Communication With the Cognitively-Impaired Client

INTRODUCTION

There are many challenges you face while working as a certified nursing assistant (CNA). Perhaps the biggest one is working with clients who are cognitively impaired.

Cognitive impairment (cognition means of or relating to conscious thinking) is a term that simply means someone has lost a large amount of his/her higher intellectual ability.

What do we mean when we use the term higher intellectual ability? We mean the ability to think and reason, the ability to use logic. We mean the ability to communicate and the power of memory. We mean all of the mental capacity that we need in order to function as human beings in our daily lives.

People with cognitive impairment have difficulty in communicating. They have difficulty in understanding what is said to them. They can, at times, become confused about whom you are, and they can be confused about who they are. They can be confused about where they are, what day of the week it is, and what year it is. People who suffer from cognitive impairment do not have the ability to think clearly and logically or they may only be able to do so once in a while.

There is no one single condition, illness, or disease that causes cognitive impairment. People with cognitive impairment may have had a stroke, they may be suffering from Alzheimer’s disease, they may have had a head injury, or it may not be known why they have lost the ability to be rational. The only certainty is that there has been some illness, disease or accident that has permanently damaged the parts of the brain that control the ability to think, concentrate, and reason.

Learning Break: Although many people with cognitive impairment are elderly, being old does not always mean that someone has a diminished mental capacity.

But regardless of why your clients have cognitive impairment, coping with this situation can be very difficult. It takes patience and compassion. Above all, as a CNA and a health care professional, you must remember that these patients do not have the ability to function and think as you do. We use our powers of thought, concentration, memory, logic, and language to cope with the world around us. For these people, those skills are absent or severely damaged. As a result, they cannot understand what they see and what you say. Many times, this will leave them frightened and confused. And more importantly, it leaves them dependent on you as a professional.

OBJECTIVES

When the student has finished this module, he/she will be able to:

1. Identify a basic definition of cognitive impairment.
2. Identify two possible causes of cognitive impairment.
3. Identify two verbal communications that should be avoided.
4. Identify the best approach for working with someone who is acting aggressively.

**WORKING WITH THE CLIENT WITH COGNITIVE IMPAIRMENT: AN EXAMPLE**

Imagine this. You come home after a long day of work. You are working the next day, so the alarm is set for 6:00 am. However, at 5:30, you wake up from a very deep sleep because someone has just turned on the lights. You open your eyes and see that there are two women in your bedroom.

You have never seen either one of these women before. You have no idea who they are, and before you can begin to get your wits about you, one of them yanks the covers off the bed, and the other one is trying to take your pajamas off.

They are speaking to you – something about how it is time to get up and get washed – but you can’t really understand what they are saying. Suddenly, a third person comes into the room. *That* person, without a word, pulls up one sleeve of your pajama top and sticks a needle into your arm and then tries to push some pills into your mouth. Then, they all team up and try and pull you out of bed. They aren’t necessarily being rough, but it is obvious that they are in a hurry.

How would you react? If someone you didn’t recognize woke you up from a deep sleep, tried to take your clothes off, stuck a needle into your arm, was pushing pills into your mouth, and trying to yank you out of bed – all while speaking a foreign language – it is safe to say that you would be very frightened and confused. It wouldn’t be unreasonable for you to resist and you might even try and defend yourself as best you could.

This illustration may seem extreme, but it’s not. Ask anyone who has worked with clients who suffer from cognitive impairment and that person will tell you a situation such as this is very common. And the confusion and difficulty in communicating with these clients can be quite frustrating.

So, make no mistake about it: working with a client who has a significant degree of cognitive impairment can often be very difficult. However, it is important to realize that these interactions are a two-way street; the situation is difficult for the client, as well. So when you are caring for someone who is confused, uncooperative – perhaps even aggressive – it is absolutely natural to feel frustrated. But remember: the client is doing the best he/she can and their feelings of confusion and fear are probably just as intense as your feelings of frustration.

**Learning Break:** Someone with a significant degree of cognitive impairment may not know why they can’t understand the world around them. But that person often does know, on some level, that they are impaired. They sense that their ability to cope is limited, and as a result, they are often frightened and tentative when interacting. *They feel a bit defenseless, and they have a good reason to feel that way.*

**A PRACTICAL APPROACH TO WORKING WITH CLIENTS WHO HAVE COGNITIVE IMPAIRMENT**
Fortunately, with the proper attitude and some simple techniques, working with these situations doesn’t have to be painful for you or your clients. Here are some basic tools that can help you when you are working with a client who has cognitive impairment.

- **Patience**: You will need a lot of patience. The natural instinct when interacting with another adult is to assume that he/she is at your level of emotional and intellectual ability. This is not true of the client with cognitive impairment. This is a simple idea to understand, but many people have difficulty remembering this. But think back to the last time you interacted with a small child. You did not expect the child to act like an adult, and you did not expect the child to understand complex ideas or new and unusual situations. Knowing all this, you made adjustments in the way you communicated and the way you treated the child – and the responsibility for making these adjustments fell on you. When you are working with a client who has cognitive impairment, you are, in one sense, the adult. You need to be patient.

- **Non-verbal communication**: Most of us think of communication as what we say or the words we use. But much of our communication is non-verbal. The tone of your voice, the loudness or softness of your speech, the speed at which you talk, the way you stand, and where you stand when you speak to someone – all of these are forms of non-verbal communication. People with cognitive impairment may have lost the ability on an intellectual level to understand what you are saying. But their other senses are completely intact. They will, often, respond to how you speak to them rather than what you are saying. It is often best to stand where the person can easily see you. Making eye contact is important. Avoid touching the person until you are sure he/she won’t feel threatened by physical contact. Never pull or yank on someone if you want that person to move, change positions, stand up, etc. When you first approach someone, try and do so slowly; don’t rush at them.

- **Verbal communication**: You don’t have to be talk down to these people. However, until you have established otherwise, it is sensible to be gentle when talking to these clients. Speak slowly and clearly. Try and keep your language at a basic level. Give them time to process what you are saying, and try and remember that it may take them far longer than you imagine to completely grasp the meaning of what you have said. It also helps to keep your communication simple and direct. Don’t be afraid to repeat what you have said, and don’t be surprised or frustrated if you have to. And don’t forget: although you may remember something that was said to you earlier in the day or earlier in the week, these clients may forget something that was said to them just an hour ago. Constant repetition and reinforcement will help clients to remember. Do not speak quickly, and make sure that you use simple language.

**Learning Break**: It takes everyone time to get used to a new idea, and change isn’t easy no matter who you are. But for the person with cognitive impairment, even ordinary situations in day-to-day life can represent new ideas and change. You can recognize people and situations that you are familiar with. But many times, for these clients, even
people and places they should know well may seem strange and unknown. They are constantly challenged by a world that seems new and different from moment to moment. Imagine how difficult it must be to be constantly being “re-introduced” to the world around you.

• Flexibility: Perhaps nothing is more important when working with a client who has cognitive impairment than flexibility (And the opposite is also true: nothing is more harmful when working with these clients than being stubborn or rigid). What do we mean when we use the term flexible? It means simply that you adjust to the demands of the situation. It means that you are able to change your plans. It means that you realize what is/isn’t important, and that you know that getting the task done is far more important than how you do it.

• Priority setting: All too often, health care professionals see their job as a series of tasks that need to be accomplished. That is true, but working with people is very complex. Many times it is simply not possible to do everything you need to do and want to do in the way you want to and when you want to. Situations change and people change. If you are not able to clearly see what, at any given time, is the most important priority, your job will be very difficult. Ask any experienced health care professional and he/she will tell you: in order to function efficiently, it is very important to know and decide what is most important, but you also need the ability to see that the situation has changed and to understand that a new, more important priority has replaced the previous one.

• Regular routines: Because the person with cognitive impairment has difficulty remembering people, places, and situations, he/she can be helped by establishing reliable routines. If it is possible, try and arrange for the same CNA to work with the same clients. Try and find a routine for daily activities that is simple, does not change, and will be easy to remember for the client. Be careful to slowly introduce changes into the client’s daily routine, and try and explain these changes as clearly as possible. And if you tell the client that you are going to do something, make sure that you follow through on your promise. The client may surprise you by remembering what you said (e.g., you will in his/her room at 9 in the morning to help them get dressed) and may become disoriented if you do not keep your word.

Example: Imagine that you need to assist a client in getting out of bed and getting dressed. You are very busy and you have a lot of other things you need to do for other clients, as well. But the client you are working with is resisting all of your efforts. He doesn’t want to get up, and he doesn’t want to get dressed. You can’t understand why, and he can’t tell you. You can try and force the issue, but when you do, he begins to get agitated. You need to determine what the most important priority is, and what the best way to accomplish that goal is. Perhaps in this situation you have more time than you think. You might be able to sit quietly with this person for a bit and give the person a few minutes in which to adjust. Perhaps you can accomplish the task in steps; this will also give the client time to adjust. Also, you might be able to move to another task with another client. It may not be important – really important – that the client get dressed
right at that time you had planned. Always ask yourself: Can you change your priorities to make your day and the clients run a bit smoother?

**WORKING WITH THE CLIENT WHO BECOMES AGGRESSIVE**

Most of us are able to sit back and assess a new situation. We can decide if we like what we see, whether or not it is safe, and if we are not comfortable, we can simply avoid it. And as we gain experience in the world, this process becomes easier because we have encountered similar situations before: the learning process has become more efficient.

But for the patient with cognitive impairment this is not the case. Because of their impairment, many situations – even ones they have encountered many times before – can seem new. Like everyone else, this can make them anxious, but *unlike* most people, they cannot draw on their past experiences to interpret what is happening now. And they cannot quickly assess what is happening because of their impairment. Not surprisingly, they feel vulnerable and afraid. And many people, in those situations, will feel they need to defend themselves and become aggressive.

It can be very difficult to work with someone who is confused and aggressive. You need to keep that person safe, but you must also protect yourself and others. Fortunately, with some common sense and a little planning, you can accomplish these goals.

- Do not indiscriminately use force: Using force can often backfire. Certainly, there are times when you need to physically restrain someone. But when and how to do so should be clearly outlined in the policies of the institution in which you are working. Make sure you familiarize yourself with them before these incidents happen.
- Stay calm: It is natural to become excited when someone is acting aggressively. But many times, if you allow that person to express the anger, the possibility of physical violence can be avoided. Most people have a natural aversion to harming another person, so give the person who is angry the opportunity to be verbal rather than physical.
- Use reason: Try and remember that the person who is acting aggressively is not doing so to harm you. That person believes that he/she is trying to protect themselves. Don’t give them another reason to feel threatened. Be quiet, rational, and calm.