

Knowledge **BITE**

PSYCHOGERIATRIC NEWS AND INFORMATION FOR PRIMARY CARE PRACTITIONERS



Editor's remarks: This is the 16th issue of the PRC-PC Newsletter, providing quick tips and useful information to fit your fast-paced work environment and to help you in the care of patients with dementia. This month we celebrate Thanksgiving and it is a great opportunity to cherish giving. In my opinion, there is no greater gift than the gift of caregiving and especially when caregiving for people with dementia. Dementia is often characterized by lack of insight into one's condition and so it is often the CG who becomes our partner in care. Family CGs are often referred to in the literature as the 'shadow' workers which greatly speaks to their invisibility as a population who provides and is also in need of care. CGs play a vital role in ensuring the health, safety, and quality of life of a patient with dementia. However, there is strong evidence that caregiving comes with risks of declining health and wellbeing for the CGs themselves. It can be challenging for practitioners to balance the needs of both members of the dyad. This month and on...let's give back to CGs and make an effort to let them feel seen and appreciated. (Einat Danieli – OT.Reg. Ont; PRC-PC). A special thank you to Dr. Rhonda Feldman Ph.D.C.Psych for her input on this topic.

"I-SEE-U" is a new framework that guides practitioners on how to systematically identify elements of risk for distress in a caregiver and recognize the appropriate resources to meet those needs. It is an innovative collaboration between the PRC-PC of the TC-LHIN and the High Risk Caregiver Program at the Reitman Centre. I-SEE-U stands for Include; Screen & identify; Educate; Extra help; Understand. For more information on the [I-SEE-U](#) workshop contact your [PRC-PC](#) (see contact info below).

GOOD TO KNOW ABOUT

Group interventions for caregivers (CG):

Alzheimer's society Toronto offers [CG support groups](#) in different languages across the city as well as [online courses](#)

The Reitman Centre CARERS program at Mount Sinai Hospital offers a skills-based training program for CGs including practice through simulation. Now available in multiple locations: [Wellness Centre](#) (Chinese); [Holy Blossom](#); [West Neighborhood House](#) (Portuguese); [SPRINT](#)

UHN offers an Arts based caregiver group (Chinese)

Baycrest – Caring for the Caregiver [Program](#)

For the full list of support groups follow this [link](#)

For more caregiver resources follow this [link](#)

OUR DEMENTIA 'TOOLBOX'

For resources on caregivers and how to manage caregiving related stress in the community visit this [link](#)

WORKSHOPS, CONFERENCES AND ARTICLES OF INTEREST:

- [Refining Dementia intervention: The Caregiver-Patient Dyad As the Unit of Care/Sadavoy J., Wesson V., 2012 - Link](#)
- [Dementia Services Mini Screen: How to Identify Patients and Caregivers in need of Enhanced Dementia Services/Borson S., et al., 2014 - Link](#)
- [Family Caregivers: A Shadow Workforce in the Geriatric Health Care System/Bookman A., Harrington M., 2005 - Link](#)
- Brain Exchange - [Depression in Dementia: Challenges in Diagnosis and Management](#) Wednesday October 14h, 2015 12:00 PM (Eastern) [Link](#)
- [Elder Abuse Conference](#) – Nov. 3-4, 2015 - [Link](#)

STORIES FROM THE PRC-PC CONSULT SERVICE

Situation: A patient's daughter repeatedly contacts the family physician and other members of the care team with inappropriate requests and accusations of poor attention to her mother's condition.

Background: Patient is a widowed woman in her early 80's. She has lived with her 55 year-old daughter for 4 years after her daughter removed her from a nursing home with concerns about mistreatment. The patient has congestive heart failure, emphysema, and a history of falls. This is the third primary care team involved in the management of the patient's complex physical needs and declining cognitive concerns. The daughter has rejected all PSWs sent by the CCAC with complaints about poor knowledge of dementia-sensitive care.

Physician and nurse's main concern: How to avoid being overwhelmed by the daughter's excessive demands while still providing appropriate care to the patient and maintaining the relationship with the caregiver.

Knowledge To Practice Assessment: Using the I-SEE-U framework consider the following:

I- Include - Consider including the daughter in planning the sessions and setting goals and expectations routinely for each visit. Think of aspects of the care that the daughter is able/willing to take on so she feels included in her mother's care

S- Screen and Identify – Ask the daughter about the meaning of her relationship with her mother and her role as a caregiver. Assess for level of stress and barriers to self-care. Identify any gaps in her knowledge of dementia and the patient's prognosis that may contribute to inappropriate expectations or add to her challenges in managing her mother's care.

E-Educate regarding the team's roles and responsibilities as well as any gaps in knowledge identified in the 'Screen' phase.

E- Extra help – Explore with the daughter other care options that she might be interested in, including caregiver focused services. Explain the benefits versus limitations of each service.

U- Understand – Acknowledge how dedicated the daughter is to her mother's care and how it is important for her to advocate for her mother to receive the best care possible. Express empathy for her disappointment and the fact that the system is not optimal and may not live up to her desired standards. Engage her in coming up with solutions and an acceptable plan despite limitations. Consider creating a contract outlining the daughter's and the team's responsibilities.

For additional information, support, resources or case-based consultation, please contact your PRC-PC directly at: 416-586-4800 ext. 5251 or edanieli@mtsina.on.ca or visit our website at www.mountsinai.ca/reitman/prc-pc