

ACTIVITIES AND SELF-CARE ROUTINES IN FTD

There are many ways that FTD may affect a person's ability to manage in self-care and other daily activities. While it can be more challenging to engage individuals with FTD in these activities, there are effective approaches.

USING ACTIVITIES FOR POSITIVE BEHAVIORAL MANAGEMENT

- Include the family in creating an individual activity plan, and invite the person with FTD to programs, such as special events, spiritual programs and movies.
- Consult with an occupational therapist (OT) to complete a functional assessment and identify strategies to promote activity engagement as interests and abilities change.
- Create an individual plan: when to engage in a particular activity, how to set it up, how to simplify steps to complete it and how to monitor it safely.
- Identify individual activities based on personal interests and experience. Modify activities to meet the person's abilities. Look for activities that challenge the intellect but are not so difficult as to cause frustration or discouragement.
- Provide a chair for the resident at the back of the programming room, where they can enter and exit freely and easily during community activities.
- Facilitate a small game with others and adapt rules for flexible play. Games may be difficult for the person with FTD to figure out and there may be loss of understanding of social rules.
- Begin an activity with the person and stay with them until they are engaged. A person with FTD cannot always initiate an activity, but once started, she or he may continue independently.
- Find a "job" that allows the person to contribute. Repetitive "work" such as dusting, sweeping, folding papers, watering flowers or clipping coupons may be easiest.
- Look creatively at how to adapt and build on what works. Symptoms and abilities change regularly. If music is a favorite but the MP3 player gets lost, attach it to a firm headset that is easier to keep track of.
- Adjust expectations for word searches that were a breeze before. Remember, the rules don't matter; they may find the word plane "pl" on one line and "ane" on another. It is not cheating; it is a creative way to find the answers. In later stages, she or he may not be able to find the word, but could go on a "letter" search—find all the "B's."
- Channel compulsive behaviors into activities. For example, sorting objects: a deck of cards can be sorted into suits; colored objects or pegs by color or shape; or matching dominoes.
- Provide daily encouragement, smiles, reassurance at signs of stress. A trusting relationship with staff is important as people with FTD often feel more comfortable talking with staff than older residents with Alzheimer's disease or other dementias.
- Consider music programs that are age appropriate and those with rhythmic activities that may engage people with FTD and offer a sense of mastery. Namaste programs that offer sensory relaxation such as a warm blanket, hand massage with eye contact, soft music, lavender scent, range of motion exercises and finger sandwiches/beverages for calming a busy resident.

CREATE AN INDIVIDUAL PLAN: COVER WHEN TO ENGAGE IN A PARTICULAR ACTIVITY, HOW TO SET IT UP, HOW TO SIMPLIFY STEPS TO COMPLETE IT AND HOW TO MONITOR IT SAFELY.

ACTIVITIES AND SELF-CARE ROUTINES IN FTD

SELF-CARE AND ADL ROUTINES

- Engage in physical activity to restore and maintain the physical skills, strength, range of motion and coordination needed for personal and self-care.
- Consider adaptive equipment like large eating utensils, stabilization devices, or bathtub seats—or adaptive clothing for younger individuals—to help people with FTD engage successfully in self-feeding, dressing and bathing/grooming, as well as leisure activities.
- Follow the person's usual routine and schedule, based on when they are most agreeable, rather than the facility's schedule. Break up tasks if needed: e.g., bathe arms on Monday, legs on Tuesday, etc., to reduce time. A posted schedule may be helpful.
- Offer constant encouragement; maintain a calm voice and smile as individuals with FTD understand positive emotional expressions better than negative ones.
- Relax the standard of performance, rather than rushing or arguing that something is being done too slowly or incorrectly. What is most important is that the person is engaged in the activity and feeling positive.
- Set out supplies in advance, e.g. place clothes on the bed and in the order each item will be put on.
- Remove objects that are not needed for the self-care activity, e.g. only have a toothbrush and toothpaste on the bathroom counter; remove lotions, deodorant, cleaning liquids, etc.
- Remove sharp objects and poisonous liquids or other potential safety hazards from sight. Secure them in a locked area.
- Provide one-step, simple directions and allow enough time for the person to process what you are saying.
- When engaged in an activity, minimize distractions such as noise and provide enough lighting. If the group dining setting is overwhelming, provide a private area.
- Use contrasting colors that are easy to see; e.g. dark placemat on the table with a white plate.
- Perform activities in familiar environments with familiar objects; e.g. brush teeth and shave in the bathroom, rather than the bedroom.
- Arrange staff in-service trainings by occupational therapists to include hands-on demonstrations of exercise, setting up an activity and intervention techniques.

See previous issues of Partners in FTD Care for additional tips to support positive daily activities:

WINTER 2015 FOR TIPS ON CHANGES IN EATING BEHAVIOR

SUMMER 2014 FOR TIPS ON MANAGING INAPPROPRIATE SEXUAL BEHAVIOR AND PERSONAL CARE

SPRING 2014 FOR TIPS ON MANAGING AGGRESSIVE BEHAVIOR

WINTER 2014 FOR TIPS ON MANAGING INCONTINENCE