

**APPROACHES TO RESPONSIVE  
BEHAVIOURS**  
*WHAT TO DO WHEN A  
PERSON WITH DEMENTIA  
SAYS “NO!”*

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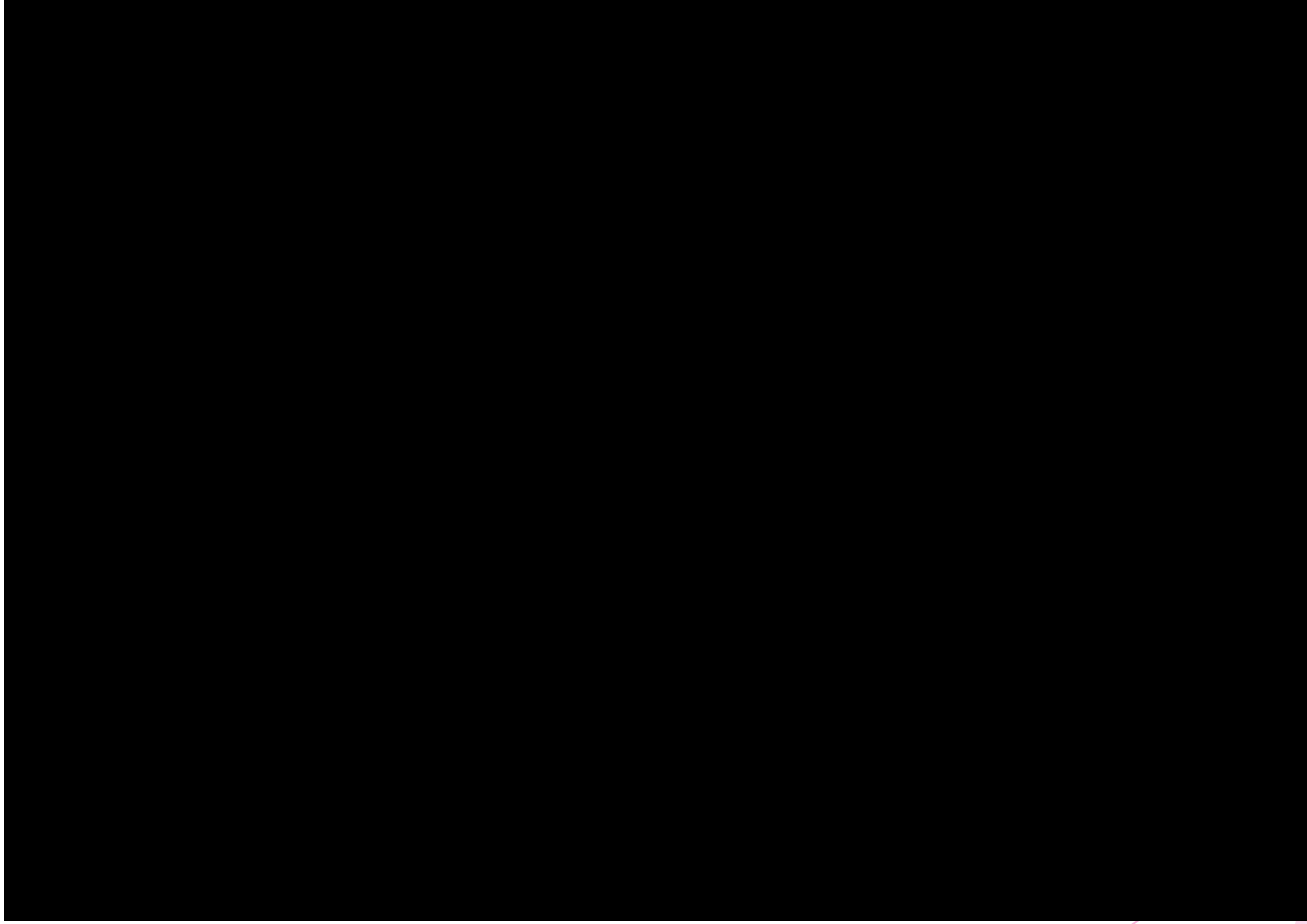
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# Objectives

- ▶ To identify some of the reasons why a person with dementia might communicate, “NO!” to personal care, medications or other requests
- ▶ To understand the philosophy of “Non-Forced Care”
- ▶ To identify the risks of NOT providing care and the risks of providing care when a person is communicating “NO!”

Video clip...



# Language

- ▶ When a person without dementia chooses not to do something asked of them, they are practicing self determination, assertiveness, independence, confidence...



# Language

When a person with dementia is unwilling to do something that others want them to do, their behavior is described as refusal or resistance and they may be labeled as non-compliant, difficult, challenging...



# Think about it....

- ▶ If we feel that the person's choice is not important, we are more likely to force care.



“Being forced into things makes us  
upset or aggressive, even fearful.”

Christine Bryden - Person with Dementia



# Imagine how it would feel.....

For someone who doesn't  
recognize you, doesn't know what  
you are doing, doesn't know where  
they are...





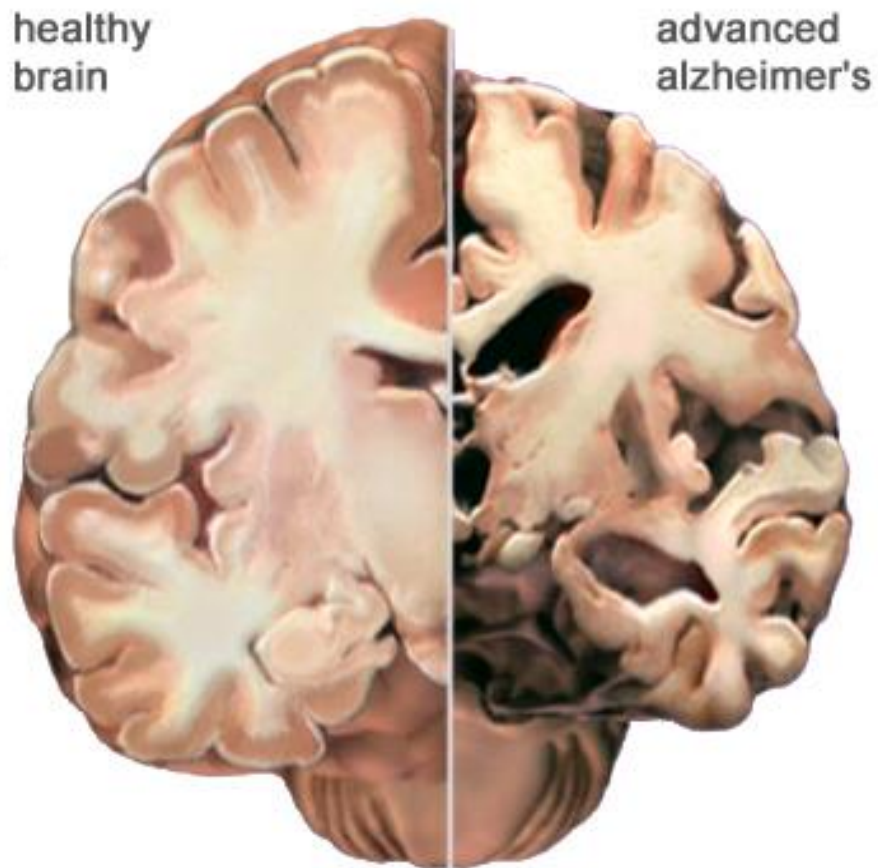
# Think about it....

- ▶ Trust is broken
- ▶ Who created the problem?



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# Alzheimer's Disease



<http://www.alz.org/>

# All behavior has meaning!

We need to look beyond the behavior  
to search for reasons why they are  
communicating “NO!”



# Why people communicate “NO!”

- ▶ **Pain**
- ▶ Something about the situation is triggering a disturbing memory
- ▶ Not understanding what's happening
- ▶ Fear
- ▶ Overstimulation
- ▶ **Proprioceptive impairment**
- ▶ Discomfort
- ▶ Modest/embarrassed
- ▶ **Apraxia**
- ▶ Just don't want to do what you're asking!

# Non-Forced Care Philosophy

- ▶ Intended outcome of this philosophy is that no resident, whether competent or incompetent, will receive care against their will
- ▶ Takes into account the safety of the resident and safety of the staff

Adopted from Heritage Life PCH Policy Manual with permission

# Non-Forced Care: Guiding Principles

- ▶ It is a fundamental human right to say 'no'.
- ▶ It is essential to understand the person's reason for refusing and to address this.
- ▶ When we force care, we lose the trust of the person

Does non-forced care mean  
that care is NOT provided?



# No!

It means that when someone is clearly communicating, “NO!”, we need to back off and reconsider what we’re doing and how we’re doing it.



# Non Forced Care Policy

- ▶ Evaluate how important that task is at that time.
- ▶ Is there another way of getting the task done?
- ▶ Always try to find the LEAST COERCIVE method possible
- ▶ Sometimes care just doesn't get done for a while.

# Evaluate the risks



# Risks of NOT Providing Care

- Skin breakdown
- Smell
- Loss of dignity
- Family dissatisfaction with care
- Decreased quality of life for other residents
- Infection control issues
- Discomfort for the person

# Risks of providing care when person communicates “NO”

- ▶ Loss of dignity
- ▶ Injury to person and/or care provider
- ▶ Family dissatisfaction with care
- ▶ Deteriorating job satisfaction for care provider
- ▶ Increased likelihood of psychotropic meds being used
- ▶ Emotional trauma - humiliation, fear, depression
- ▶ Deterioration of trust

# Evaluate the risks



# Staff concerns related to NOT providing care

- ▶ Team breakdown
- ▶ Job satisfaction
- ▶ Job security
- ▶ Legal ramifications

# Team Response

- ▶ DOCUMENT, DOCUMENT, DOCUMENT!
- ▶ Education to families
- ▶ Brainstorming session with team and family



# Real life examples....





# DISCUSSION.....

- ▶ Thoughts?
- ▶ Comments?
- ▶ Agree or disagree?
- ▶ Does the PCH that you work in have a policy related to this?
- ▶ Do you think there should be a policy?

