



WEBINAR

Thursday, 29 October 2020

DEMENTIA: A MULTIDISCIPLINARY APPROACH TO CARING FOR PEOPLE WITH CHANGED BEHAVIOURS

LEARNING OBJECTIVES: PHARMACISTS AND NURSES

- ▶ Describe how you would use a person-centred approach in the management of changed behaviours
- ▶ Demonstrate how you would work as part of a multidisciplinary team to implement non-pharmacological strategies when working with changed behaviours
- ▶ Explain how you would overcome barriers to implementing a person-centred approach in the care of people with dementia
- ▶ Demonstrate how you would communicate with the multidisciplinary team, including people with dementia and their carers, in a way that emphasises person-centred care

LEARNING OUTCOMES: GP

- ▶ Develop a person-centred approach to support the management of changed behaviours in dementia
- ▶ Use a multidisciplinary team approach to implement non-pharmacological strategies when working with changed behaviours
- ▶ Recognise potential barriers and identify solutions to overcome barriers to implementing a person-centred approach in the care of people with dementia
- ▶ Manage the communication with the multidisciplinary team to ensure that a person-centred approach is implemented when working with changed behaviours

THE MDT TEAM

- ▶ Nurses and other staff in RACFs
- ▶ General practitioners
- ▶ Pharmacists (dispensing, QUM, accredited)
- ▶ Specialists (geriatrician, neurologist, psychiatrist)
- ▶ Allied health professionals (physiotherapist, podiatrist, occupational therapist)
- ▶ People with dementia, their families and carers are also important members of team



MANAGEMENT AS A TEAM INCLUDES

- ▶ Daily living activities
- ▶ Brain function
- ▶ Risk factors
- ▶ Mental health and wellbeing
- ▶ Behaviour
- ▶ Comorbidities
- ▶ Nutrition
- ▶ Safety
- ▶ Medicines
- ▶ Support
- ▶ Planning for the future
- ▶ Physical activity/movement



LIVED EXPERIENCE

As a person living with dementia, what are the most important things you want health professionals to consider when providing care to you?

CASE STUDY: MEET IVANKA

88 years old, relatively new resident at an aged care facility

Medical history: Alzheimer disease, deafness/hearing loss, osteoarthritis, oedema (cause not specified), COPD

Allergies: Nil



IVANKA

Social history and background:

- ▶ Lived at home with her husband who has recently died. He was Ivanka's main carer
- ▶ Has 3 children and a number of grandchildren that she used to see regularly
- ▶ Worked part-time as a librarian at the local school
- ▶ Was involved in many social clubs, including the local Russian senior citizen's club.

Drug	Dosage and frequency
Clonidine 100mcg	2 tablets in the morning and 1 tablet at night
Oxazepam 15mg	1 tablet in the morning
Risperidone oral solution 1mg/mL	1mL three times a day
Lactulose 3.34g/5mL	20mL in the morning
Risperidone oral solution 1mg/mL	0.5mL when required

IVANKA

Social history and background:

Since entering the facility, Ivanka has had trouble settling in and likes to wander around the facility during the late evening sometimes during the night. Staff notice that she is showing signs of aggression towards other residents when she wakes in the morning which worsens as the day progresses.

Risperidone was initiated to address the aggression and oxazepam was prescribed to help with sleeping following the death of her husband.



NURSE PERSPECTIVE

Nurse well placed to initiate the investigation

Select an assessment model-

PIECES[™] mnemonic



GP PERSPECTIVE

Medical

- ▶ Alzheimer disease +/- Va D
- ▶ Behaviours
- ▶ Medication review

Social

- ▶ Language & culture
- ▶ Family & friends
- ▶ Librarian
- ▶ Memories

SPECIALIST PERSPECTIVE

- ▶ Risperidone dose is high and may not be required; gradually titrate down. Why clonidine? Why 0.2 mg mane, 0.1 mg nocte??
- ▶ Rule out pain, UTI, etc
- ▶ Monitor behaviours (ABC); PCC as before, engage family
- ▶ Tailor activities to her likes (and avoid dislikes)
- ▶ Russian books, movies?

PHARMACIST PERSPECTIVE

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ALLIED HEALTH PERSPECTIVE



PATIENT & FAMILY PERSPECTIVE

AUDIENCE QUESTIONS



RESOURCES

Patients

- ▶ Dementia Australia:
<https://www.dementia.org.au>
 - ◆ National Helpline 1800 100 500
- ▶ Dementia Support Australia:
<https://dementia.com.au/>
 - ◆ Dementia behaviour advisory service
 - ◆ Severe behaviour response team

Health professionals

- ▶ <https://dementiakt.com.au/doms>
 - ◆ Diagnostic Tools
- ▶ Dementia Training Australia:
<https://dta.com.au>
 - ◆ Education & training
- ▶ <https://www.nps.org.au/professionals/antipsychotic-medicines>
 - ◆ Resources and tools

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