Information About Dementia Care for Families

Veterans’ Memorial Building
Information About Dementia Care for Families

As your loved one goes through the stages of dementia, you may have questions and concerns. This pamphlet gives information to help you support your loved one.

Veteran-driven care
The health care team designs a care plan to meet the specific needs of each veteran. We are educated in dementia care and want families to ask questions. We offer dementia education for families who want to learn more about the disease. Please ask the charge nurse for details.

Please use the space below to write down your questions for the health care team.

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What is the difference between dementia and Alzheimer’s disease?

Dementia is a progressive (gets worse over time) loss of memory and ability to do daily activities. There are many types of dementia. Alzheimer’s is the most common type of dementia.

**Signs of dementia** may include short-term memory problems, trouble finding words, and changes in ability to care for oneself.

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**It is important to enjoy the good days.**

Try not to be discouraged when things are not going well.

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What should I expect when my family member is admitted to the Veterans’ Memorial Building (VMB)?

**Comfort clothing**

As the disease progresses, dressing and undressing can become uncomfortable, distressing, and even painful. Adaptive clothing options allow the veteran to be comfortable, while keeping their dignity.

Examples of comfort clothing include: track pants, shirts or sweaters that open in the back, and Velcro® blankets. If and when the need arises for comfort clothing, we will talk about this with you.
Wandering

For safety, veterans with dementia need to have someone with them when they are not in the unit. Care plans are used to ensure each veteran’s safety and make sure that their needs are met.

Our goal is to support each veteran in moving about safely, while preventing them from getting lost. One of our safety measures is to use a RoamAlert® bracelet.

A RoamAlert® bracelet is a small bracelet that looks like a hospital wristband. It is worn on the veteran’s wrist. Wearing a bracelet doesn’t mean that the veteran can never leave the unit. If you want to take your family member off the unit, simply enter the code on the elevator keypad.

Please tell us before taking your family member off the unit. Do not enter a code for a veteran who is not your family member unless you check with us first.

Personal care routines

Care is based on each veteran’s needs and likes. These can be different from day to day. For example, if a veteran does not wish to be bathed in the morning, we will try again later in the day. Rigid care routines can cause distress (upset) for a person with dementia. If you think that your family member has not received the care they need, please talk with the nurse.
Keeping personal items safe

You may notice that some veterans’ closets are locked on some units. This is to help prevent rummaging or hoarding. It is also to make sure that the veterans’ belongings are as safe as possible. A key for the closet may be given to the veteran and/or their family.

The veteran’s personal things should be labelled. This helps us return items to their owner. You may be asked to label electric razors, eyeglasses, hearing aids, dentures, and more.

Some veterans wander into other rooms and collect items. This can cause conflict between veterans. A fabric gate or Dutch door (half door) is sometimes used to redirect wandering into safer areas. The veteran who lives in the room can still enter and leave.

Why do I see changes in my family member’s abilities from day to day?

Dementia affects each person differently. The order in which symptoms appear and the length of each stage varies from person to person. In most cases, the disease progresses slowly. The symptoms of each stage may overlap. This can make the move from one stage to another quite subtle. Any sudden change in behaviour needs to be checked to rule out medical causes (such as infections or pain).

Please talk about changes you notice with any health care team member.
What do I do when my family member doesn’t know who I am?

There is no one answer, as each veteran is different. It is common for people with dementia to have trouble recognizing faces and names. You will learn what works best for your family member. It may help to introduce yourself or use pictures to help trigger their memory. Try to be patient and stay positive. Remember that they may forget your name or who you are, but they will always remember how you made them feel.

Why is my family member aggressive or inappropriate? Why are there personality changes?

As dementia progresses, there are often changes in personality or behaviour. Ask the nurse for information about the stages of dementia. It is important to support your loved one as they move through the stages.

Should I be concerned because my family member has lost interest in food?

As dementia progresses, the skills needed for eating get weak. Sometimes your family member does not remember if they have eaten. As a person gets older, their sense of taste and smell decreases, so food may not be as tempting. We try to do things to help the person eat more, such as offering finger foods.
Should I be concerned because my family member seems to be sleeping more?

Changes in sleep patterns are common. As a person gets older, they tend to sleep in short naps. People with dementia are often awake at night. As the disease progresses and the person needs more help with meals and physical care, they may get tired more easily. You may see a gradual increase in the amount of time that they spend resting.

Increased sleepiness that happens suddenly may be caused by illness or be a side effect of a medicine. If you are concerned that there has been a sudden change in sleep patterns, please talk with the health care team.

Will my family member have to move to another unit because of their behaviour?

Our goal is to continue to care for veterans on the unit where they were admitted. As dementia progresses, you may see behaviours that are out of character for your family member. Veterans are not usually moved because of their behaviour. It is possible that a veteran will be moved to make sure they are comfortable and safe.
What do I say when my family member asks to go home?
This is a common request made by veterans to family members and staff. It can be hard for family members to hear this when they come to visit. You may feel guilty for having agreed that your family member be admitted to long-term care. Often it is not the physical home that they want to return to, but rather a time in their past when everything was familiar. Ask your nurse for the handout called I Want to Go Home.

What are your questions? Please ask. We are here to help you.

Looking for more health information?
Find this pamphlet and all our patient resources here: http://library.nshealth.ca/PatientGuides
Contact your local public library for books, videos, magazines, and other resources.
For more information, go to http://library.novascotia.ca
Connect with a registered nurse in Nova Scotia any time: call 811 or visit https://811.novascotia.ca
Learn about other programs and services in your community: call 211 or visit http://ns.211.ca

Nova Scotia Health Authority promotes a smoke-free, vape-free, and scent-free environment. Please do not use perfumed products. Thank you!
Nova Scotia Health Authority
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The information in this pamphlet is to be updated every 3 years or as needed.