

Unit 13: Understanding the Role of Communication and Interactions with Individuals who have Dementia

Unit reference number: H/616/7299

Level: 3

Unit type: Optional

Credit value: 3

Guided learning hours: 26

Unit summary

Communicating and interacting with individuals who have dementia is an important skill. As care becomes more specialised, those with skills in this area are in demand.

In this unit, you will learn about the effective communication methods that help people with dementia in their day-to-day functioning and relationships with others. You will also learn how interactive skills influence activities within their immediate environment.

The unit will give you an understanding of how individuals' behaviours may contribute to the difficulties in communication with people with dementia.

The skills and knowledge you gain in this unit will help you to support people with dementia by improving their overall wellbeing through the empowerment they develop through communication and interaction.

Learning outcomes and assessment criteria

To pass this unit, the learner needs to demonstrate that they can meet all the learning outcomes for the unit. The assessment criteria outline the requirements the learner is expected to meet to achieve the unit.

Learning outcomes	Assessment criteria
<p>1 Understand that individuals with dementia may communicate in different ways</p>	<p>1.1 Explain how individuals with dementia may communicate through their behaviour</p> <p>1.2 Explain the importance of effective communication to an individual with dementia</p> <p>1.3 Describe how different forms and stages of dementia can affect communication behaviours</p> <p>1.4 Explain, with examples how carers and others may misinterpret communication with individuals affected with dementia</p>
<p>2 Understand the importance of positive interactions with individuals with dementia</p>	<p>2.1 Explain how individuals with dementia can be engaged in positive interactions</p> <p>2.2 Explain the importance of positive interactions and how they can contribute to the wellbeing of individuals with dementia</p> <p>2.3 Compare a reality orientation approach to interaction with a validation approach</p>
<p>3 Understand the factors that can affect the interactions and communication of individuals with dementia</p>	<p>3.1 Identify the physical and mental needs that should be considered when communicating with individuals with dementia</p> <p>3.2 Explain how the sensory impairment of an individual affects their communication skills</p> <p>3.3 Describe how the environment might affect an individual with dementia</p> <p>3.4 Explain how the behaviour of carers and others can affect people with dementia</p> <p>3.5 Explain how the use of language can hinder positive interaction and communication</p>

What needs to be learned

Learning outcome 1: Understand that individuals with dementia may communicate in different ways

Individual

- Someone requiring care or support; it will usually mean the person or people supported by the learner.

Communication behaviour patterns linked with dementia

- Behaviour patterns, e.g. impact on language skills:
 - verbal, e.g. use of incorrect words, shouting, swearing and aggressive display
 - non-verbal, e.g. body language, restlessness, agitation, withdrawal, moody
 - rate of loss of language skills.
- Delayed or impaired information processing.
- Other communication behaviour, e.g. catastrophic reactions (triggered by demanding situations, lack of coping skills, misinterpreted messages).

Importance of effective communication

- Expression of:
 - choice such as choice of food or clothes
 - emotion
 - physical discomfort
 - individuality.
- Participation.
- Maintaining intellectual abilities.

Forms of dementia

- Forms, e.g. Alzheimer's disease, vascular dementia, dementia with Lewy bodies (DLB), mixed dementia, Parkinson's disease, frontotemporal dementia, Creutzfeldt-Jakob disease, normal pressure hydrocephalus.

Stages of dementia

- Normal.
- Normal forgetfulness.
- Mild decline.
- Moderate decline.
- Moderate severe decline.
- Severe decline.
- Very severe decline.

What needs to be learned

Reasons for misinterpreting communication

- Misreading non-verbal cues.
- Not knowing the person or their preferences.
- Cultural misunderstanding.
- Variability of communication skills from day to day.

Others

- Others, e.g. carers, family members, friends and interest groups.

Learning outcome 2: Understand the importance of positive interactions with individuals with dementia

Positive interactions

- Verbal and non-verbal communication where message is received, understood and responded to positively.
- Activities (reminiscence activities, singing, simple exercise, gardening).
- Communicating needs in a way that supports dignity and choice.
- Positive interactions between individual and carer, positive interactions between individual and family or friends.

Importance of positive interactions for individuals with dementia

- Communications and wellbeing.
- Empowerment.
- Social inclusion.
- Self-esteem.
- Activity levels:
 - brain stimulations
 - altering perceptions
 - physical and mental health.

Approaches

- Reality orientation (focus – here and now, time, place and situation):
 - advantages and disadvantages for individual
 - advantages and disadvantages for carers and family.
- Validation orientation (focus – trust, empathy, emotional, psychological needs):
 - advantages and disadvantages for individual
 - advantages and disadvantages for carers and family.

What needs to be learned

Learning outcome 3: Understand the factors which can affect interactions and communication of individuals with dementia

Factors negatively affecting communication and interactions with individual with dementia

- Physical and mental health needs, e.g. visual, hearing, speech, memory, depression, pain, discomfort, illness, side effects of medication, social isolation.
- Environmental factors, e.g. noise, lighting, use of colours, private and communal space, use of assistive technology.
- Carers' and others' behaviours while communicating, e.g. speaking too quickly or too quietly; unfamiliar accents; unfamiliar words; carer or others shouting; speaker and listener at different levels; carer or others not facing individual when speaking; tone of voice; facial expressions, e.g. impatience; body language, e.g. sudden movements; inappropriate use of formal or technical language; use of unfamiliar dialect; unfamiliar accent; over-familiarity on the part of the carer, e.g. use of 'dear' or first name; language differences; using multiple options when asking a question.

Factors positively affecting interactions and communication with individuals with dementia

- Physical comfort, e.g. correct spectacles, hearing aid working, clean dentures.
- Sense of wellbeing, e.g. rested, feeling safe.
- Appropriate environment with reduced distractions, good lighting.
- Carers and others listening, sitting facing individual, being patient, use of visual clues to communicate, e.g. pictures; checking back to ensure they have understood correctly, observing body language.

Information for tutors

Suggested resources

Books

Argyle M – *The Psychology of Interpersonal Behaviour*, 5th edition (Penguin, 1994)
ISBN 9780140172744

Graty C – *Taking part: Activities for people with dementia*
(Alzheimer's Society, 2014) ASIN B00OP9BQZU

Heathcote J – *Memories are made of this: Reminiscence activities for person-centred care* (Alzheimer's Society, 2014) ASIN B00OP864GC

Oddy R – *Promoting mobility for people with dementia: A problem-solving approach*
(Alzheimer's Society, 2014) ASIN B00OP8PSCS

Pool J – *Alzheimer's Society guide to the dementia care environment*
(Alzheimer's Society, 2015) ASIN B00U2T530Q

Journal

Osman SE, Tischler V, Schneider J – '*Singing for the Brain*': A qualitative study exploring the health and well-being benefits of singing for people with dementia and their carers in *Dementia* (London) (PubMed, 24 November 2014)

Websites

www.alzheimers.org.uk	Website for dementia support.
www.thebraincharity.org.uk/how-we-can-help/practical-help/information-advice/a-z-of-conditions	Website for practical support with dementia.
www.communitycare.co.uk/2012/07/26/how-social-care-staff-can-improve-their-communication/	Community Care website article on improving communication within care.
www.dementiacare.org.uk	Advice and information for people with dementia and their carers.
www.open.edu/openlearn/health-sports-psychology/social-care/dementia-care-louises-story	Open Learn – Dementia Care: Louise's story.
www.open.edu/openlearn/health-sports-psychology/dementia-care-modelling-good-care	Dementia care: Modelling good care.
www.scie.org.uk	Research briefings on dementia.

Assessment

This guidance should be read in conjunction with the associated qualification specification for this unit.

This unit is internally assessed. To pass this unit, the evidence that the learner presents for assessment must demonstrate that they have met the required standard specified in the learning outcomes and assessment criteria, and the requirements of the assessment strategy.

To ensure that the assessment tasks and activities enable learners to produce valid, sufficient, authentic and appropriate evidence that meets the assessment criteria, centres should follow the guidance given in *Section 8 Assessment* of the associated qualification specification and meet the requirements from the assessment strategy given below.

Wherever possible, centres should adopt an holistic approach to assessing the units in the qualification. This gives the assessment process greater rigour and minimises repetition, time and the burden of assessment on all parties involved in the process.

Unit assessment requirements

This unit must be assessed in accordance with the Assessment Principles in *Annexe A* of the associated qualification specification.

Assessment of all learning outcomes (knowledge) may take place in or outside of a real work environment.