Communication, Reality Orientation and Validation Therapy

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10 Tips for Communication

- Set a positive mood for interaction.
- Get the person's attention
- State your message clearly
- Ask simple, answerable questions
- Listen with your ears, eyes and heart
- Break down activities into a series of steps
- When the going gets tough, distract and redirect
- Respond with affection and reassurance
- Remember the good old days
- Maintain your sense of humor

Set a positive mood for interaction.

- attitude and body language
- set a positive mood
- pleasant and respectful manner
- Use facial expressions, tone of voice and physical touch

Get the person's attention

- Limit distractions and noise
- turn off the radio or TV
- close the curtains or shut the door
- move to quieter surroundings
- Before speaking, make sure you have their attention
- address them by name
- identify yourself by name and relation
- use nonverbal cues and touch to help keep them focused.
- If seated, get down to their level and maintain eye contact.

State your message clearly

- Use simple words and sentences.
- Speak slowly, distinctly and in a reassuring tone.
- Refrain from raising your voice higher or louder;
 instead, pitch your voice lower.
- If they doesn't understand the first time, use the same wording to repeat your message or question
- If they still doesn't understand, wait a few minutes and rephrase the question.
- Use the names of people and places instead of pronouns or abbreviations.

Ask simple, answerable questions

- Ask one question at a time
- yes or no answers work best.
- Refrain from asking open-ended questions or giving too many choices.
- □ For example, ask, "Would you like to wear your white shirt or your blue shirt?" Better still, show them the choices—visual prompts and cues also help clarify your question and can guide there response.

Listen with your ears, eyes and heart

- Be patient in waiting for the reply.
- If they are struggling for an answer, it's okay to suggest words.
- Watch for nonverbal cues and body language, and respond appropriately.
- Always strive to listen for the meaning and feelings that underlie the words.

Break down activities into a series of steps

- This makes many tasks much more manageable.
- You can encourage them to do what they can
- gently remind them of steps they tend to forget
- assist with steps they are no longer able to accomplish on their own.
- Using visual cues, such as showing them with your hand where to place the dinner plate, can be very helpful.

When the going gets tough, distract and redirect

- When they become upset, try changing the subject or the environment.
- For example, ask them for help or suggest going for a walk.
- It is important to connect with the person on a feeling level, before you redirect.
- □ You might say, "I see you're feeling sad—I'm sorry you're upset. Let's go get something to eat."

Respond with affection and reassurance

- often feel confused, anxious and unsure of themselves.
- they often get reality confused and may recall things that never really occurred.
- Avoid trying to convince them they are wrong.
- Stay focused on the feelings they are demonstrating (which are real)
- respond with verbal and physical expressions of comfort,
 support and reassurance.
- Sometimes holding hands, touching, hugging and praise will get the person to respond when all else fails.

Remember the good old days

- often a soothing and affirming activity.
- may not remember what happened 45 minutes ago, but they can clearly recall their lives 45 years earlier.
- avoid asking questions that rely on short-term memory, such as asking the person what they had for lunch.
- try asking general questions about the person's distant past—this information is more likely to be retained.

Maintain your sense of humor

- Use humor whenever possible, though not at the person's expense.
- People with dementia tend to retain their social skills and are usually delighted to laugh along with you

REALITY ORIENTATION AND VALIDATION THERAPY

Psychosocial interventions that healthcare professionals use to assess and evaluate the cognitive decline of older persons suffering from dementia.

REALITY ORIENTATION

Reality Orientation (RO) slows the cognitive decline of a person by the use of repetitive activities to stimulate the individual.

Repetitive activities such as reorientation to time, place and person can reduce confusion and disorientation, and can improve quality of life.

How can RO be used?

RO can be used in an informal or formal setting.

- Informal settings are usually between the nurse and the patient. It can happen at any time of the day and requires everyone who comes in contact with the patient to use RO.
- □ Formal settings are usually in a classroom environment. They can happen daily or weekly but must be scheduled at the same time each day. They comprise of a nurse and 3 to 4 patients. Activities include reading the newspaper, listening to the radio, playing games, singing and conversation.

How can you use RO?

Encourage patients to talk with other patients and other healthcare professionals.

Tactfully correct the patient if they begin to become confused or ramble.

Professional training is not required with RO just care, enthusiasm and knowledge of the needs of patients with dementia.

How do you know if RO is working?

RO has been known to improve self esteem by empowering a patient to understand aspects of their environment.

RO also attempts to make a patient more aware of time, place and person.

It can slow the decline of a dementia sufferers verbal, social and intellectual skills.

Using RO can make a persons environment more stimulating.

How can RO be used in your area?

- Asking a patient their name and DOB.
- Asking a person what the date is?
- Asking a person what their current location is.
- Having easy to read, accurate and reliable clocks in patients view.
- Having the date displayed in patient view.
- Turn on the radio and TV so patients can keep abreast of current affairs.
- Have current daily newspapers available to patients.

RO is not for all patients.

RO is effective in patients experiencing mild to moderate disorientation.

Patients experiencing more severe forms of dementia may find RO distressing.

They may find comfort in past memories and events and may live out these to avoid the unpleasant and painful realities of dementia.

Some patients may become violent or upset when RO is applied.

VALIDATION THERAPY

Validation Therapy (VT) validates and respects the thoughts and feelings of disorientated older persons. VT acknowledges that their current reality, in terms of time, place and person, is not the same as our reality.

How can VT be used?

Instead of healthcare professionals attempting to alter a persons perception of reality, VT helps healthcare professionals try to understand a patients reality from a patients perspective.

How can I use VT?

- Focus on a patients emotional perspective rather than the factual content of their communication.
- Challenging factual inaccuracies can be futile, assume that their behavior and speech has personal meaning.
- VT can assist a patient explore past feelings and experiences.
- Using this intervention can help to relieve distress and restore self worth in patients suffering from dementia.

How can VT be used?

- Unlike RO, VT requires no formal setting to utilise this intervention.
- No special training is required, just a sympathetic ear, knowledge of the needs of patients with dementia and time.
- Attempting to analyse the meanings of a patients dialogue can be difficult and hopeless.

Examples of VT in use.

A patient repeatedly asks to go home, instead of telling the patient they are in hospital.

Ask the patient about their home while gently guiding them back to their room. A patient says that their spouse is coming to see them, however, their spouse is deceased.

Instead of telling the patient their spouse is deceased and not coming. Ask the patient about their spouse or ask what they are going to do when the spouse arrives.

REALITY ORIENTATION AND VALIDATION THERAPY

Reality Orientation and Validation Therapy are just two of the many psychosocial interventions that healthcare professionals use to assess a patients cognitive, functional and emotional capability.

By having an awareness of the many tools that are available to healthcare professionals it allows a patient to receive an informed diagnosis and broader ranger of care.

Remember

- We cannot change the person
- Check with the RN and/or Doctor first
- Behavior has a purpose
- Behavior is triggered
- What works today, may not tomorrow
- Get support from others

I've learnt that people will forget what you said, people will forget what you did, but people will never forget how you made them feel

Maya Angelou

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Questions?