
MEETING RESIDENTS WHERE THEY ARE TO ADDRESS DISTRESSED BEHAVIORS

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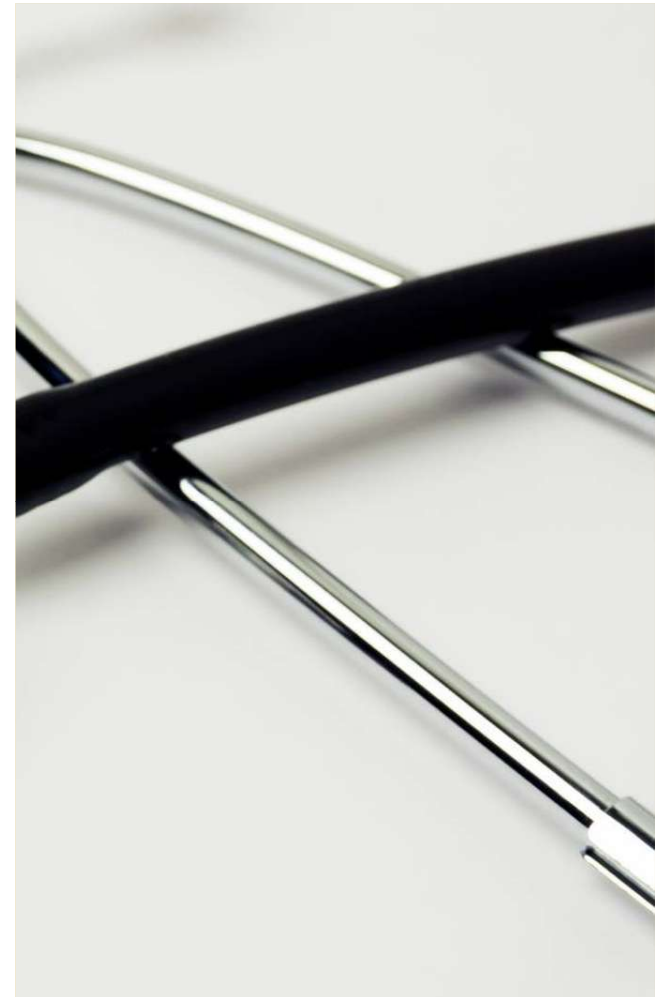
AGENDA

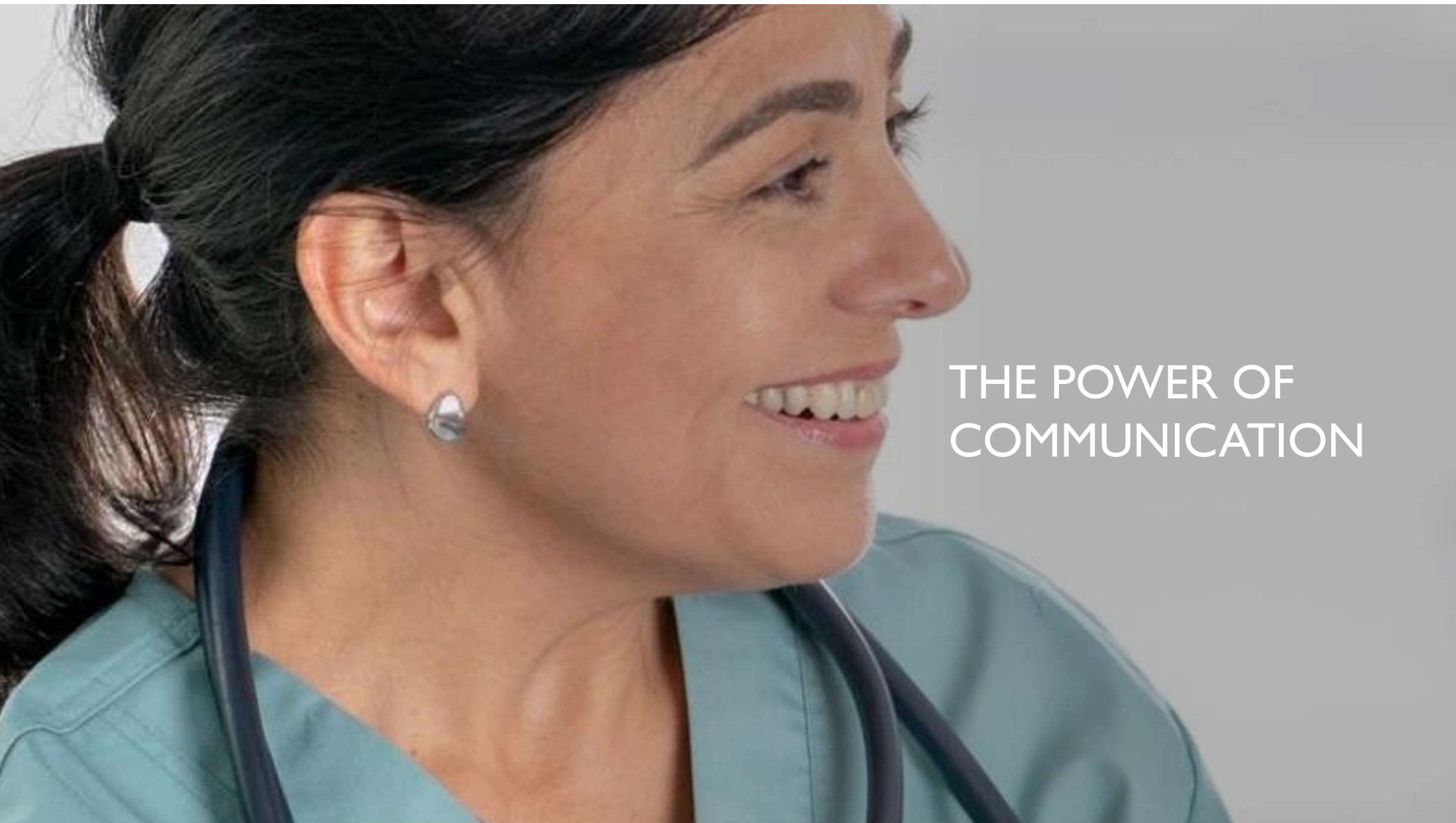
Acknowledgement and Disclosures

Case Study Example

Review 5 Steps of Management of
Behaviors Secondary to Dementia

Share Resources





THE POWER OF
COMMUNICATION



CASE STUDY

Care providers are challenged with caring for a 75 year old, male, with a service connection for Post Traumatic Stress Disorder, Veteran who is combative and aggressive behavior towards nursing home staff. Veteran has a diagnosis of major neurocognitive disorder, with behavioral disturbance and lacks medical decision-making capacity.



WATERFALL CHAT

What personal emotions come to mind after hearing this Case Study?

Overwhelmed
Hopeless Scared
Despair Helpless Fearful
Tense Mad Sad Tearful Anxious
Frustrated Caregiver Guilty
Tired Done Burden Lonely Uncertain
Isolation Angry Nervous Numb
Unconfident Threatened
Unskilled



BEHAVIOR

IS

COMMUNICATION



WATERFALL CHAT

What are the behaviors in this case
trying to communicate?



INVESTIGATIVE PROGRESSION

1. Step 1 – rule out reversible causes (labs & meds)
2. Step 2 – observation, focus, & exploration
3. Step 3 – bringing story together & develop initial care plan
4. Step 4 – implement care plan & interventions
5. Step 5 – assess results of care plan strategies

CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP I

Rule Out Reversible Causes (Labs and Meds)

Medications	Lab	Other Considerations
<p>Examples of High Risk Medications in Older Adults:</p> <ul style="list-style-type: none">• Benzodiazepines• Opioids• Highly-anticholinergic medication• Sleep medications• Muscle relaxants <p>Polypharmacy</p>	<ul style="list-style-type: none">• Vit B12• Vit D• UA	<ul style="list-style-type: none">• Significant life events (timing surrounding)• Environment

[American Geriatrics Society 2023 updated AGS Beers Criteria® for potentially inappropriate medication use in older adults 2023](#)



CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP 2

- Observation, focus, & exploration

CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP 2

Upon further investigation and observation, Veteran's physical aggression primarily occurred when staff attempted to address a physical care need, such as toileting and dressing. Veteran would become very distressed during these interactions and staff dreaded addressing these care needs because of the anticipated likelihood of aggression.

CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP 2

Challenging Behaviors	Target Behaviors	Function of Behaviors	Underlying Conditions
<ul style="list-style-type: none">Physical aggression and combativeness directed at staff while addressing physical care needs, such as toileting and dressing	<ul style="list-style-type: none">Decrease distressDecrease combativeness	<ul style="list-style-type: none">To communicate emotional or physical discomfort or distressTo communicate possible discomfort with perceived invasion of space, threat, or fearObserved behaviors are due to the suspected inability to understand what is being done or asked of him during a care task	<ul style="list-style-type: none">DementiaPTSDDepression



WATERFALL CHAT

Do you have residents that exhibit these types of distressed behaviors?



CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP 3

- Bringing Person-Centered Care planning together (All About Me)
& develop initial care plan

CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP 3

Room #	All About Me...		Name:
Name I like to go by: <u>My first name</u>		Military branch: <u>Army</u>	
Hometown: <u>OKC</u>		Job/Career: <u>Foreman</u>	
Favorites		Activities	<i>I would like you to know....</i>
Food: <u>Steak</u>		Things that I enjoy:	What matters to me most:
Beverage: <u>Coffee</u>		<input type="checkbox"/> Reading	<u>Independence</u>
Sports/teams: <u>Thunder</u>		<input type="checkbox"/> Watching TV	<u>Dignity</u>
Animal: <u>My dog</u>		<input checked="" type="checkbox"/> Being outside	<u>Privacy</u>
Music: <u>Jazz</u>		<input checked="" type="checkbox"/> Socializing with others	<u> </u>
Other: <u> </u>		<input checked="" type="checkbox"/> Playing games	<u> </u>
<u> </u>		Other: <u>Spending time with family</u>	<u> </u>
<u> </u>			<u> </u>
Accomplishments/Something I am proud of: <u>Owning my own house and raising my family</u>			

CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP 3

Interpersonal Activators	Environmental Activators	Psychological Activators
<ul style="list-style-type: none">• Concerns regarding loss of dignity and privacy during personal care• Loss of Independence	<ul style="list-style-type: none">• Too many people involved in care• Limited ways for him to be involved in his care• Lack of cuing outlining steps in care• Not using closed feedback loop communication to ensure that Veteran understands each step• Limited time to complete task	<ul style="list-style-type: none">• Fear, possible exaggerated startle response• Memory deficits



CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP 4

- Develop Behavioral Intervention plan
- Implement care plan & interventions

CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP 4

Interpersonal/Communication Strategies	Address physical need/discomfort
<ul style="list-style-type: none">• Calm voice• Simple one step directions, breaking each task down into basic steps• Connect the action to something that is important to him• Front line staff have identified that if the veteran has soiled clothing taking him into his room and identifying that it is time to do laundry and that his pants are dirty and need to be washed• Respect veteran's modesty during the activity: While VERBALIZING EACH STEP OF THE PROCESS OUTLOUD BEFORE ENACTING, clean the veteran without removing the sensation of wearing a brief and while he continues to wear pants. Clean front of veteran with brief still on, then move to the back, detach soiled brief from the sides and finish cleaning. Slide the new brief on in the same way the old brief was removed, with pants remaining on. The goal is to maintain the sensation of wearing pants/brief throughout the process.• Veteran needs repeated verbal reminders of task they are engaging in and for how he can participate in his own care secondary to his dementia diagnosis.• Offer choices when possible - e.g. Do you want to change in the bathroom or on the bed?	<ul style="list-style-type: none">• Consider use of paper scrubs to decrease effort during dressing• PRN medication (s) as prescribed

CASE STUDY: MANAGING DISTRESSED BEHAVIORS – STEP 5

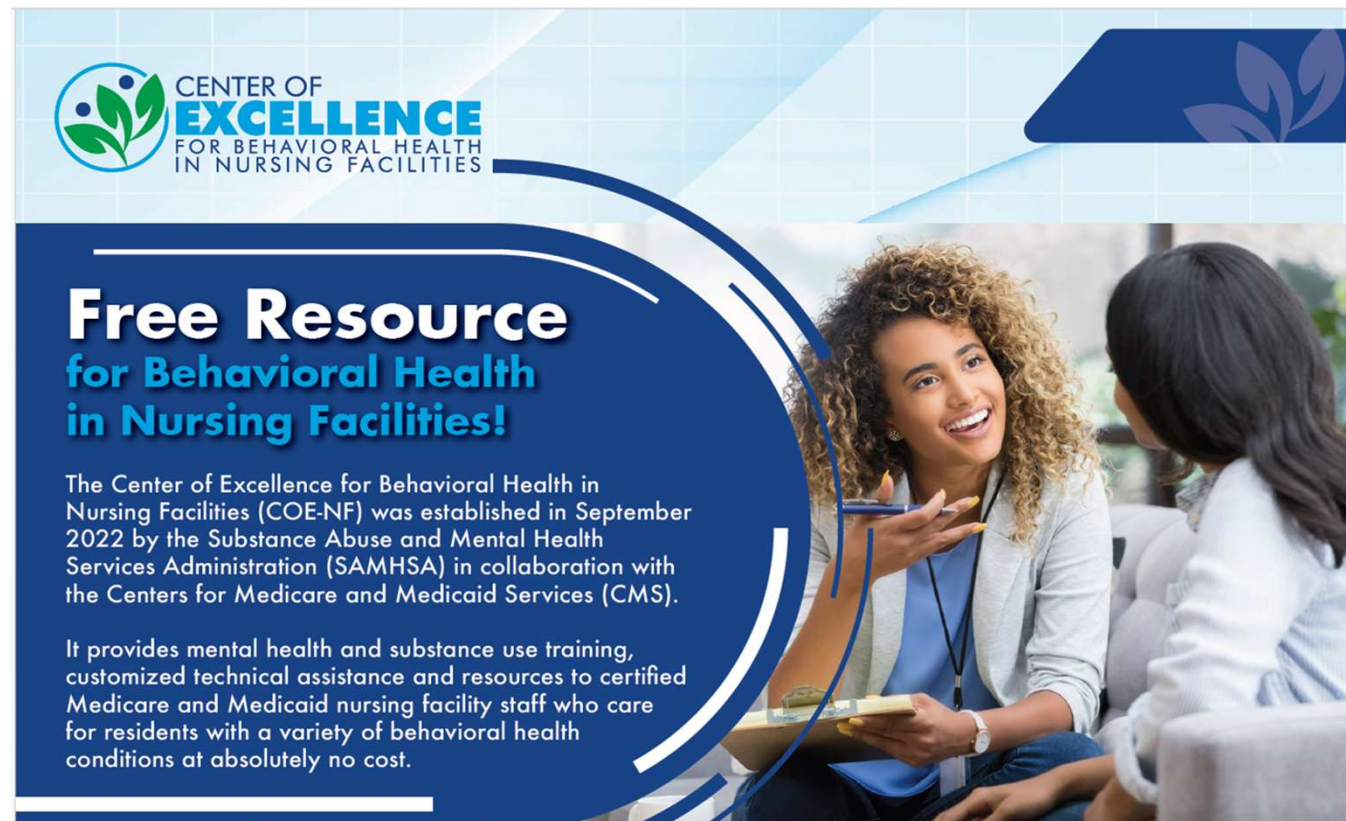
- Assess results of care plan strategies
- Behavioral intervention was informed by front line nursing staff who requested this strategy be conveyed to others. By utilizing the above strategy, peri-care was completed by one staff member in under 10 minutes.

WATERFALL CHAT

Think about cases like this that you have had experience within your care setting. What approaches has your team implemented and have been helpful in those cases?

RESOURCES

- Bathing without a battle
- Hand under hand
- Home - COE-NF
(nursinghomebehavioralhealth.org)



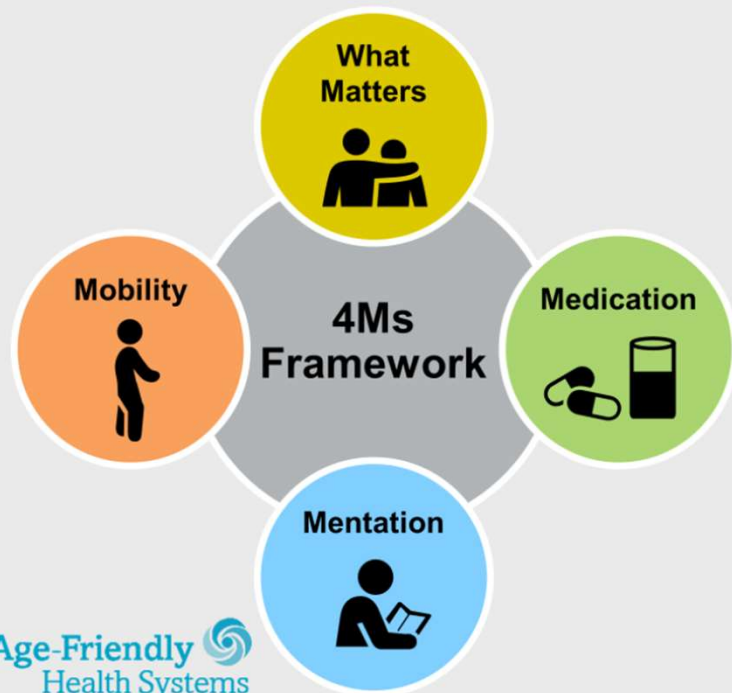
CENTER OF EXCELLENCE
FOR BEHAVIORAL HEALTH
IN NURSING FACILITIES

Free Resource for Behavioral Health in Nursing Facilities!

The Center of Excellence for Behavioral Health in Nursing Facilities (COE-NF) was established in September 2022 by the Substance Abuse and Mental Health Services Administration (SAMHSA) in collaboration with the Centers for Medicare and Medicaid Services (CMS).

It provides mental health and substance use training, customized technical assistance and resources to certified Medicare and Medicaid nursing facility staff who care for residents with a variety of behavioral health conditions at absolutely no cost.

RESOURCES



What Matters

Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care.

Medication

If medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care.

Mentation

Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

Mobility

Ensure that older adults move safely every day in order to maintain function and do What Matters.

- <https://www.ihl.org/partner/initiatives/age-friendly-health-systems>

KEY TAKE AWAYS

- It takes a team's engagement and focus to make meaningful change
- Each individual team member has a different piece of puzzle as leaders it is our role to bring it together, so all team members see the same picture.



THANK YOU FOR ALL THAT YOU DO!!!

QUESTIONS???

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