

HELPING WITH ACTIVITIES OF DAILY LIFE

As dementia progresses, people gradually go from being able to do most of their personal care to needing help with everything. And as a care partner, not only do you have to assist, you also have to recognize what your person can still do so you can support their remaining skills. Doing too little or too much can be frustrating for both of you, plus many people prefer to be independent with these care tasks even though they actually need help.

Keep in mind that cues help immensely. Verbal cues can often get the ball rolling when it gets stopped. “Are you hungry?” can be a cue to start eating. “Would you like me to help you?” might be all it takes, early on, to jump-start a task. Visual cues, such as gestures, signs and demonstration help a person not understanding all of your words or needing to copy your example. Tactile cues such as touching someone’s hand or even handing them a shoe can work wonders and when you combine all three of these, seemingly lost skills can sometimes surface.



Because we are all individuals, no one approach works for anyone. And that one approach that does work won't work all of the time. Therefore, the biggest asset to being a care partner is patience. Taking time and having patience during the task will result in a happier and more successful loved one – and a happier you, too!

Inside are some tips on how to make activities of daily life a bit easier to accomplish.

ACTIVITIES OF DAILY LIVING



TIPS TO HELP WITH DRESSING

Clean out closets to limit choices and offer only seasonal clothing (best done without your loved one).

1. Offer limited appropriate choices and favorite colors.
2. Lay clothes out on a light solid colored surface to provide contrast to the clothing and make it easier to see.
3. Lay out clothes in the order they should be put on, underwear on top to be put on first.
4. Make sure the room is warm, well-lit and private.
5. Limit distractions.
6. Offer clothing they can manage (buttons, zippers, Velcro, slip on).
7. If a person wants to wear something frequently, get duplicates.
8. Choose easy care clothes in case of spills or accidents.
9. Avoid tight fitting clothing, panty hose, high heels, tight socks, etc.
10. Use soft music to set the tone – music they personally enjoy, more upbeat to get them going in the morning and more relaxing to help them unwind in the evening.
11. Help as needed but allow them to do as much as they can. Perhaps verbal (here is your shoe) or tactile cues (touch their hand holding the shoe) can help them do something instead of you taking over.



TIPS TO HELP WITH TOILETING

Have patience, if you are upset they will be, too. They are doing the best they can.

1. Use signs for visual cuing
2. Leave lights on and doors open so the restroom and toilet are easily found. At night use motion activated lights.
3. Choosing contrasting colors in the restroom can help with depth perception and finding the toilet. Colored toilet seats help show the difference between the white floor, white toilet, and white walls.
4. Install grab bars for safety and a sense of security.
5. Follow their schedule. It may be every 2-3 hours, but it may be shorter during some parts of the day and longer during others.
6. Give privacy whenever it is safe to do so.
7. Provide easy on and off clothing for success.
8. For someone more advanced with their dementia, simply asking if they need the bathroom may not be enough. They may not understand what you are asking. Showing them the bathroom when you ask will be helpful.
9. Limiting fluids before bed may be helpful. Fresh fruit can be a good alternative if someone needs hydration later in the evening.

Issues leading to accidents might include:

- Urinary tract infections
- Medications
- Dehydration
- Constipation

Watch for signs that might mean they have to go:

- Pulling on clothing
- Increased wandering, restlessness, or agitation

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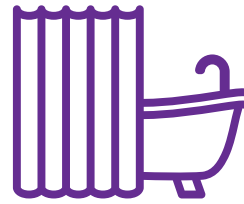
TIPS TO HELP WITH MOUTHCARE

Show them how to brush their teeth.

1. Brush yours at the same time
2. Go step by step
3. Use hand under hand assistance until they can take over the task
4. Follow their past routines and habits as much as possible
5. Ask them to rinse with water after each meal; rinsing with mouthwash at least once a day
6. Go to the dentist, they can help with cleaning and offer suggestions for other ways to make oral hygiene effective
7. Use two toothbrushes, if necessary, they can hold one and you can hold one for them
8. Consider having the person sit while brushing – be sure they can still look in a mirror for cuing
9. Add a rubber grip to the toothbrush to make it easier to grasp
10. Try a 3-sided toothbrush – cleans all sides of teeth at one time for less actual brushing time

Keep in mind:

- Mouthwash with alcohol may burn and discourage use
- It may be better to brush without toothpaste than not brush, it may be better to rinse with water than do nothing at all
- If he/she will not/cannot spit or rinse you may want to use toothpaste that is OK to swallow
- Daily care establishes routines and habits



TIPS TO HELP WITH BATHING

Follow a regular routine and rely on preferred habits and routines of the past.

1. Focus more on the person than the task
2. Be flexible – you must adapt, they cannot
3. Adapt the environment to make it comfortable for the person
4. Padded shower chair, warm room, cover the seat with a towel, reduce noise, try soothing music
5. Use persuasion not coercion – give choices within the task, respond to requests, support remaining abilities, help the person feel in control as much as possible.
6. Be prepared, have everything you need before you begin
7. Stop- when the person is distressed, stop and re-assess the situation

Types of Bathing:

- Shower
- Bath
- Whirlpool
- Walk-in tub
- Sponge Bath

Equipment that might be helpful:

- Limited hand function? Bath mitt, soap on a rope
- Limited reach? Bath sponge, hand held shower head



- Limited balance or endurance? Bath chair or bench, stool, grab bars, shorter chair for shorter people (no dangling feet = better balance), slip resistance surface on shower floor
- Limited understanding of what is happening? Warm space, privacy, limited distractions, slow pace, cover for modesty (can keep on gown or boxers if need be), use hand under hand assistance to support remaining skills, start at the “edges”, wash what is most needed first, keep checking temperature, have everything you need with you, bring extra towels

Sample bathing:

1. Know what you are going to do, what your goal is – but meet the needs of the person first
2. Gather all supplies
3. Give the person acceptable choices (not “Do you want to take a bath,” instead try “It’s time to get washed up, do you want to help get the towels together?”)
4. Stay calm, relaxed, be gentle and respectful
5. Keep the room very warm (people with dementia have trouble regulating their own body temp)
6. Get the water temperature right for the person – let them test the temperature
7. Be sure the foot surface is non-slip. Have grab bars. Don’t use slippery oils.

8. Help them to undress in the bathing location.
9. Assist or transfer them into the bathing location
10. Keep the person warm (a warm, wet towel on their back or on the back of the shower chair might help)
11. Help them do as much of the washing as they can, even if they are simply holding a washcloth and you are actually doing the majority of the bathing
12. Start at the edges but complete the most important tasks first. Remember that areas like the feet, face and genitals may be extra sensitive
13. Use hand under hand assistance to give more control and reduce resistance
14. Give positive reinforcement. Praise and reassure often.
15. Apologize and acknowledge the person’s concerns.
16. Use distraction as needed (treats, singing)
17. Help the person dry off and stay warm (pat dry instead of rubbing)
18. Cover with a robe (can help with getting dry, too)
19. Help them dress

Common issues:

- Gender of the caregiver – would the person needing help be more comfortable with someone of the same or opposite sex?
- BM while showering
- Moving too fast
- Too cold
- Feeling exposed, scared and out of control
- Caregiver doing too many things at one time
- Pain



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More Ideas:

1. Bathe upper body at one time and lower body at another
2. Make the room comfortable, warm, inviting, no shiny floors (they look wet), no slippery rugs
3. Use dry shampoo
4. Get hair washed at the beauty parlor or barber shop if it is an issue at home
5. Soak feet outside of the shower, when seated, as a separate and enjoyable activity
6. Find ways to offer contrast in the bathroom. A white floor, white walls and a white seat make it hard to distinguish one from the next; draping a colored towel on the shower chair can be an easy fix



Myths:

- It takes a lot of water to get people clean: *Careful washing is more important than the amount of water*
- A shortened bath means someone is not doing a good job at getting someone clean: *This is about the person taking the bath, adjusting how and when things are cleaned is good when it works better for the person being bathed*
- Someone has to take a shower or bath to get clean: *There are many ways to get clean without getting in the shower or tub*
- People always feel better after a bath or shower: If it is forced, no one feels better after. They may feel attacked or fearful and may remain upset for long after the event.

- They will forget about it later so just go ahead and do what you have to do: *They may forget the experience but they will not forget the emotion and how they feel. They may also remember bathing as a negative experience overall, even if they don't know why.*
- It takes more time to go slow and be thoughtful and gentle in your approach: *It actually takes more time and creates more stress if the person is resistant.*

Keep in mind:

- Some resistance may be due to pain. Bathing provides a lot of opportunity for painful stimulation. The person may not be able to communicate the pain to you and may simply not want to bathe.
- Frequent causes of pain may include: *arthritis, back pain, constipation, contractures, dental problems, headaches, diabetic nerve pain, old fracture or injury sites, infections, bruised areas.*
- Know the signs to watch for and learn how your person with dementia expresses themselves both verbally and non-verbally. Signs may include, but are not limited to: *calling out, frowning, crying or closing eyes, wincing, hitting, pushing you away, guarding a particular body part, jerking motions, restlessness, or rapid eye blinking.*
- Treat pain before bathing whenever possible.

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