

The Chelsea at East Brunswick

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Executive Director

and

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Cottage Program Director

Our initial interest in the program:

- We have two programs that we felt could benefit from an innovative team approach.
 - The Country Cottage – Dementia Program
 - The Crossings Program – unique to assisted living designed for residents with a psychiatric diagnosis.

Goals for our involvement:

- to try new approaches to use for challenging behaviors rather than medication alone.
- to decrease triggers that instigate challenging behaviors
- to increase staff awareness of triggers for each resident's challenging behaviors
- to create alternative responses to challenging behaviors
- to foster a staff “buy in” to the concept that some behaviors can be changed/avoided with proper early interventions

Team approach

- We attended the meeting as a team:
Exec Dir, RN, Cottage Dir, CMAs and CNAs.
- Met as a group during our training to decide what our focus would be and we decided The Cottage would be our starting point.

Know your resident

Carolyn took photos of each cottage resident and put them in a photo album.

She then created a “getting to know you” sheet about each person.

These sheets were then placed on the opposite side of the resident’s picture in the photo album.

All staff was required to read over the information and get to know the residents in a new way.

Selecting our first residents

- As a group, we selected residents we felt had specific behaviors we could address.
- Resident #1 had lived in our AL community for years and had been transferred to the Cottage.
- Resident #2 was new to our community and was directly admitted to our Cottage.

Resident #1-

- Targeted behaviors-
 - unstable wandering
 - touching (and often ripping) anything within her reach
 - limited focus.
- Targeted approaches –
 - sensory table with sensory videos
 - Sensory boxes
 - Staff awareness

Resident #2

- Targeted behaviors-
 - exiting the secured area
 - extremely difficult to redirect
 - very limited verbal skills.
- Targeted approaches –
 - creation of the “Walking club”

Our results after two weeks

- Resident #1
 - was calmer
 - had periods of engagement with the sensory boxes
 - increased staff interactions
- Resident #2
 - responded well to the walks
 - less seeking exit behavior

Resident #1 and #2 today

- Resident #1 just recently moved to a nursing home with overall decline and need for 24 hour supervision. We were able to keep her in our community six months longer using the new techniques and methods.
- Resident #2 is doing well. Continues to walk around but is overall more content. There is no longer a discussion of not being able to care for him in our community.

Ongoing efforts

- As with any plan or program, change is constant so we continue to experience ups and downs with our interventions.
- What works this week may not next week. We currently have two new residents who are sundowning with extreme agitation, and we are now looking at options to avoid the triggers for them.

Looking to the future . . .

- New ideas we feel may be successful-
 - Creating a “Sensory Aide” position.
 - responsibilities will include:
 - ensuring that the sensory plans are carried out each day
 - maintaining the equipment for the program
 - training new aides
 - Expand program to The Crossings
 - Create interventions for:
 - social isolation
 - anxiety
 - lethargy