

Moving to a Facility

Most people are unaware that when you receive the call that a bed in a nursing home is available, you often have very little time to prepare. Sometimes you'll be expected to bring the patient in the next day. If you are on a waiting list, it is good to have the person's things prepared so you can move very quickly. Sometimes the facility will let you pass up a bed and wait for the next one, however, you run the risk of not having a new bed available for an undetermined amount of time.

Relocation can be potentially traumatic for the person with dementia. Focus on the transition. The best way to reduce a person's anxiety and help them become oriented is to have a familiar person with them through the intake process. If possible, have two people come for the move - one who can attend to the administrative details and the other who can stay with the patient. In most cases having a relative or a professional caregiver come with you is best.

If you are bringing a home care aide or other professional, make sure to get permission from the facility to have them there. Facilities will usually agree as long as the person is not providing care. You want to tell them that the aide is just there to help orient the person, not to help feed or bathe them, etc... If the patient needs someone to care for them in this way, the facility will probably want you to "hire" one of their own staff to do these tasks. Most facilities usually take this position because of liability. How long that person should be available, depends on your resources and the situation. For instance, after moving, the patient may be fine during the day but anxious during the night. In this case, you might want to have someone stay with them during the night.

Help the Staff to get to Know the Patient

During the intake process at a facility it is important to acquaint the staff with the person. It is often helpful to give staff a written summary containing information about the person. The write-up might include:

- Information on the person's behavior – are they active or passive, are there things or circumstances that agitate them, do they react badly when someone speaks to them in a loud voice?
- Preferred activities and interests – do they like to walk, dance, listen to music, fold clothes, draw, paint etc.?
- Food likes and dislikes – what do they like for breakfast, are there certain food that they won't eat, or are they allergic to any foods?
- Tips on personal hygiene – do they need assistance with brushing their teeth, do they have trouble with bathing?
- Abilities – have they lost their ability to communicate verbally, do they understand cues and directions, do they need assistance feeding themselves?
- List of family members and friends who will visit.
- Summary of their personal history – it's helpful for staff to know the work the person did, where they grew up, and who was important in their life, e.g., if the patient is often referring to Max, it's good for staff to know that he was a beloved uncle.

Tips on Moving to a Facility

- Find out if the facility will schedule a visit to the person's home as a way to get to know the person with dementia better.
- Schedule a visit for the person with dementia to the facility.
- Schedule an appointment with your doctor to fill out the medical forms required by the facility, and review all current medications the person is taking with the doctor. Make a list of the medications to give to the facility.
- Find out how the facility handles the reordering of medication. Do they do it or are you required to do it? Ask if they have a special relationship with a pharmacy in their area.
- Label all of the resident's clothing and personal possessions. An easy way to label clothing is to order a stamp with the person's name. Stamps can be ordered from:

Caring Products*
 5519 Clairemont Mesa Blvd.
 Suite 333 San Diego, CA 92117
 619 576-2273

*Ask for the Senior Stamp that has larger letters for seniors.

Disclaimer: The Alzheimer's Association does not guarantee, endorse or recommend this or any provider.

- Arrange for "home insurance" if the person is bringing their possessions to the facility.
- Arrange for movers if necessary.
- Consider preparing a scrapbook filled with past and present pictures of the resident, family members and friends. This can provide security for the resident and help the staff to get to know the person better.
- Find out what the facility provides and what, if anything, you are required to bring. For instance, you may be required to bring personal care items such as shampoo, etc...
- Find out if there is anything you should NOT bring, such as expensive jewelry, throw rugs, etc.
- Get a list of the staff who will be working with the resident, including their direct phone numbers or extensions.
- Be available to accompany the new resident on the day of admissions.

Adjusting Takes Time

Some level of discomfort always accompanies change, and adjustment to a new home usually takes time. It is estimated that 2/3 of new residents begin to adjust in 2 – 4 weeks and 1/3 take 2 – 6 months. "Beginning to adjust" really means that if the resident was refusing food, they begin to snack. If they weren't joining activities, they start to watch. It might mean that disrupting other residents becomes milder, that the number of restless nights is reduced, or that they ask to go home 5 times a day, instead of 10. For most, a full adjustment is gradual.

Surprisingly, caregivers take longer to adjust than residents. Residents eventually forget they're not home; you never do.

Patient Reactions

The reactions of people with dementia to a move can range from being relieved and content to being agitated, angry and sad. Some may express their emotions by unwarranted accusations against the caregiver and/or the staff and may plead for help or to go home. When you are visiting, it is very hard to hear this. When this happens, it's

best to reassure the person of your love for them and then refocus their attention to another subject or an activity. Don't attempt to "reason" with them.

Normally accusations against the facility are a reflection of the resident's dislocation and confusion. However it is very important to check with staff and management to make sure that interactions with the resident are being handled in a professional and kind way. It is always helpful to give staff as complete a picture of the person's personality, likes and dislikes, as possible.

Visiting During the Adjusting Phase

Work with the staff at the residence to determine how frequently you should visit during the first few weeks. Some residents need time alone to accept new living arrangements. Others will be anxious to see you very often. It is often best to try one visit very soon after placement. If it seems to agitate the patient, wait a few days and then try again. If your visits are upsetting the person and you are very anxious to see how the person is adjusting, you might check if there's a vantage point from which you can observe them, without being seen. You may also consider calling to say "Hello" and calling the staff daily to check on things. After adjustment, visit as often as you like.

Source: "Placement Panic: Realities of the Move", by Liz Ayres, Support Group Leader and Helpline Volunteer for the Alzheimer's Association of Orange County