



Patient & Family Guide  
2021

# Dementia Care for Families

## Camp Hill Veterans' Memorial Building

Aussi disponible en français :  
*Soins aux personnes atteintes de démence -  
Édifice Camp Hill Veterans' Memorial (FF85-1856)*



[www.nshealth.ca](http://www.nshealth.ca)

# Dementia Care for Families

As your family member goes through different stages of dementia, you may have questions and concerns. This pamphlet gives ways for you to support your family member. There are also pamphlets from the Alzheimer Society of Canada available on each unit to help answer any questions you may have.

The health care team will design a care plan to meet your family member's needs. We are trained in dementia care and want you to ask questions.

**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 of the 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
- › changes in independence

**It is important to enjoy the good days. It is normal to feel upset when things are not going well. Try not to let the hard days overwhelm you.**

## **What should I expect when my family member is admitted to the Camp Hill Veterans' Memorial Building (VMB)?**

### **Comfort clothing**

Some stages of dementia can cause dressing and undressing to become uncomfortable, upsetting, and even painful. Flexible clothing choices help residents to be comfortable, while letting them care for themselves. Examples of comfort clothing include track pants, shirts or sweaters that open in the back, and Velcro® blankets. If your family member needs comfort clothing, we will talk about this with you.

## Wandering

For safety, residents with dementia need to have someone with them when they are not on the unit. Care plans are used to make sure each resident is safe and that their needs are met. 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 resident's wrist and helps to keep them from wandering.

Wearing a bracelet does not mean a resident can never leave the unit. If you want to take your family member off the unit, let us know. Then simply enter the code on the elevator keypad. You can ask the charge nurse for the code for the elevator.

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

## Personal care routines

Care is based on each resident's needs and likes. These can be different each day. For example, if a resident does not wish to be bathed in the morning, we will try again later in the day. Strict care routines can upset a person with dementia. If you think that your family member has not been given the care they need, please talk with a nurse.

## **Keeping personal items safe**

You may see that some residents' closets are locked. This is to help stop rummaging or hoarding. It is also to make sure that belongings are as safe as possible. A key for the closet may be given to the resident and/or their family member.

All personal items 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 residents wander into other rooms and collect items. This can cause conflict between residents. A fabric gate or Dutch door (half door) is sometimes used to direct those wandering into safer areas. The resident 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?**

When and how symptoms appear at each stage of dementia is different for each person. In most cases, the disease gets worse slowly. The symptoms of each stage may overlap. This can make the move from one stage to another hard to see. 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 if my family member does not know who I am?**

Dementia affects each person differently. It is common for people with dementia to have trouble knowing faces and names. You will learn what works best for your family member. It may help to introduce yourself or use pictures to help remind them. Try to be patient and stay positive. Remember that they may forget your name or who you are, but they will remember how you made them feel.

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

As dementia gets worse, there are often changes in personality or behaviour. Ask a nurse for information about the stages of dementia. It is important to support your family member as they move through the stages.

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

As dementia gets worse, the skills needed for eating get weaker. Sometimes your family member does not remember if they have eaten. As a person gets older, their sense of taste and smell is not as strong so food may not be as tempting.

If this is the case, we try different things to encourage the resident to eat, such as offering finger foods.

## **Should I be worried 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. In later stages of the disease, as they need more help with meals and physical care, they may get tired more easily. Over time, you may see them spend more time resting.

Sleepiness that happens suddenly may be caused by an illness or be a side effect of a medication. 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 residents on the unit where they were admitted. As your family member moves through different stages of the disease, you may see behaviours that are unusual for them. Usually, residents are not moved because of their behaviour unless it is to make sure they are comfortable and safe.

# What do I say when my family member asks to go home?

This is a common question from residents to family members and staff. It can be hard for family members to hear this. You may feel guilty about your family member being admitted to long-term care. Often it is not the physical home that they want to return to, but a time in their past when everything was familiar. Ask a nurse for the handout called *I Want to Go Home*.

## Looking for more health information?

Find this pamphlet and all our patient resources here: <https://library.nshealth.ca/PatientEducation>

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>

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*Please do not use perfumed products. Thank you!*

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The information is not intended to be and does not constitute health care or medical advice.

If you have any questions, please ask your health care provider.

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The information in this pamphlet is to be updated every 3 years or as needed.