

# Assisting the Patient with cognitive Impairment

Just imagine, a strange woman barges into your house uninvited. She mutters something you don't understand, and starts rummaging through your personal possessions. Then, she comes toward you. How frightening.

This will never happen to me, you're probably thinking. Well, what I've just described is how a confused patient might interpret the PCA entering her room to assist her with morning care. We want to consider how the world looks and feels to a patient with cognitive impairment, and we want to learn to communicate effectively to enhance the patient's quality of life.

## Fact about Cognitive Impairment

### Causes of:

Dementia  
Alzheimer's  
Stroke

### Types of:

Memory Problem  
Impaired Decision-making

### Cognitive Impairment Affects:

Communication

Ability to perform activities

Effects all areas of the patient's life: appetite, socialization, mobility, independence, dignity

Changes in the patient's cognitive status can indicate a variety of serious problems, such as urinary tract infection or dehydration.

## **Goals for Patient's with Cognitive Impairments:**

Maintain the patient's safety

Improve or maintain the patient's independence in Activities of Daily Living

Promote the best communication possible, so the patient's needs and desires are met

Promote the patient's happiness

Improve or maintain the patient's ability to socialize with others

Promote the patient's dignity

## **Memory Problems**

### **Two Kinds:**

Short term memory problem- cannot recall after 5 minutes

Long term memory problem- cannot recall long past

### **Examples- Cannot Recall:**

Time, place, or person

Current season or year

Location of room

Meal times

Family or staff names or faces

What are some examples of memory problems you have observed in patients?

## **Interventions for Patients with Cognitive Impairments Fall into Three Main Categories:**

Communication

Assisting with the Activities of Daily Living

Altering the patient's environment

### **Communication**

Introduce yourself and call patient by name with each interaction

Allow patient ample time to absorb and respond to information

### **Assisting with Activities of Daily Living**

Follow the same routine with patient's care each day

Explain all procedures and treatments to patient

The more stability there is in the patient's routine, the less confusing it will be to the patient.

### **Altering the Patient's Environment**

Provide clock, calendar, and family photos in patient's room

Avoid changes in patient's environment

What are some other interventions you think would help patients with memory problems?

### **Goals for Patients with Memory Problems**

Patient will demonstrate ability to remember names of family and staff members

Patient will demonstrate ability to remember mealtimes

### **Impaired Decision-making**

Have you ever had trouble making a decision? Think for a few moments about the last time you had trouble making up your mind about something.

How did it make you feel?

Impaired decision-making is very stressful for the patient, and affects his safety and autonomy.

### **Types of Decision-Making Problems:**

Slow in making decisions

Unable to make decisions

Makes bad decisions

Become agitated or frustrated when confronted with decisions

What are some examples of impaired decision-making you have observed in patients?

## **Interventions for Patient's with Decision-making Problems:**

### **Communication**

Offer patient two simple choices to reduce the stress of decision making and increase patient's sense of autonomy.

Allow patient ample time to absorb and respond to information.

### **Assisting with Activities of Daily Living**

Follow the same routine with patient's care each day

### **Altering the Patient's Environment**

Provide a calm, therapeutic environment and structured routine

Avoid changes in patient's environment

What are some other interventions you think would help patients with impaired decision-making?

Observe the patient's behavior, actions, appearance, and environment for signs of deteriorating cognitive ability.

You should observe the patient for changes in cognitive status, and report to the supervisor any changes in the patient's ability to:

Remember

Make decisions

Follow directions

Perform simple tasks

Also report to supervisor any changes in the patient's:

Level of consciousness

Response to stimuli

Basic reaction time

Level of basic awareness

### **Goals with Patients with Decision-making Problems**

We want to reduce the stress, and keep as much freedom of decision-making as possible.

Patient will choose clothing to wear during morning care

Patient will verbalize preference of activity every day

**We need to deal with each patient as an individual with unique needs.**

Every patient with cognitive impairment has a care plan for that specific problem. You should be aware of what that is, and you should be familiar with all the goals and interventions.

The care plan should match what is on the visit note sheet, and it should match what is actually going on with the patient. If it doesn't, you need to let the supervisor know.

Besides bringing to the supervisors attention what doesn't match, you can also make suggestions for the care plan about what you think works well with the patient and what doesn't.

You will often be the first person to notice changes in the patient's cognitive status since you are in such frequent and close contact with the patient.