

## Case Study

### Parkinson's and Dementia

Jim is diagnosed with Dementia with Lewy Bodies (DLB), a type of Dementia that shares symptoms with both Alzheimer's disease and Parkinson's disease. It is a fast progressing and debilitating condition, in which people experience both cognitive and motor problems effecting their memory, judgement, concentration and perceptual awareness.

Routes Healthcare were approached by the local Care Commissioning Group to take over Jim's care when his existing care package failed to meet his needs. His family were not happy with the care package they had in place and felt the inconsistency in care was affecting Jim's behaviour, resulting in a number of falls and heightening anxiety levels.

Jim does not have the mental capacity to make his own decisions so we ensured a dedicated team was put into place to facilitate the most appropriate care. This involved input from Jim's family, various members of the Routes team including Clinical Governance, Branch Manager and Care-Coordinator and NHS personnel such as the District Nurse, Social Worker, Care Commissioner and GP; all working in partnership for Jim's best interests.

Due to the nature of his condition Jim requires round the clock care. His lack of insight and confusion can leave him struggling to accept the care he needs, with him often misinterpreting the carers good intentions. This can result in him becoming distressed, leading to challenging behaviour and a refusal to follow his medicine regime.

Following our in-depth assessment of Jim's complex needs and taking into account Jim's physical, psychological and social needs, a team of six was selected to deliver the care, with a strong emphasis on a consistent and person-centred approach.

A mental health specialist developed an ABC behaviour management plan (Antecedent, Behaviour, Consequence), which was implemented by our care team. Using this plan enabled the care staff to pre-empt Jim's movements resulting in a reduction in both his anxiety and the number of falls and injuries, thereby improving his safety.

Jim can experience prolonged periods of altered consciousness often seen in LBD, which impacts on his day/night routine. Routes carers engage with Jim in activities such as playing cards, reading the newspapers together, looking through family photographs etc. This stimulation has had a positive impact on his sleep quality and fatigue levels providing a better day/night routine for him.

Jim is now able to go for days out with his wife and family, supported by the carers. The changes implemented have been so positive and Jim's wife and family are much happier stating Jim's, and their own, quality of life has improved dramatically.

