

## Workshop Exercises

### Scenario #1

Jim , an 89 year old man with advanced dementia, is losing the ability to feed himself. He is able to eat with his hands. His daughter is very offended when he gets messy eating with his hands. She is the primary caregiver and is struggling with managing her dad, her 4 yr old son, and all the home care tasks, while her husband is working long hours at his job. Jim is friendly, but has little language, and spends most of the day sitting in a recliner in the living room, or in a chair in the kitchen, just wiping the table top, humming, and looking out the window at the bird feeder. He was a lawyer, socially active, an avid hiker and bird watcher until he developed dementia at about age 78, shortly after his wife died.

### Scenario #2

Gerald Paluka, is 87 years old. He recently fell and broke his hip. He went thru rehabilitation with minimal success. He is supposed to use a walker, but tends to forget it, and insists that he is fine and doesn't need it, if it is placed in front of him and he is prompted to use it. The wife, Margaret, is a frail and unhappy 86 yo with osteoporosis, a history of anxiety, previous excess use of alcohol to calm herself, and lots of anger about her husband's condition and his inability to behave himself. She, states about every 2-3 hours, that "If he falls again I'll sue you." He is getting up and walking around the house asking where his wife is – not seeming to recognize Margaret when he sees her. He also asks about when he needs to be ready to go to work. He used to be a business man and did a lot of calls to others' offices and buildings. He played bridge & golf previously. He is able to do some parts of his personal care and dressing, but have trouble getting all the way through it and makes lots of mistakes and gets easily frustrated with Margaret and his family when they try to help

### Scenario #3

Marcia is a 72 yo woman, who used to work as a night nurse in a long term care facility. She tries to make rounds and refuses to sleep at night. She is interested in having things to do to help you out. She tends to sleep for long periods during the morning and afternoon and often refuses meals and activities during those times. She becomes easily angered and loud if she is told she can't come with you or help OR that she should get up and come to eat or engage in activities during the day. When her family visit in the morning, they want her to be up and busy, and complain about the caregiver not doing things with her. When family visit in the evening they are happier that she is awake, but get frustrated with her efforts to do things that don't make sense to them. They ask her to sit down and talk with them, but says she can't and she isn't sure they need to be there – stating "visiting hours are over – you need to go home!"

#### **Scenario #4**

Beulah, a 92 yo woman, keeps taking off her incontinence pad and urinating on the floor and in trash cans. She is insistent on finishing up and becomes very upset if anyone tries to stop her or make her go to the bathroom after she gets her pad off. She used to be a homemaker on a farm in the country. She is able to use only a few words at a time and spends most of her time walking around the house, going into rooms and spaces and getting into things and moving them around and taking some of them with her, tearing others apart or breaking them into pieces. Her husband, doesn't know what to do, and just lets her do whatever she wants, sitting and watching TV most of the time, and pushing her hands away, if she messes with him..

#### **Scenario # 5**

Two sisters are 80 and 78 years old. They have lived together for 30 years, since they became widowed. Each woman has had an interesting and different life. Millie, the younger one, was an Army nurse for years. She met her husband while they were stationed in Hawaii. They had no children, but enjoyed traveling and taking cruises after they retired. She has always loved to dance and have fun, when she wasn't working as a nurse. Trudy is the older sister. She met and married her husband right out of high school. She stayed at home and raised 6 children (all were about 1-2 years apart). She loved to sew, knit, crochet, take craft classes, and cook. The house is hers but she invited Millie to move in after both husbands died within just a few years. Up until 4 years ago, the two had managed on their own and had been active, each in their own way, only really spending time with one another in the evenings or after church on Sunday. Two years ago, Millie had a fall, and broke her hip, limiting her ability to get around some. Three years ago, Trudy was diagnosed with Alzheimer's, but had been doing OK until a year ago, when she almost burnt the kitchen down with a grease fire when she tried to cook breakfast for Millie who wasn't feeling good. Now they seem to be getting on each other's nerves. One major problem is the radio/CD player. They have very different tastes in music. Trudy likes hymns and gospel, while Millie likes Big Band, Bing Crosby, Dean Martin, Perry Como, Frank Sinatra. One keeps turning it off and the other keeps asking the caregiver to turn it back on. They both like to sit in the dayroom and tend to sit next to one another. They typically bicker some, but it can become more violent if they are left alone.

#### **Scenario #6**

A daughter comes in at 1:30 every other day and complains that her father has not been shaved and looks horrible. She threatens to change agencies, but has been doing this for 2 months and hasn't done anything about it. He is operating at level 2. He was a plumber for years and worked alone most of the time. He also liked to go fishing alone or with one buddy. He has lost significant weight over the past 3 months and spends most of his time walking around the house, and up and down the hallways. He tends to avoid noisy areas and leaves during larger groups of family visits, when children are around, or when the TV gets turned on to programs that have a lot of noise, talking, or action.

### **Scenario #7**

A family of seven opted to care for mom, Sara, in her home. Most live in other states or out of the area. There is one son who comes in every evening about 7:30 or so and after an argument and much physical handling, forces his mother to take a shower. He says she smells and needs to get cleaned up. She screams and argues throughout the event, but he does get it done. He then leaves a note for the nursing supervisor saying that he is very frustrated with the caregiver – stating that she needs to do some work since that is why they brought her into the home. He leaves, then mom cries and is physically agitated until about 10:30 pm. She is very frail and weighs about 95 lbs. She is unable to understand most of what is said and needs guidance and help to do any personal care task. She loves to sing old familiar songs and hums most of the time. She is incontinent, but wears briefs and can sometimes urinate in the toilet, if she gets there at the right time. She is generally pleasant and cooperative, but clings to caregivers, and is nervous about sudden movement, actions she doesn't understand, or when she hears loud noises or voices. Her abilities are worse after her son leaves. The caregiver doesn't notice a strong odor or smell when she is with the woman, but can smell fresh urine or BM when it happens, and immediately changes her.

### **Scenario #8**

Jacob, is a 78 yo man, diagnosed with Parkinsons Disease, who has been having problems with his recent memories and with new information, as well as episodes of yelling, arguing, refusing, and complaining (all totally out of character for him). He has been asked by his wife to go see his doctor about his memory problems. He tells her there is NOTHING wrong with him and to lay off. He also tells her he decided to buy a new car and has taken out a loan for it. She is really upset since they just talked about needing to be careful with money for the next year or so until they had paid off the ice storm damage from this winter. She has called the agency to get a helper in the house, as she feels like can no longer manage him without help.

### **Scenario #9**

A wife, Georgia, has been cared for by her husband, Dan, at home for the past 4 years. She has been diagnosed with Alzheimer's Disease and has glaucoma (treated with eye drops once a day). Up until recently she was able to do her own personal care with a set up and minimal prompting. Now, she is not following thru when he sets things up and just follows him around. She is also getting up during the night and getting into things. Dan feels like she is being resistant and stubborn and that she is trying to get him to do more for her than is good. He is afraid that helping too much will cause her to go down hill faster. Georgia is fine when she gets to go and do what she wants, but she doesn't seem to actually do much of anything anymore and talks very little, except to say "OK, well I'm ready to go. Let's go." She can feed herself, but does sometimes pick pieces of meat or crunchy stuff out and put them in her napkin. Dan knows he is getting near his limit and needs help. He says the things that are bothering him most are the dentures routine and her refusals about lots of things.

### **Scenario #10**

Patrick is living at home with his wife. He has been diagnosed with some sort of dementia by his family doctor. The doctor told him to stop driving. Pat is still driving. He becomes very angry and confrontational when his wife, Ann, tells him he is not supposed to drive. He has actually hit her one time when she took the keys out of his hand and slammed out the door. What Ann is doing now is riding with him and trying to get him to go 'the back way' to places. When she rides with him, Ann notices he does well with the mechanics of driving, but relies more and more on her for directions on how to go places. Patrick is now retired but used to work as a customer service representative doing a lot of visiting of businesses. He has had no accidents, but he did get lost two times and had to have someone call Ann to come and get him. The couple lives in a suburban neighborhood with many long time friends in the area.

### **Scenario #11**

Frances is a 59 yo white, divorced female who was screened two weeks ago. She was seen with her daughter, who had used leave from the Air Force to come back and 'deal with' her mother after receiving a call from Protective Services regarding her inability to stay in her home without more support and some services.

Frances had been living out in the country in a small community. She had lived there for over 30 years and had gradually alienated all of the neighbors because of her 15 dogs. She previously worked as a computer data input person on the night shift, but had been fired from that job 3 years ago, due to inability to correctly enter the one line of data and arguments with her telephone supervisor. She has not been eating well and weighs about 110 lbs, while standing 5'8" tall. Her previous normal weight was about 145-150 lbs. She reportedly drinks 2-4 glasses of wine a night and is on two heart medications for control of heart rate and hypertension (the daughter wasn't sure whether her mother had taken those medications recently). Frances had never been a social person and had several episodes of delusional behavior regarding her dogs and fear of thieves about 5-7 years ago – with a brief hospital stay to get medications re-adjusted and evaluate for mental processing issues. Frances refuses to leave her house and threatens to call her daughter or the police if anyone tries to force her to come out of the house. She is able to do most of her personal care with supervision and some help for details, but is refusing to let people come into her room to help her. She is keeping clothing on from day to day and just adding another layer. She refuses to eat in the dining room and picks at her food when she is served in her room. She has three dogs, who are older, and fairly quiet, but need daily attention and care.