

Unit 33: Understand the Process and Experience of Dementia

Unit code:	DEM 301
Unit reference number:	J/601/3538
QCF level:	3
Credit value:	3
Guided learning hours:	22

Unit summary

This unit provides the knowledge of the neurology of dementia to support the understanding of how individuals may experience dementia.

Assessment requirements

This unit must be assessed in accordance with Skills for Care and Development's QCF Assessment Principles.

Assessment methodology

Learners can enter the types of evidence they are presenting for assessment and the submission date against each assessment criterion. Alternatively, centre documentation should be used to record this information.

Content

1 Understand the neurology of dementia

Causes of dementia syndrome: Alzheimer's disease; vascular dementia; Pick's disease; dementia with Lewy bodies (Fronto-Temporal); Creutzfeldt-Jakob Disease (CJD); Huntington's disease

Types of memory impairment commonly experienced by individuals with dementia: decline in memory, reasoning and communication; changes in behaviour; loss of skills; abilities which fluctuate; movement difficulties

The way that individuals process information with reference to the abilities and limitations of individuals with dementia: information processing – sensory input of sight, sound, attention; short-term memory; long-term memory; effects of different types of dementia on this process

How other factors can cause changes in an individual's condition that may not be attributable to dementia: the difference between dementia, depression and confusional states; sensory changes due to age-related degeneration eg macular degeneration and cataracts affecting vision, loss of hearing and increase of tinnitus affecting balance; reduced metabolism causing poor appetite; osteoporosis and fear of falling

Why the abilities and needs of an individual with dementia may fluctuate: changes to the physical environment eg moving home, starting at a day centre; changes to the social environment eg changes in carers, loss of family or friends and social isolation, bereavement; changes to the emotional environment eg carers become stressed, experience of abuse; personal changes – changes in treatment, changes in medication, and changes in physical condition eg bacteria or viral infections, vascular changes, rapidity of onset of dementia

2 Understand the impact of recognition and diagnosis of dementia

The impact of early diagnosis and follow-up to diagnosis: quality of life, eg fear, feeling of lack of control, loss of dignity, loss of identity, lack of involvement, invasion of privacy, fear of losing own home, inability to communicate needs and preferences; social eg loss of friends, loss of community involvement, difficulty in dealing with own finances, attitudes of others; impact on health, eg increased risk of falls, nutrition, personal hygiene, reduced exercise; increased likelihood of abuse, eg emotional, neglect, physical, sexual, financial, increased likelihood of injury or harm

The importance of recording possible signs or symptoms of dementia in an individual in line with agreed ways of working: agreed ways of recording in own organisation; written or electronic recording is factual, legible, dated, signed or authenticated and confidential; importance of recording to highlight risk and establish if there is a pattern, an improvement or a worsening of symptoms

The process of reporting possible signs of dementia within agreed ways of working: agreed ways of reporting in own organisation such as verbal, written, electronic; accurate, timely, and confidential reporting

The possible impact of receiving a diagnosis of dementia on the individual: impact on individual includes fear, denial, need for information, need for sources of support eg emotional or financial support

The possible impact of receiving a diagnosis of dementia on the individual's family and friends: impact on family and friends such as fear, denial, need for information, need for sources of support eg emotional or financial support

3 Understand how dementia care must be underpinned by a person-centred approach

Person-centred approach: principles of care including dignity, respect, choice, independence, privacy, rights, culture; seeing the person first and the dementia second; focusing on strengths and ability; preferred or appropriate communication; acting in the best interests of the individual; person-to-person relationships; involving individual in care planning; taking account of history eg personal, family, medical

Non-person-centred approaches: institutional perspective; bio-medical perspective

Techniques to meet the fluctuating abilities and needs of the individual with dementia: reality-orientation approach; validation approach

Techniques using the physical environment to meet the fluctuating abilities and needs of the individual with dementia: use of assistive technologies eg pressure mats, door alarms linked to staff pagers, personal pendant alarms; an enabling and safe environment eg hand-rails, safe flooring, use of colour/textures, practical aids

Techniques using the social environment to meet the fluctuating abilities and needs of the individual with dementia: use of social environment to enable positive interactions with individuals with dementia; use of reminiscence techniques to facilitate a positive interaction with the individual with dementia; holistic approach, responsive and flexible approach; involving family and friends, individual's personal beliefs, focusing on strengths and abilities, effective communication; appropriate exercise, activities specific to the needs of the individual eg music sensory; alternative therapies eg aromatherapy, massage, sensory

Maintaining health and wellbeing: methods eg conventional medicines, safe handling of medicines, complementary medicines, diet and nutrition, fluid intake, personal care, measures to reduce risk of infection

Myths and stereotypes related to dementia that may affect the individual and their carers: stigma and its impact on relationships eg social isolation of individual and carer, assumption of automatic loss of independence eg unable to drive, unable to make decisions about own care; dissatisfying interactions with the medical community eg difficulty in obtaining early diagnosis; uncertainty about availability of support services and treatments; importance of person-centred values eg individuality, rights, choice, privacy, independence, dignity, respect, autonomy

Ways in which individuals and carers can be supported to overcome their fears: person-centred planning and reviews information about accessible and appropriate support services; emotional support such as individuals in early stage dementia involved in decision-making; involvement with support organisation eg Alzheimer's; training; safeguarding work; balance between protection and maintaining rights; service provision to include integrated working across private, statutory and third sector, eg hospitals, hospices, residential care, nursing homes, independent living, sheltered housing, day care, domiciliary care, GP, social services, pharmacists, end-of-life support, urgent care response, early intervention, psychiatric services, memory services, physiotherapists, occupational therapists, dieticians, other health and social-care workers, counsellors, dementia advisers, advocates

Learning outcomes and assessment criteria

Learning outcomes	Assessment criteria	Evidence type	Portfolio reference	Date
1 Understand the neurology of dementia	<p>1.1 Describe a range of causes of dementia syndrome</p> <p>1.2 Describe the types of memory impairment commonly experienced by individuals with dementia</p> <p>1.3 Explain the way that individuals process information with reference to the abilities and limitations of individuals with dementia</p> <p>1.4 Explain how other factors can cause changes in an individual's condition that may not be attributable to dementia</p> <p>1.5 Explain why the abilities and needs of an individual with dementia may fluctuate</p>			
2 Understand the impact of recognition and diagnosis of dementia	<p>2.1 Describe the impact of early diagnosis and follow-up to diagnosis</p> <p>2.2 Explain the importance of recording possible signs or symptoms of dementia in an individual in line with agreed ways of working</p> <p>2.3 Explain the process of reporting possible signs of dementia within agreed ways of working</p>			

Learning outcomes	Assessment criteria	Evidence type	Portfolio reference	Date
3	<p>Understand how dementia care must be underpinned by a person-centred approach</p> <p>2.4 Describe the possible impact of receiving a diagnosis of dementia on:</p> <ul style="list-style-type: none"> - the individual - their family and friends <p>3.1 Compare a person-centred and a non-person-centred approach to dementia care</p> <p>3.2 Describe a range of different techniques that can be used to meet the fluctuating abilities and needs of the individual with dementia</p> <p>3.3 Describe how myths and stereotypes related to dementia may affect the individual and their carers</p> <p>3.4 Describe ways in which individuals and carers can be supported to overcome their fears</p>			

Learner name: _____ Date: _____

Learner signature: _____ Date: _____

Assessor signature: _____ Date: _____

Internal verifier signature: _____ Date: _____
(if sampled)