Limit caffeine use

Anxiety: Prevention

- Provide opportunity for exercise
- Develop soothing rituals such as a bath or back rubs
- Use gentle reminders

Anxiety: Prevention

- **Avoid environmental triggers**
 - Includes noise, glare, insecure space, too much background distraction such as TV
- **Monitor personal comfort**
 - Check for pain, hunger, thirst, constipation, full bladder, fatigue, infections, and skin irritations
- **Simplify tasks and routines**

Anxiety: How to Respond

- **Listen to the frustration**
 - Try to understand what the cause may be
- **Provide reassurance**
- **Involve the person in activities such as art, music or other activities to relax**

Anxiety: How to Respond

- **Modify the environment**
- **Find outlets for energy**

Confusion

- **Patient's with Alzheimer's may not recognize familiar people, places, or things**
- **Patients may forget relationships or call family members by the wrong name**
- **Patients may be confused about where home is**

Confusion

- Patients may forget the purpose of common items such as a pen and fork

Confusion: How to Respond

- Stay calm
- Respond with a brief explanation
- Show photos and other reminders
- Offer corrections as suggestions
- Try not to take it personally

Repetition

- Repetition may include:
 - Repeating a word, question, or activity
 - Telling the same story again within just a few minutes
 - Pacing
 - Undo what has just been finished

Repetition: How to Respond

- Look for a reason behind the repetition
- Focus on the emotion, not the behavior
- Turn the action or behavior into an activity
- Stay calm, and be patient

Repetition: How to Respond

- Provide an answer
- Engage the person in an activity
- Use memory aids such as pictures, calendars, etc.
- Accept the behavior and work with it

Suspicion

- Memory loss and confusion may cause the patient to perceive things in new, unusual ways resulting in suspicion
- Patients may accuse loved ones or caregivers of theft, infidelity, or other improper behavior

Suspicion: How to Respond

- Don't be offended
 - Listen to what the person is saying and try to understand the reality
 - Be reassuring and show you care
- Don't argue or try to convince
 - Allow the patient to express their ideas and acknowledge their opinions

Suspicion: How to Respond

- Offer a simple answer
- Switch the focus to another activity
- Duplicate any lost items

Wandering

- Alzheimer's patients often become confused and wander or become lost
- Patients may be trying to go home
- Patients may be attempting to recreate a familiar routine such as going to school or work

Wandering: How to Respond

- Encourage activity
 - Involve the patient in daily activities such as washing dishes, folding laundry, or preparing dinner

Wandering: How to Respond

- Inform others
 - Make sure friends, family, and neighbors are aware the patient has Alzheimer's and that wandering may occur
- Make the home safe
 - Limit access to potentially dangerous areas

Unpredictable Situations

- Bold behavior
 - Flirtatious or make inappropriate advances toward others
 - Try to distract the patient or lead him or her to a private area
 - Avoid getting angry or laughing at the patient

Unpredictable Situations

- **Inappropriate dressing**
 - The patient may forget how to dress or take clothes off at inappropriate times
 - Help the patient by laying out clothes in order that they put them on

Unpredictable Situations

- **Shoplifting**
 - Alzheimer's patients may forget to pay for merchandise
 - Patients should carry a card in their wallet explaining that they are memory-impaired

Sleep Problems

- **Make a comfortable environment**
 - Comfortable temperature
 - Nightlights or security objects
 - Discourage TV watching in bed
- **Maintain a schedule**

Sleep Problems

- **Encourage family members to discuss sleep disturbances with their physician**
- **Avoid stimulants such as alcohol, caffeine, and nicotine**

Hallucinations

- **Patients with Alzheimer's may see, hear, smell, taste, or feel something that isn't there**
- **Hallucinations in Alzheimer's patients are a result of changes in the brain**
- **The hallucinations may or may not be frightening to the patient**

Hallucinations: How to Respond

- **First, ask yourself if the hallucinations are a problem for you or the patient**
 - Is it upsetting to them?
 - Is it leading them to do something dangerous?

Hallucinations: How to Respond

- Offer reassurance
 - Respond in a calm supportive manner
 - Gentle patting may divert the patient’s attention to you
 - Acknowledge the feelings behind the hallucination

Hallucinations: How to Respond

- Use distractions
 - Try to take a walk or sit in another room
- Frightening hallucinations often subside in a well-lit area with other people present

Hallucinations: How to Respond

- Turn the patient’s attention to music, conversation, or activities they enjoy

Hallucinations: How to Respond

- Modify the environment
 - Check for sounds that may be misinterpreted
 - Look for lighting that casts shadows
 - Cover mirrors with cloth so the patient does not think they are looking at a stranger

Summary: Responding to Behaviors

- Remain flexible, patient, and calm
- Respond to the emotion, not the behavior
- Don’t argue or try to convince
- Use memory aides
- Acknowledge requests and respond to them

Summary: Responding to Behaviors

- Look for reasons behind behavior
- Encourage the family to consult a physician to identify any causes related to medications or illness
- Explore various solutions
- Don’t take the behavior personally
- Share your experiences with others

For More Information

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References

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