

Unit Title:	Understand the role of communication and interactions with individuals who have dementia
Unit sector reference:	DEM 308
Level:	3
Credit value:	3
Guided learning hours:	26
Unit expiry date:	31/03/2015
Unit accreditation number:	L/601/3539

Unit purpose and aim

This unit provides the underpinning knowledge required to develop therapeutic relationships with individuals with dementia based on positive interaction and communication. It does not assess competence.

Learning Outcomes The learner will:	Assessment Criteria The learner can:	Exemplification
1 Understand that individuals with dementia may communicate in different ways	<p>1.1 Explain how individuals with dementia may communicate through their behaviour</p> <p>1.2 Give examples of how carers and others may misinterpret communication</p>	<p>Communicating through:</p> <ul style="list-style-type: none"> • positive or negative behaviour • use of gestures • use of inappropriate verbal response • inability to speak • becoming withdrawn • tactile approach • non-verbal language • sign language <p>Others may be:</p> <ul style="list-style-type: none"> • Care worker • Colleagues • Managers • Social worker • Occupational Therapist • GP • Speech and Language Therapist • Physiotherapist • Pharmacist • Nurse • Specialist nurse • Psychologist

Learning Outcomes The learner will:	Assessment Criteria The learner can:	Exemplification
	<p>1.3 Explain the importance of effective communication to an individual with dementia</p> <p>1.4 Describe how different forms of dementia may affect the way an individual communicates</p>	<ul style="list-style-type: none"> • Psychiatrist • Independent Mental Capacity Advocate • Independent Mental Health Advocate • Advocate • Dementia care advisor • Support groups <p>Carers eg</p> <ul style="list-style-type: none"> • Partner • Family • Friends • Neighbours <p>Misinterpreting communication:</p> <ul style="list-style-type: none"> • as being abusive • individual having a mental illness • individual being affected by drug or alcohol abuse • individual having learning difficulties • missing underlying needs • being deliberately unco-operative <p>Importance of effective communication:</p> <ul style="list-style-type: none"> • increased engagement for both parties • boosting self esteem • feeling more valued • being less isolated • social inclusion • calmness • an enjoyable process for the individual and the care worker • care workers feel more motivated • individuals feel more 'listened to' <p>Different forms of dementia for example:</p> <ul style="list-style-type: none"> • vascular disease • Alzheimer's disease

Learning Outcomes The learner will:	Assessment Criteria The learner can:	Exemplification
		<ul style="list-style-type: none"> • dementia with Lewy bodies • Parkinson’s disease • multiple sclerosis • fronto-temporal dementia • Huntington’s disease • HIV and Aids • motor neurone disease <p>Effects</p> <ul style="list-style-type: none"> • slurred speech • word substitution • loss of language skills • use of inappropriate language • reduced communication • inability to express oneself • reduced understanding • frustration • repetition
2 Understand the importance of positive interactions with individuals with dementia	2.1 Give examples of positive interactions with individuals who have dementia 2.2 Explain how positive interactions with individuals who have dementia can contribute to their wellbeing	<p>Examples of positive interactions:</p> <ul style="list-style-type: none"> • perceiving and integrating information • recalling enjoyable experiences eg family outing • celebrating important memories or events • appreciating underlying emotions and feelings • reminiscence therapy • use of gestures • using sign language • through memory books • pictorial approach <p>Positive interactions contribute by:</p> <ul style="list-style-type: none"> • giving a sense of hope • giving improved confidence • improving self esteem • improved physical, intellectual, emotional and social health • enabling social inclusion

Learning Outcomes The learner will:	Assessment Criteria The learner can:	Exemplification
	<p>2.3 Explain the importance of involving individuals with dementia in a range of activities</p> <p>2.4 Compare a reality orientation approach to interactions with a validation approach</p>	<ul style="list-style-type: none"> • enabling engagement • increasing self respect <p>Importance of a range of activities:</p> <ul style="list-style-type: none"> • embracing empowerment • increasing an individual's ability to make decisions • enables an individual to take control over their lives • reduces risks • helps an individual to solve problems • enables an individual to make choices • helps an individual to be socially engaged <p>Activities:</p> <ul style="list-style-type: none"> • music • exercise • art & craft • collage • scrapbook • gardening • daily living tasks • exchanging ideas <p>Reality Orientation This approach tries to place the individual in the here and now, reminding them of the day, place, time and situation they are in</p> <p>Validation Approach Using non-judgmental acceptance and empathy to show the individual that their expressed feelings are valid. Focussing on the feelings rather than the content of speech</p> <p>Compare in terms of:</p> <ul style="list-style-type: none"> • when appropriate to use • ease of use

Learning Outcomes The learner will:	Assessment Criteria The learner can:	Exemplification
		<ul style="list-style-type: none"> • timescales • benefits to the individual • benefits to care workers • skills required • how the individual is engaged
<p>3 Understand the factors which can affect interactions and communication of individuals with dementia</p>	<p>3.1 List the physical and mental health needs that may need to be considered when communicating with an individual with dementia</p> <p>3.2 Describe how the sensory impairment of an individual with dementia may affect their communication skills</p> <p>3.3 Describe how the environment might affect an individual with dementia</p>	<p>Needs to be considered:</p> <ul style="list-style-type: none"> • inability to recall information • memory loss • requires clear information • use of large print/images • awareness of hearing impairment • use appropriate communication methods • speak in short sentences • allow time for response • do not be afraid of silence • to be able to communicate non-verbally • recognise cultural needs • recognise lack of motor control <p>Sensory impairment:</p> <ul style="list-style-type: none"> • may need image/print enlarged • may misunderstand • may be confused • may be disorientated • may withdraw • may feel isolated • may need specialist equipment eg braille <p>Environment:</p> <ul style="list-style-type: none"> • physical - resources, décor, layout, background noise • people - carers, other residents, health care professionals • environmental - culture, routines and practice

Learning Outcomes The learner will:	Assessment Criteria The learner can:	Exemplification
	<p>3.4 Describe how the behaviour of carers or others might affect an individual with dementia</p> <p>3.5 Explain how the use of language can hinder positive interactions and communication</p>	<p>Examples:</p> <ul style="list-style-type: none"> • lack of space could cause • challenging behaviour • lack of attachment could cause withdrawal • loss of identity could cause a feeling of exclusion • change of familiar environment may cause confusion <p>Behaviour of carers or others:</p> <ul style="list-style-type: none"> • ignoring the individual • responding too quickly • lack of empathy • socially excluding the individual • using abusive language • making assumptions on behalf of the individual <p>Language that can hinder :</p> <ul style="list-style-type: none"> • speaking too fast • inappropriate tone of voice • using technical terminology inappropriately • not communicating in the individual's preferred language • patronising the individual • verbally abusing an individual

Assessment

This unit needs to be assessed in line with the Skills for Care and Development QCF Assessment principles.

Candidates will have to produce a portfolio of evidence that meets the requirements of the learning outcomes and assessment criteria in full, taking account of the additional knowledge understanding and skills specified in the unit content.

The evidence can either be drawn from naturally occurring work based activities or alternatively centres can devise tasks/assignments or projects for candidates to complete to generate appropriate evidence. Any centre devised tasks/assignments or projects need to be cross-

referenced to the appropriate learning outcomes and assessment criteria to ensure that full coverage can be achieved.

Further guidance on the assessment and evidence requirements and the delivery of the teaching of the content of this unit will be available as part of this unit specification.

Evidence requirements

Evidence could be presented using the following methods:

- through employment, for example, through witness statements
- by means of case studies, based on workplace experience or fictitious
- as a written 'Guide' to help care workers, both professional and informal, who care for individuals who have dementia
- by giving a powerpoint presentation with speaker's notes to formal and informal care workers
- through producing leaflets or handouts to provide information to care workers
- through oral discussion in the workplace or in a learning environment with supporting evidence, for example the questions asked and an outline of the answer or taped evidence
- as posters, where appropriate, providing the depth of the command word in the Assessment Criterion has been met.
- role plays in the learning environment or the workplace which are supported by witness statements
- essay writing with evidence being based on theoretical knowledge and practical experience

This list is not exhaustive but the depth of the command words within the Assessment Criteria must be met.

For their evidence candidates must:

- explain how individuals with dementia may communicate through their behaviour
- give **four** examples of how carers and others may misinterpret communication
- explain the importance of effective communication to an individual with dementia
- describe how different forms of dementia may affect the way an individual communicates
- give **four** examples of positive interactions with individuals who have dementia
- explain how positive interactions with individuals who have dementia can contribute to their wellbeing
- explain the importance of involving individuals with dementia in a range of activities
- compare a 'reality orientation' approach to interactions with a 'validation approach'
- list **two** physical and **two** mental health needs that may need to be considered when communicating with an individual with dementia
- describe how the sensory impairment of an individual with dementia may affect their communication skills
- describe how the environment might affect an individual with dementia
- describe how the behaviour of carers or others might affect an individual with dementia
- explain how the use of language can hinder positive interactions and communication

Guidance on assessment and evidence requirements

This section provides guidance for tutors on the types of assessment activities that can be used and evidence to be produced that will ensure coverage of the learning outcomes and related assessment criteria.

Portfolios of work must be produced independently and centres must confirm to OCR that the evidence is the original work of the candidate. Recording documents are provided on the website for this purpose.

Wherever possible, candidates should be encouraged to put the theoretical knowledge into practice through real work or role play. Where role play is used this should reflect working practices in health and social care sector.

Examples of possible sources of evidence/activities/tasks/assignments are shown below but these are not exhaustive nor are the examples shown mandatory. These could include:

A Produce a Manual

You have been asked to prepare a Manual for care workers that can be used to help them understand the role of communication and interactions with individuals who have dementia. Within the first section of the Manual you should include information to:

- explain how individuals with dementia may communicate through their behaviour
- give **four** examples of how carers and others may misinterpret communication
- explain the importance of effective communication to an individual with dementia
- describe how different forms of dementia may affect the way an individual communicates
- give **four** examples of positive interactions with individuals who have dementia
- explain how positive interactions with individuals who have dementia can contribute to their wellbeing
- explain the importance of involving individuals with dementia in a range of activities
- compare a 'reality orientation' approach to interactions with a 'validation approach'
- list **two** physical and **two** mental health needs that may need to be considered when communicating with an individual with dementia

For the second section of the Manual you should illustrate the points made by giving **two** case studies to show how sensory impairment, the environment, the behaviour of others and use of language could hinder positive communication and interactions with individuals who have dementia. Make sure within the case studies you:

- describe how the sensory impairment of an individual with dementia may affect their communication skills
- describe how the environment might affect an individual with dementia
- describe how the behaviour of carers or others might affect an individual with dementia
- explain how the use of language can hinder positive interactions and communication.

Remember to meet the 'Evidence Requirements' particularly in relation to the command words eg describe, explain.

OR

B Produce a Display

You have been asked to produce a display and materials that can be given out to those interested at a Health Fair where Dementia Care is one subject that will have a display area. For the display you can produce:

Posters, leaflets and handouts for LO1 which:

- give an explanation of how individuals with dementia may communicate through their behaviour
- give **four** examples of how carers and others may misinterpret communication
- explain the importance of effective communication to an individual with dementia
- describe how different forms of dementia may affect the way an individual communicates.
- give **four** examples of positive interactions with individuals who have dementia

A presentation for LO2 with speaker's notes which:

- explains how positive interactions with individuals who have dementia can contribute to their wellbeing
- explains the importance of involving individuals with dementia in a range of activities
- compares a 'reality orientation' approach to interactions with a 'validation approach'

Two case studies for LO3 to illustrate:

- **two** physical and **two** mental health needs that may need to be considered when communicating with an individual with dementia
- how sensory impairment of an individual with dementia may affect their communication skills
- how the environment might affect an individual with dementia
- how the behaviour of carers or others might affect an individual with dementia
- how the use of language can hinder positive interactions and communication.

Remember to meet the 'Evidence Requirements' particularly in relation to the command words eg describe, explain.

OR

C Write a Magazine Article

Write an article for a magazine that specialises in the care of individuals with dementia. The article must be interesting but should cover all the requirements of the '**Evidence Requirements**', **particularly in relation to the command words, eg describe, explain.**

Guidance on delivery

OCR does not stipulate the mode of delivery for the teaching of the content of this unit. Centres are free to deliver this unit using any mode of delivery that meets the needs of their candidates. Centres should consider the candidates' complete learning experience when designing learning programmes.

It is anticipated that there will be some formal teaching and input to develop fully the knowledge and understanding identified in the specification.

For LO1 it would be helpful if the candidates could watch the film *Iris* (2001) starring Judy Dench and Jim Broadbent. Before the film is shown discuss:

- how do you feel that individuals with dementia may communicate through behaviour?
- give some examples of how carers and others may misinterpret communication
- what do you think is important about effective communication to individuals with dementia?

Ask the candidates to make notes during the film about:

- methods of communication used
- were messages understood?
- how did dementia affect the two main characters in the film?

After the film discuss the notes made and:

‘What do we learn of the impact that dementia can have on the ability to communicate?’

Candidates could then be asked to carry out individual research using books, work experience or the internet to find out how different forms of dementia may affect the way an individual communicates.

The research could then be shared with the whole group before embarking on the individual evidence generation.

When considering LO2 the candidates could work in pairs to consider, ‘*X’s (Mary’s) journey through dementia through positive interactions*’. Before starting on this exercise a whole group discussion could be held based on thinking about “*Who do you know or for whom have you cared who has dementia*”?

Sharing information about personal experience of caring for someone with dementia, focusing mainly on communication and positive interactions, would be helpful.

In pairs, make sure at least one person in each pair has had some experience of a form of dementia. The candidates could be asked to adopt a fictitious name for their individual and to consider their journey through dementia in relation to communication. For example:

- to identify some positive interactions the individual had
- why were they positive?
- how did the positive interactions contribute to wellbeing of the individual?
- what activities did the individual participate in or could they participate in to encourage positive communication?
- why is it important to involve individuals with dementia in a range of activities?

When the ‘journeys’ have been completed a whole group sharing of the different journeys could take place with discussion.

Candidates could then be asked to carry out individual research to find out what is involved with:

- reality orientation approach
- validation approach

They could also be asked to create two short case studies to show how each method could be applied. This could be shared on completion as a whole group.

Tutors/Assessors may find it beneficial to introduce the candidates to some theoretical perspectives of communication. This could involve an overview of Kolbs (1984) perspective and Kitwoods and Bredin's theory (1992), the later considering what is vital to maintaining wellbeing.

This theoretic input could be followed for LO3 by asking candidates to look through the Alzheimer's Society's, ' Living with Dementia' on-line magazine. This can be located at www.alzheimers.org.uk/sire/scripts/documents.php?categoryID=200241.

This could lead to, 'A day in the life of...'. Candidates could work in pairs to produce short scenarios for an individual who has:

- sensory impairment
- hearing impairment
- physical disability, eg lack of co-ordination or co-ordination control
- language difficulties, eg being from a different culture, having a learning disability or having lack of understanding of words

Having built the short scenarios, candidates could provide solutions to show:

- how positive interactions could be built into a typical day
- how these would be of benefit to the individual
- how the behaviour of carers and others could influence individuals with dementia

Alternatively, invite a guest speaker to the centre to discuss with the candidates how a person who has dementia and has either a sensory impairment or a physical disability or a language problem could be helped with their communication. The speaker will need to be directed to all five topics that need to be covered within the assessment criteria. Candidates need to be prepared prior to the visit by drawing up possible questions to ask, making sure that these are relevant and sensitive.

Following the talk by the guest speaker or the observation, a whole group discussion could involve a sharing of the results with the focus of the discussion being 'why do you think this method is successful'? And 'what are the effects on the individual likely to be if they have had a positive interaction'?

National occupational standards (NOS) mapping/signposting

This unit has been developed by Skills for Care and Development in Partnership with Awarding Organisations. It provides a key progression route between education and employment (or further study/training leading to employment). It is directly relevant to the needs of employers and relates to national occupational standards developed by Skills for Care and Development.

As such, the unit may provide evidence for the following national occupational standards in the children and young people's workforce developed by Skills for Care and Development:

HSC 21, 31, 41, 24, 35, 45

NOS can viewed on the relevant Sector Skills Council's website or the Occupational standards directory at www.ukstandards.co.uk.

Functional skills signposting

This section indicates where candidates may have an opportunity to develop their functional skills.

Functional skills standards can be viewed at <http://www.qcda.gov.uk/15565.aspx>

Functional Skills Standards					
English		Mathematics		ICT	
Speaking and Listening		Representing		Use ICT systems	✓
Reading	✓	Analysing		Find and select information	✓
Writing	✓	Interpreting		Develop, present and communicate information	✓

Resources

Books

Dementia Care Training Manual for Staff Working in Nursing and Residential Settings; Danny Walsh; Jessica Kingsley Publishers (2006)

Dementia Reconsidered; T Kitwood: Open University (1997)

Enriched Care: Planning for people with Dementia; Hazel May, Paul Edwards and Dawn Brooker; Jessica Kingsley Publishers (2009)

Ethical Issues in Dementia Care: Making Difficult Decisions; Julian C Hughs and Clive Baldwin; Jessica Kingsley Publishers (2009)

Experiential Learning Experience as the Source of learning and Development; D Kolb; Prentice Hall (1984)

Person-person: A Guide to the Care of those with Failing Mental Powers; T Kitwood and K bredin; Loughton (1992)

The dementia care workbook; Gary Morris and Jack Morris; Open University Press (2010)

Dementia Reconsidered: The Person Comes First; T Kitwood; Open University Press;(1997)

NVQs in Nursing and Residential Homes; Linda Nazarko; Blackwell Publishing; (1996)

Care and the Registered Managers Award: NVQ Level 4; Christina Toft; Hodder and Stoughton; (2003)

Websites

www.ageuk.org.uk

www.age-exchange.org.uk

www.bradford.ac.uk

www.alz.co.uk/carers/yourself.html

www.bbc.co.uk

www.bbc.co.uk/health/physical_health/conditions/dementia1.shtml

www.dementiacafe.com/news.php

www.atdementia.org.uk/

www.dasinternational.org

Organisations

Alzheimer's Society

Devon House

58 St Katharine's Way

London E1W 1LB

E mail: enquiries@alzheimers.org.uk

Mind (National Association for Mental Health)

PO Box 277

Manchester

M60 3XN

Carers UK

20 Great Dover Street

London

SE1 4LX

Email: info@carers.org.uk

Additional information

For further information regarding administration for this qualification, please refer to the OCR document '*Administrative Guide for Vocational Qualifications*' (A850).

This unit is a shared unit. It is located within the subject/sector classification system 01.3 Health and Social Care.