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Dementia Oversight Team.Care Options Meeting
Resident Review: Describing Needs-Driven Behavior (NDB) Expressions

Resident's Name: _____ **Date of Review:** _____

1. What is/are the NDB(s)? _____

2. Describe the NDB(s):

a. What did he/she do? _____

b. What did he/she say? _____

c. What did you do and say before and after the NDB? _____

3. Why is this NDB a problem? (Choose all that apply.)

Safety of this resident

Safety of other residents

Safety of caregivers

Resident family/interested party has recognized a change in mood or behavior

Other _____

4. When does the NDB occur? Is it documented? Yes No (Circle choice)

a. What time(s) of day? _____

b. What day(s) of the week? _____

c. When trying to provide assistance with activities of daily living (Describe) _____

5. How often did the resident try to communicate an unmet need? Is it documented? Yes No

a. How many times in the past week? _____

b. How many times the past month? _____

6. Where does the NDB occur? Is there a particular room/setting within the facility? Is it documented? Yes No

During activities

Dining room

Own room

Other location(s) that may trigger a NDB (Describe) _____

7. Do you recognize any patterns in the NDB? (Choose all that apply.)

The NDB frequently happens at the same time of day.

The NDB frequently happens in the same location.

The NDB frequently happens with the same caregiver.

The NDB frequently happens *before/ during/after* family members/other parties visit. (Circle choice)

Other _____

8. Describe what happens right before the NDB occurs: _____

9. How do staff members react when the NDB occurs?

- They perceive the NDB is not able to be determined/helped.
- They do not respond to the NDB at all—they have become desensitized to the communication attempt.
- They attempt to redirect the resident immediately by reacting with care approaches not consistent with the care plan.
- They refer to the care plan for guidance on appropriate care approaches developed by the interdisciplinary team.
- They collaborate with other staff members for assistance.
- Other _____

10. What is the environment like where the NDB occurs?

- There is a lot of stimulation (television, noise, people).
- There is no/very limited stimulation.
- We changed this resident’s room/environment recently.
- Other (Describe) _____
- Changes we propose to the environment to meet the resident’s needs: _____

11. Does the activity programming match the resident’s prior daily home routine and social history?

- Yes (Explain) _____
- No (Explain) _____
- This resident could benefit from reviewing *101 Activities for Residents with Dementia* and matching preferences more closely based on social and professional history.

Source material: Adapted from randomized trials and the NIH Resources for Enhancing Alzheimer’s Caregiver Health (REACH I and II).

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