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[Key assumptions in caring for the Alzheimer's patient](#)

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By Micha Shalev, MHA

Dementia is a difficult diagnosis. The progressive decline of brain function and memory retention are frustrating and challenging experiences for the senior afflicted, as well as for their loved ones.

You, as close family members (spouse, children, and caregiver) are key people in the life of the resident with memory impairment and/or Alzheimer's disease. They may no longer be able to communicate their needs or make decisions in their own best interests. To provide quality care for the person with Alzheimer's, you must understand the disease and how it affects behavior, mood and personality. You will need specific skills to handle unpredictable behaviors when they occur. It is especially important to remember certain basic principles and assumptions about the Alzheimer's resident:

- The resident may behave in an unpredictable, even childish way. Yet, he will retain adult feelings and should be treated as an adult.
 - The resident has LOST HIS ABILITY TO REMEMBER – you can't force him to
 - The resident often appears difficult because he is frustrated, frightened or embarrassed. He simply may not understand what you are
 - This is a disease which gets worse over time; therefore, the resident will become more dependent on you – often, even while resisting your
- (5) The resident's world may appear increasingly confusing and unsafe. Your key to providing good nursing care is creating a secure, predictable environment.
- (6) FOCUS ON REMAINING SKILLS. Even the most impaired person responds to warmth, respect and dignified treatment.
- (7) Finally, understand how important you are to the Alzheimer's resident. Your skills, attitude and behavior determine the quality of life for the memory-impaired resident in your facility.

To care for a loved one at home or in the community, and to offset all the above concerns or issues, the best approach to handle is a person-centered approach. A person-centered approach is a way of organizing and providing services that places "the person" at the centre of planning and decision-making; that is respectful of individual beliefs and values; and that doesn't make assumptions about people before understanding their life context and what is important to them.

A person-centred approach is respectful of all persons – meaning that “person-centred care” has a focus on the quality of the care that patients/service-users/families/care partners and so on receive, and of course, that is the focus for evaluating the effectiveness of care services.

However, a person-centred approach considers the effectiveness of person-centred care alongside the importance of it happening in a person-centred culture, that is, a culture that respects the needs of those who are providing the care and their value as persons.

For too long the focus has been on service users without the commitment focus on staff – focusing on one at the expense of the other is fundamentally flawed.

As dementia advances, people do become more vulnerable. However, we sometimes confuse this increasing vulnerability with a “lessening” of personhood, in other words, becoming a lesser person in the eyes of others.

We then adjust our meanings of key caring principles (such as compassion), rather than adjusting the application of those principles in the way that we work and engage with people. It is this adjustment that needs the great skill in working effectively with people living with dementia and their families/care partners and the needs of care workers who are knowledgeable and skilled in dementia care.

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