

Appropriate Management in Care of Elderly with Dementia

Technology System Improvements (Throughput)

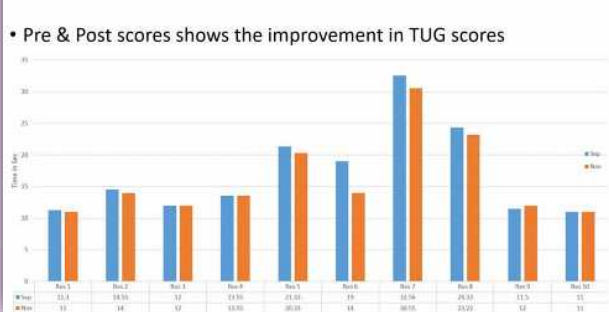
Holistic Assessment	Person-Centered Care	Meaningful Engagement	Environmental Modification	Professional Development
FAST Staging	Biopsychosocial Care	Rehab Programmes	Safety and Security	Quality Assurance
MBI-ADL	Family Support	Social Interaction	Dignity and Privacy	Continued Competence
BBS/TUG - Physical Function	Community Support	Community Engagement	Dementia Friendly (Therapeutic, Sensory Load)	Multi-Disciplinary Approach
Behavioural Support	MSW Support	Reminiscence	Home Away from Home	Case Conference
Care Planning & Review	Medical Support	Multi-Sensory Environment	Technological Enhancements	Collaborative Alliances with external stakeholders
Social Wellness	Spiritual Support			
	Palliative Support			

Summary

In order to be at the forefront of providing eldercare services, THKNH believes in providing person-centred and evidence-based care for our elderly clients. With more than 110 beds dedicated to serving dementia patients in 2 of our wards, and with many general elderly patients also being diagnosed with dementia, it is key for our care framework to be well-informed by interactions of various dimensions of dementia.

Dependent on the dimensions of dementia stages, cognitive decline and behavioural states, as the stage advances, stress thresholds of our elderly clients decline and normative behaviours will be greatly reduced progressively while anxious and dysfunctional behaviours begin to increase. There are many internal and external factors that may contribute to stress in elderlies with dementia. Therefore, the organisation has built a care framework guided by the Progressively Lowered Stress Threshold model (PLST). This care framework will guide our strategy geared towards eliminating the key issues of isolation, boredom, loneliness and despair, commonly faced by the elderly in their sunset years. With a focus on the 5 identified key areas, supported by empirical evidence, the care team can then plan interventions accordingly to achieve the necessary patient, caregiver, as well as institutional outcomes.

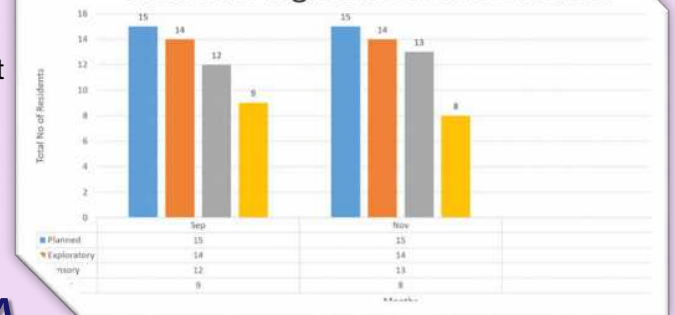
TUG scores for ward 3 Residents



Findings:

- 50 resident were targeted
- Weekly two sessions given, every session last for 30 – 45 min
- The scores with Pre and post test shows the residents status is maintained in terms of BADL, Cognitive function, Social and leisure activities.

Resident Progression in PAL Checklist



TRAITS OF DEMENTIA

DIFFICULTY DOING FAMILIAR TASKS	PROBLEMS COMMUNICATING	POOR OR DECREASED JUDGMENT	FORGETFULNESS THAT AFFECTS DAY-TO-DAY FUNCTION	CHANGES IN MOOD OR BEHAVIOUR	DIFFICULTY PLANNING OR SOLVING PROBLEMS	CONFUSION OF TIME AND PLACE	CHANGES IN PERSONALITY	MISPLACING THINGS	WITHDRAWAL FROM WORK OR SOCIAL ACTIVITIES
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Studies have shown that, engagement in social activities may reduce the risk of dementia due to mental and intellectual stimulation. Involvement in mental and intellectual activities may accelerate or preserve the brain reserve, especially in late life. Second, a high level of Social engagement (SE) may improve immune system functions, which may delay the progression of dementia by affecting the cortical and limbic structure functions. Third, a high level of SE could delay cognitive decline through effects on the cognitive status and positive emotional factors, such as social competence and self-esteem.

