



# Managing Challenging Behaviours: Community Support

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# Agenda

- **Statistics**
- **What are “responsive behaviours”**
- **Basic strategies**
- **Baycrest supports**

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## What we Know

- The number of Ontarians with dementia will increase by 40% by 2020
- 30% of home care clients with dementia exhibit some behavioural symptoms
- 17% of clients in long term care homes are physically restrained
- In 2011 it was reported that 34% of nurses in hospitals or long term care facilities in Canada reported physical assault and 47% reported emotional abuse
- Responsive behaviours secondary to dementia is one of the leading sources of caregiver burn out and often will result in the client being institutionalized

*Ontario Behavioural Support Systems: A Framework for Care,  
January 2011 <http://www.akeresourcecentre.org/BSO>*

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# What are “challenging behaviours”?



- “Responsive” = responding to something in his/her environment or something internal
- Cursing, yelling, hitting, pinching, biting, kicking, grabbing, restlessness, exit seeking, repetitive questions/sentences, sexual inappropriateness, etc.
- Avoid terms such as “aggressive behaviour” or “behavioural problem”



# Where to start????

- Client care team
  - Family Doctor
  - Neurologist
  - Geriatrician
  - Psychiatrist
  - Community Care Access Center (CCAC)
  - Alzheimer Society of Toronto
- Education
  - Alzheimer's 101
- Understand the meaning of the behaviour
- Track the behaviours
- **RESPIRE**

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# General Tips for Verbal Agitation

- Stay calm and avoid arguing
- Validate
- Get the client's attention by using their first name
- Be aware of your body language
- Make eye contact
- Approach from the front
- Be at the same physical level as the client
- Use basic words and short sentences
- Avoid open ended questions
- Avoid negative terms (i.e. "don't" "can't" "no")
- Use demonstration to help with communication
- Be patient



# General Tips for Physical Agitation

- Remain calm
- Give yourself physical space from the client
- Make note of changes in the client's tone of voice, body language, facial expressions, that may happen prior to the physical agitation
- Avoid forcing the client
- Avoid wearing dangly jewellery
- Keep your hair tied back
- Consider wearing long sleeves
- Keep the client's nails trimmed/cut short
- Call for help when needed



# General Tips for Exit Seeking/Wandering

- Register the client with MedicAlert
- Consider Finding Your Way program
- Put locks in unfamiliar areas
- Take the person for supervised walks on a daily basis
- Increase daily activity
- Hide the person's shoes
- Put an alarm on the door
- Baby proof the door handle
- Disguise the door
- Baby monitor
- Notify neighbours



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# General Tips for Resisting Personal Care

- Avoid forcing
- Consider alternative ways to bathe (i.e. bath in a bag, sponge bath, No Rinse products, baby wipes, pedicures/manicures, hair salons, etc.)
- Look at the environment (mirrors, room temperature, etc.)
- Respect privacy
- Tell the person what you are doing each step of the way
- Look at past routines
- Use tricks-i.e. make the person noticeably dirty or wet
- Consider a “prescription”
- Consistent personal support workers



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# Inappropriate Voiding/Fecal Smearing

- Have physical examination-prostate, rectal tearing, constipation, infection, etc.
- Remove open garbage bins/planters
- Wayfinding cues
- Toileting routines
- Pj bottoms with tie strings
- Look for non verbal cues
- Give tactile activities



# Baycrest Resources

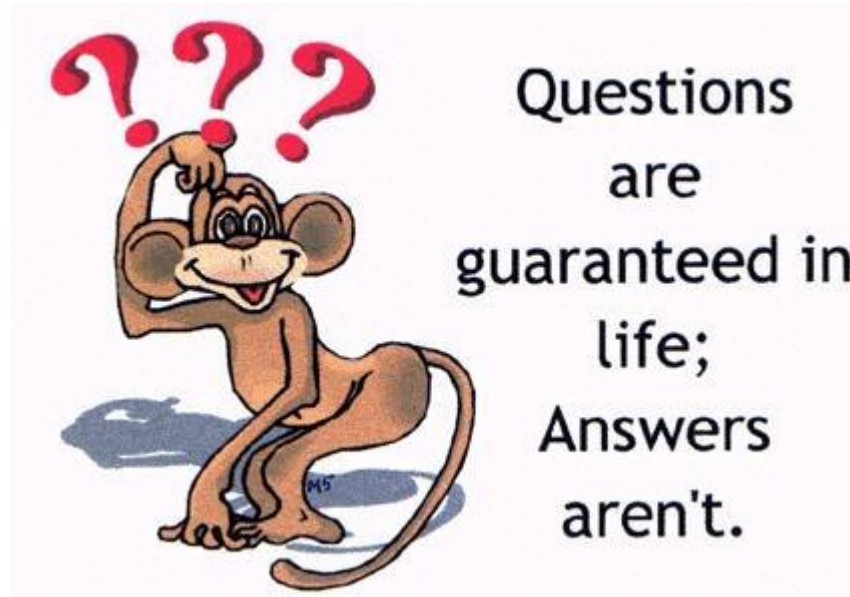
- **Community Behaviour Support Outreach Team (CBSOT)**
- **Long Term Care Behaviour Support Outreach Team (LTC BSOT)**
- **Transitional Behaviour Support Unit (TBSU)**
- **Geriatric Psychiatry Community Services Team (GPCS)**
- **Integrated Community Care Team**
- **Centralized Access to Senior Specialty Beds (CASS)**

\*Info available on [www.baycrest.org](http://www.baycrest.org)\*

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# ?Questions?



# THANK YOU!!

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