

Putting the manual into practice

Session 1-4

Objectives for the session

- To highlight general themes and considerations when delivering the intervention.
- To consider each session in turn and familiarise ourselves with the content and focus of each session.
- To practice delivering parts of the intervention and to reflect upon this process.

General tips / considerations

- Depending upon service context, obtain background information and complete a screening assessment
- Consider when, where to offer the intervention in order to increase access for the carer. Try to be flexible
- Reflect upon how recently pwd has been diagnosed and the nature of their presentation – think of relevant examples to use in exercises
- Adjust your pace, style, language to fit with the carer

General themes in the intervention

- There are a range of bio-psycho-social factors that will impact upon behaviour
- Homework tasks are a way to identify patterns / reinforce new strategies
- Guide the carers to develop their own solutions for difficulties
- Do not feel you have to be an 'expert' on everything
- Value the carers experience / expertise
- Use supervision to reflect on safeguarding / risk
- Be pragmatic / flexible about completing all 8 sessions

Session 1

- Session 1 is an opportunity to introduce a number of key ideas.
- Carers may be overwhelmed with problems (or not feel there are any) and may need some help in identifying and naming problems.
- Establish with the carer how best to deliver the sessions.
- Ask the carer how they refer to themselves and the relative they are caring for, do not to assume that they see themselves as a carer.
- In relation to the stress reduction techniques, explain that not everybody likes all the relaxation exercises, and the exercises may be something very new and unfamiliar for them.

Session 2

- Session 2 explores triggers of challenging behaviour and identifies which reactions may reinforce the behaviours.
- Be mindful that there may have been difficulties in relationships prior to the onset of the dementia which may have now intensified.
- Vary the language used for example referring to 'difficulties' 'challenges' or 'changes' as well as 'problem behaviours', carers may be more likely to relate to the material being presented.
- Bear in mind behaviours that carers are experiencing (and possible strategies) which they may have previously mentioned in order to demonstrate the ideas being introduced.
- Emphasise that although there are ways for the carer to try and manage the behaviours – they are not to blame. Highlight that there are no 'right answers'.

Session 3

- This session extends upon session 2 exploring how we can develop specific strategies to change behaviours by changing a trigger or a reaction.
- It is useful to remind carers that these are the general principals in behavioural change / modification which can be useful and that we are not suggesting treating PWD like a dog or a child.
- Emphasise that behavioural change does not happen overnight and it is not always easy – it requires a persistent and consistent approach and can be about trial and error.

Session 4

- This session has a more 'cognitive' focus highlighting the relationship between thoughts, feelings and behaviours.
- For some carers the idea of talking about 'thoughts' and 'feelings' will be less familiar than talking about behaviours. Consider different ways to ask the questions, for example asking: What was going through your mind? Or What struck you?
- It may be helpful to ask carers how someone else in a similar situation may have felt, as for some people thinking generally can be easier than relating to their own experiences.

Putting it into practice

- Exercise in 3s - Choose a session to role play. One person is interviewer, one is the caregiver, one is observer – noticing what therapist is doing that worked well. Role play delivering part of session one or two – Spend 5 – minutes at start discussing together what scenario and possible questions / ways to manage the challenge. (45 mins).
- Feedback – sharing ideas about what worked well / other suggestions from the group. Hearing first from the observers and then how people found interviewing / being interviewed. (20 mins)