



DUKE DEMENTIA FAMILY SUPPORT PROGRAM

Caregiver Connections

An Educational Webinar Series With The Experts

**The presentation will begin shortly.
Thank you for your patience!**

dukefamilysupport.org

919-660-7510



Interdisciplinary Care: The Role of the SLP in Dementia

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DukeHealth



- Understand the role of speech therapy in caring for a Person Living With Dementia (PLWD)
- Gain basic knowledge of communication and swallowing changes for PLWD
- Learn general principles and strategies for interacting with PLWD

What does a speech therapist do?



- Evaluate and treat difficulties in speech, language, cognition and swallowing



Common Deficits in Dementia That Are in the Speech Therapist's Scope of Care

Dysarthria: weak muscles used to produce speech; slurred, low volume

Dysphagia: difficulty with chewing or swallowing food, drink, and/or pills



Common Deficits in Dementia That Are in the Speech Therapist's Scope of Care

- Aphasia: Difficulty saying or understanding words/language
- Cognition: Often the most obvious deficit in PLWD; memory, attention, insight, problem solving



Swallow Evaluation for Dementia

- A: adaptive equipment
- B: Behaviors
- C: communication
- D: Dysphagia
- E: Environment



Changes in PWD: Swallowing

- Perseverative mastication
- Oral holding
- Texture aversion
- Change in taste preferences/appetite
 - Sweet and sour preserved
- Cognition and Physical limitations
- Aspiration risk
- Malnutrition/ Dehydration



Cognition and Communication for Dementia

- Evaluate (language, memory, “behaviors”)
- Evidenced-based treatment approaches (external memory aids, spaced retrieval therapy)
- Educate (patient, family, caregivers/staff)
- Counsel (coaching, direct model and response demonstrations)



Changes in PLWD: Communication and Cognition

- Empty speech (non-specific words)
 - “I need *these* to go *there*”
- Difficulty organizing thoughts and “losing train of thought”
- Trouble following long conversations or directions
- Unable to remember prior conversations
- Trouble with naming or find the right word
 - “I want the...the...ugh nevermind just forget it”



Unchanged in PWD

- Early memories
- Routines and rituals
 - Knowing what to do with a hair brush
- Desire for respect
- Need for communication
- Understand and remembering feelings
- Unique characteristics



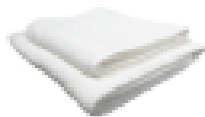
- Visual Memory aids
 - Reading is relatively preserved skill (implicit)
 - Memory books (use real photos)
 - Signs and labels
 - Procedures



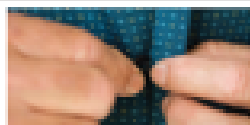
My Bathroom Schedule



Take a bath.



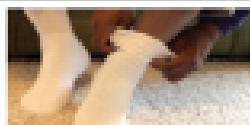
Dry off.



Button my shirt.



Put on my pants.



Put on my socks.



Brush my teeth.



Flush the toilet.



Sample Memory Book



My name is Harry Smith.



I was born October
16, 1939 in Chicago.



My parents were
Hank and Helen Smith.



I have one grandchild.
Her name is Hillary.



I enjoy traveling.



I also love to read.

Memory and Communication Aids for People with Dementia, by Michelle S. Bourgeois.
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- Reminiscing
- Environmental Modifications
- Errorless Learning
- SRT (spaced retrieval therapy)



What does a modified environment look like

- Reduce distractions (turn on lights, turn off tv, close door)
- Do one thing at a time
- Be attuned to behavioral and physical changes (as may have difficulty with verbally communicating)
 - Sweating: too hot in room; facial grimacing:
?constipation, pain



Meeting them where they are

- Find a way to connect first – save time
- Everyone has an agenda – so does your loved one
- We are the ones capable of adapting
- Reasoning is unlikely to work or be remembered later



Strategies continued

- Tell them, don't quiz
- "just for now" – it is not helpful to discuss "later"
- One step at a time
- Slow everything down
- If reading preserved, write things down
- Use yes/no questions
- Offer choices when possible



When you meet resistance:

- Agree with the statement, the feeling, the intent of a PLWD
- If they are angry, identify with their anger; if scared, identify with their fear
- Don't immediately deny what they feel or tell them they are wrong – “don't be afraid, you'll be fine, it's just a needle”



- “I see how scared you are about finding your wife. I would be scared too. Let’s walk down here and look together.”
- You agree and then you do something
- In the “doing something” together is where you can distract or redirect



Supported communication leads to:

- Mistake prevention
- Calm
- Reduced social isolation
- Reduce stress and frustration
- Save time
- Attain joint (staff and patient) goals



Let us help you

- Speech therapists can help to evaluate strengths, educate on strategies specific to your loved one and model use in real time
- You can request an evaluation through your PCP

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Figure 1. ACE graphic. From: Carlee Jones



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