



## Assessing Caregiver Interactions with the Person with Cognitive Impairment: Questions to Ask

Here are some questions to ask ourselves as caregivers, to assess how well our interactions with a person with cognitive impairment meet the person's needs. These questions are based on brain functioning and specific changes in cognition. However, we do not need to know anything about the brain to ask them. The questions are organized under general intervention concepts that address common needs among persons with cognitive impairment.

A "Yes" answer suggests our interactions are helping this person and compensating for cognitive impairment. The answers to these questions can suggest effective intervention strategies to help this person understand, respond, and feel comfortable with us. The questions are written for the caregiver to ask about him or herself.

More information is on the last page of this handout.

### **A. RESPECT:** Look for ways I:

- Show respect for this person, both verbally and nonverbally
  - Treat this person as an adult, both verbally and nonverbally
  - Express love and affection for this person, both verbally and nonverbally
1. Do I respect this person?
  2. Do I treat her as an adult in the words and facial expressions I use (e.g., do I avoid calling her "dear" when I really don't know her)?
  3. Do I offer normal adult objects and activities (e.g., do I avoid children's toys or games)?
  4. Do I avoid talking about her in a condescending way (e.g., "they are so cute together" or "she's the little lady over there")?
  5. Do I avoid talking about this person in front of her?
  6. Are my voice, gestures, and movements gentle and kind, even when clear and firm?
  7. Do I help her save face and avoid embarrassment (e.g., do I avoid calling attention to her mistakes? Do I discreetly correct the mistakes without her noticing)?
  8. Do I avoid scolding, shaming, or bossing her?

**B. EXPLANATION AND REASSURANCE:** Look for ways I:

- Show reassurance to this person
  - Clearly explain events, requests, and the environment to this person
1. Do I give reassurance as often as necessary, both verbally and nonverbally?
  2. Do I avoid giving information that would be distressing or embarrassing to this person?
  3. Do I give information or make a request only when he is emotionally calm and ready to hear me, so he does not need to feel emotion and think about my words at the same time?
  4. Do I give as much explanation as he needs?
  5. Do I repeat requests or explanations as often as necessary?
  6. Are explanations short, simple and clear?
  7. Do I use few words, and short phrases and words?
  8. Do I use concrete and familiar words?
  9. Do I wait to talk until there is no other noise?
  10. Do I speak clearly and in a low pitch?
  11. Do I talk as slowly as necessary, and with pauses to allow time for processing?
  12. Do I give clear and honest answers to every question he asks?
  13. Do I answer questions as though this is the first time they were asked?
  14. Do I avoid saying “no” and do I suggest alternatives instead?
  15. Do my questions invite opinions or “yes” and “no” responses, rather than facts or information?
  16. Do I let him know how much time has passed and what time of day it is, when necessary?
  17. Do I tell him when a task is done?
  18. Do I verbally prepare him before touching (e.g., by asking permission to touch or by telling him verbally)?
  19. Do I nonverbally prepare him before he moves (e.g., by touching and stroking a body part before moving it or when verbally asking him to move it)?

**C. BODY LANGUAGE:** Look for ways I:

- Use my body to communicate with this person
  - Unintentionally communicate with my body
  - Compensate for this person’s sensory and cognitive changes by how I position and move my body
1. Do I use my body enough to communicate with this person (e.g., do I use hand gestures with my words to help her understand)?
  2. Is my body telling her what I want it to say; do I avoid gestures or facial expressions that could be misinterpreted (e.g., do I use raised eyebrows rather than a frown when I want to show concern)?
  3. Do my body, face, eyes, and words all match (e.g., do I avoid moving quickly and with startling movements while using soothing words and smiling)?
  4. Do I place myself so she sees or notices me easily?

5. Do I change positions and move my body slowly, and as little as possible?
6. Am I at eye-level with her (e.g. sitting when I interact with her)?
7. Do I make and keep eye contact with her?
8. Do I touch her while talking, when appropriate?
9. Do I model the task and positive behaviors?

**D. APPROACH:** Look for ways I:

- Introduce a topic, activity, or request that help this person feel positive about it
  - Set an upbeat, cheerful, relaxed, and comfortable emotional tone
  - Prevent anxiety, uncertainty, or frustration in this person
1. Do I converse with this person and build trust before mentioning a task such as bathing or getting dressed?
  2. Do I avoid embarrassment about private activities (e.g., do I invite him to use the toilet only when we are alone)?
  3. Do I avoid telling him about the whole task (e.g., a shower) and instead mention one step at a time (e.g., let's walk to the bathroom) when appropriate?
  4. Do I offer options he can understand, so he can make choices?
  5. Do I suggest a refreshment or fun enticement to help him participate?
  6. When appropriate, do I rhythmically sing or march to a place (e.g., bathroom or dining room), to help him walk and participate?
  7. Do I laugh, joke and use humor in a concrete and emotionally supportive way?
  8. Do I stay calm even when being silly or when he is angry or frightened?

**E. OBSERVATION:** Look for ways I notice and recognize:

- How this person is feeling
  - How well this person is understanding
  - What this person is trying to express
  - Evidence this person is going to be frustrated, anxious, or angry
  - Evidence this person may engage in a distressing behavior
  - How to best respond to this person's feelings and behaviors
1. Do I watch this person carefully for nonverbal and verbal feedback, so I can see how she is feeling, and can anticipate or respond to frustration and anxiety?
  2. Do I watch her whole body and notice changes that suggest confusion, anxiety, or something she is trying to tell me (e.g., tightening leg muscles, clenching fists, widening or rapid eye movements, brief frowns)?
  3. Do I watch her eyes when we talk?
  4. Does she seem comfortable and relaxed?
  5. Is she responding positively to what I am saying or doing?
  6. Does she seem to understand me?
  7. Do I give her enough time to absorb what I say and to then respond?
  8. Do I change my own behavior or the environment in response to her reactions?

**F. DISTRACTION:** Look for ways I:

- Use distraction or diversion to help this person
  - Compensate for or reduce distraction with this person
1. Do I know when distraction or diversion is helpful with this person (e.g., when he is looking for a dead spouse or performing a task that is easier to do without thinking about it)?
  2. When there is a distressing behavior, do I use humor and diversion instead of demands, argument, shame, or instructions to stop the behavior?
  3. Do I avoid calling his attention to his behavior (e.g., do I avoid comments such as “What would your mother say if she heard you talk like that?”)?
  4. Do I examine his words and behaviors to discern the feelings behind distressing behaviors, and then respond to the feelings, rather than the words or behaviors?
  5. During tasks, do I encourage him to hold or use an item while I use a similar item (e.g., a comb while I comb his hair, a wash cloth while I wash during a bath)?
  6. Do I get his attention before speaking, and keep it throughout our interaction?
  7. Do I reduce distraction, noise, and clutter around me when I am talking to him?

**G. CONSISTENCY:** Look for ways I:

- Keep my interactions the same and predictable as much as possible
  - Have only one caregiver at a time interacting with this person
1. Does the same caregiver help this person every day as much as possible?
  2. Does she know what to expect from me?
  3. Do I use nearly the same words every time we do this task?
  4. Do I position myself in the same spot every time we do this task?
  5. Do I move my body in a similar way every time we do this task?
  6. Is there only one caregiver helping her at a time?
  7. If there are two or more caregivers, is there only one caregiver at a time that she is noticing and paying attention to (i.e., the other caregivers are helping her from behind, staying out of sight and not talking)?

**H. CHARACTERISTICS:** Ask myself:

- Am I the best person to be helping with this task?
- Are there things I can change about myself to make this go more easily?
- Are there things I cannot change and therefore must compensate for?
- How do I feel about this person and about this task?

1. Does this person recognize me (does he know I am myself and not someone else)?
2. Does he feel comfortable with me or with the person he thinks I am?
3. Does he have strong feelings about me?
4. Does he trust me?
5. Is my gender comfortable and appropriate for him?
6. Am I comfortable with him right now and in general?
7. Am I comfortable doing this task with him (e.g., am I comfortable seeing him without clothes on or seeing him drool while eating)?
8. Am I comfortable with his dependency?
9. Can I avoid letting my anger or sadness about his behavior affect my ability to help?

**I. ORGANIZATION:** Look for ways I:

- Organize my time, the task steps, and the task items
  - Am efficient, but appear relaxed and calm to this person
1. Do I organize my time to avoid the need to rush through a task?
  2. Do I plan the task steps ahead of time?
  3. Do I do most of the task preparation out of sight of this person?
  4. Do I focus on her and not so much on the task or product?
  5. Do I move quickly and quietly when I am out of her sight, but more slowly on the parts of the task where she sees me?

**J. PREVENTION:** Look for ways I:

- Prevent distress, confusion, or anger, rather than simply respond to them when they occur
1. Am I nipping this person's distress or confusion in the bud, rather than letting it escalate to more challenging levels?
  2. Do I apologize or reassure immediately when I see him beginning to get angry or anxious?
  3. Do I notice subtle hesitations and try to gently coax or encourage him?

## **More about these Questions**

This handout lists questions a caregiver can ask to discover how well the caregiver's interactions with a person with cognitive impairment are accommodating the strengths and needs of the person. The questions are based on very specific changes to the cognitively impaired person's brain, and on ways a caregiver's communication strategies make it easier or harder for the person to feel comfortable and to perform tasks of daily living.

The caregiver is probably the most significant factor affecting behaviors, the amount of distress and fatigue a person experiences, and how easily and successfully the caregiver can assist the person with cognitive impairment. These questions help explore why a person is in distress, having trouble performing a task, or engaging in a particular behavior. They also suggest intervention strategies.

The caregiver is expected to ask these questions to her/himself or to other caregivers, but NOT to the person with cognitive impairment. The questions can be asked informally by family and other caregivers or more systematically with formal recording by professionals.

The "Cognitive Impairment Assessment Protocol (CIAP)" presents these questions more formally as an assessment instrument in two formats: a Yes/No and a four-point response format.

The "Cognitive Impairment Intervention Protocol (CIIP)" presents a variety of intervention options for each question on the CIAP.

The CIAP and CIIP consist of four parts, each with a series of questions and intervention options: Cognition, Environment, Caregiver interactions, and Task and Daily Routines. The questions here are part of the Caregiver Interactions CIAP and CIIP.

The questions are meant to be asked either as a general assessment or while a caregiver is helping with a task. The answers to these questions can help the caregiver modify communication strategies in order to accommodate the person's feelings, abilities and cognitive difficulties. When they are asked during a task, the caregiver can intervene immediately and respond to subtle changes that occur minute by minute in the person's cognitive abilities.

The questions facilitate self-observation by the caregiver, and can be useful to any caregiver, professional or family, with any level of relationship with the person with cognitive impairment.