**Dementia and Behaviours**

Multiple Choice Questions (with Answers)

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## Segment 1 – Dementia and behaviours

1. Dementia is an umbrella term used to describe what?
	1. Any acute or chronic injury or disease that impacts the memory
	2. Any injury or disease that impacts brain function
	3. **Any chronic disorder of mental functioning caused by physical changes in the brain**
	4. Any cognitive impairment affecting older adults
	5. It is a common misconception that Dementia is an umbrella term for all cognitive issues however it is a specific disease causing a decline in cognitive ability
2. How does dementia impact behaviour?
	1. It does not impact behaviour, it only impacts memory
	2. Due to the impact on memory people forget how they would normally have responded to a situation
	3. It causes heightened core instincts such as fight, flight, and freeze
	4. **It changes the brain therefore making it difficult to behave in a way they normally would**
	5. As the disease takes over the brain it causes and mood-swings
3. For a person living with dementia, what can affect their behaviour?
	1. Change in environment
	2. Their health
	3. Medications
	4. Memory loss and confusion
	5. **All of the above**
4. Fill in the blanks: Behaviour is very \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The way each person sees and reacts to the circumstances of their world will determine their patterns of \_\_\_\_\_\_\_\_\_\_\_\_\_\_.
	1. **Individual, behaviour**
	2. Individual, cognitive impairment
	3. Fluid, behaviour
	4. Primal, cognitive impairment
	5. Primal, behaviour
5. Behaviour patterns have meaning; the challenge for a support worker is to what?
	1. Modify their behaviour
	2. **Understand their significance and why they are happening**
	3. Retrain the person to use appropriate behaviours
	4. Control the persons outbursts
	5. All of the above
6. True or False: Behaviour changes may be related to the condition itself, or to other influences such as changes in the brain or another part of the body.
	1. **True**
	2. False
7. Which of the following may impact on the way a person with dementia responds?
	1. Physical pain or changes
	2. Cognitive pain or changes
	3. How a person is providing care
	4. What is going on in the persons environment
	5. **All of the above**
8. For people with dementia, behaviour is often an attempt to what?
	1. Regain power and control in their life
	2. **Communicate**
	3. Get attention
	4. Be difficult for their own entertainment
	5. Behaviour is involuntary and reactionary, it is not an attempt do anything
9. Effective ways of managing a persons’ behaviour is developed how?
	1. Using grounded theory
	2. Years of research and understanding behaviour patterns have formulated general behaviour management plans
	3. With a plan that utilises both medication, rewards, and consequences
	4. **Trial and error to see what works for the individual**
	5. It is unethical to manage a persons’ behaviour and a breach of their rights to express themselves
10. Often, the behaviour expressed is an issue for who?
	1. The person suffering from dementia
	2. The family visiting the person
	3. **The person offering care and support**
	4. Management
	5. All of the above
11. Which of the following statements is NOT true?
	1. You should never match aggression with aggression when dealing with a heightening situation
	2. A person with dementia should be given positive support
	3. You should always use a calm approach
	4. **Sometimes using a firm loud voice will snap them out of their behaviour**
	5. Distraction can often work well to calm the situation

## Segment 2 – Types of behaviour

1. Which of these is NOT a common behaviour for people with dementia?
	1. **Tearfulness**
	2. Wandering
	3. Aggression
	4. Hoarding
	5. Rummaging
2. Which of the following are common behaviours associated with dementia?
	1. Sun-downing
	2. Sexualised behaviour
	3. Catastrophic reactions
	4. Repetition
	5. **All of the above**
3. Why would being in a new place cause a person to wander?
	1. They are figuring out their new environment
	2. **They are looking for what is familiar such as their old environment**
	3. They have got lost in their new space and are trying to find their way back
	4. It is a primitive response and they are claiming their new environment
	5. The new environment is interesting and intriguing, they have been stimulated
4. Wandering may be a sign a person needs more what?
	1. Medication
	2. Relaxation spaces
	3. **Exercise**
	4. Support
	5. Entertainment
5. When a person is wandering and is away from the people and places they know, they will search for what?
	1. **A person or object that is familiar**
	2. Road signs to point the way
	3. Police or emergency person
	4. A beach or public spot they find comforting
	5. They will forget what they are looking for and keep wandering
6. Some people with dementia to get their time clocks interfered with which means they confuse what?
	1. When they are hungry and tired
	2. **Day and night**
	3. When they should take their medication
	4. When morning starts
	5. How long they should sleep for
7. True or false: Agitation and Pain will not cause people to wander, they are more likely to hide
	1. True
	2. **False**
8. There are many reasons why a person wanders. A support workers role is to what?
	1. **Try and find out why they are wandering**
	2. Follow them while they wander
	3. Distract them from wandering
	4. Stop them from wandering
	5. Report them to the manager
9. You can help increase a person’s safety by ensuring they are wearing what?
	1. A high visibility vest
	2. An incontinence pad
	3. **Identification**
	4. A jacket or wet weather gear
	5. A device that has GPS tracking
10. Which statement is NOT true regarding keeping people who want to wander safe?
	1. It is a good idea to disguise exits so they are not tempted to leave
	2. Having sensor pads that get triggered when people exit is a way of keeping track of who is leaving
	3. Having a secure outdoor area is essential for supporting people with dementia
	4. **It is a good idea to have raincoats and outdoor gear in view so they will get distracted putting these on to give you time to stop them**
	5. You can tell local dairies and shops so they can keep an eye out for them and know who to contact if they see them.

## Segment 3 – Managing aggressive behaviour

1. How many types of aggression is there?
	1. One
	2. **Two**
	3. Three
	4. Four
	5. Five
2. Finish the sentence: For every behaviour there is a What?
	1. Reaction
	2. Consequence
	3. Emotion
	4. **Reason**
	5. Motive
3. What is physical aggression?
	1. **Any behaviour that is displayed in a physical manner**
	2. Any behaviour that results in physical injury
	3. Threat or action of physical violence
	4. When a person needs to physically release their anger
	5. Causing physical harm to self or others
4. What is verbal aggression?
	1. Use of threats to intimidate people
	2. **Use of words in an aggressive manner**
	3. Bullying or belittling a person using words
	4. Any comments that offend someone
	5. There is no such thing as verbal aggression
5. Aggression is often due to frustration, anger or what?
	1. Control
	2. Disturbance
	3. Irritation
	4. Domination
	5. **Fear**
6. The key to working with people who may be aggressive is to do what?
	1. Have a good safety plan
	2. Treat them with respect
	3. **Prevent the behaviour in the first place**
	4. Have strong boundaries and consequences
	5. Give them space
7. What do you do after an aggressive outburst?
	1. **Assess the situation that led to the outburst**
	2. Enforce consequences for the behaviour
	3. Take a break
	4. Create a safety plan
	5. Give sedative to person
8. When working with an aggressive person, you need to remain what?
	1. Strong
	2. Stoic
	3. Confident
	4. Happy
	5. **Calm**
9. If an aggressive person is not causing harm to themselves or others what should you do?
	1. Encourage them to get involved in an activity
	2. Try and distract them
	3. Ask them what is wrong
	4. **Leave them alone**
	5. Offer them some food and drink
10. True or false: When you are working with an aggressive person, it is most important that you work in a way that keeps yourself safe
	1. **True**
	2. False

## Segment 4 – Hoarding and rummaging

1. Why might a person rummage?
	1. **They may feel driven to find something they feel is lost**
	2. They have forgotten what they are looking for
	3. They like feeling the different textures
	4. They have to rummage to find things as they often live in a mess
	5. All of the above
2. Rummaging often makes a person feel what?
	1. Ashamed
	2. Busy
	3. In control
	4. **Purposeful and useful**
	5. Calm
3. The urge to hoard is a common response to the need for what?
	1. Possessions
	2. **Security**
	3. Control
	4. Knowledge
	5. Belonging
4. Who would find a rummage box useful?
	1. Staff to keep people busy
	2. It should be provided to all people with dementia
	3. **A person who has excessive hand activity**
	4. A person who loses their items easily
	5. A person who likes to collect things
5. What should you do about items that are frequently misplaced?
	1. Don’t worry about it, they will forget, then be excited when they do find them
	2. Tie them to the rummage box
	3. Find other things to put in the box
	4. It is the family’s responsibility to sort misplaced items
	5. **Keep a spare set**
6. When a person has lost an item what should you do?
	1. **Get to know where a person puts their treasured items and check there first**
	2. Get the family to supply a new one
	3. Don’t worry about it, they will forget about it soon
	4. Ask them where they have been so you can trace their steps
	5. Give them something else to do
7. You can often keep a person busy be getting them to do what?
	1. Clean their room
	2. Giving them new things to fiddle with
	3. Learning a new skill
	4. **Give them a selection of things that need sorting**
	5. If they are not harming anyone leave them to horde and rummage
8. Who should make up a rummage box?
	1. The person themselves
	2. **The family are often best at this**
	3. You the support worker
	4. Management
	5. An occupational therapist

## Segment 5 – Repetitive behaviour and vocalisation

1. What is repetitive behaviour?
	1. Repeating words
	2. Doing the same thing over and over
	3. Asking the same question in a short time frame
	4. Following another person around
	5. **All of the above**
2. What is vocalisation?
	1. **Using the voice for expression**
	2. Asking questions
	3. Repeating words
	4. Noises that have no meaning
	5. Talking loudly
3. Which of these is NOT an example of vocally disruptive behaviour?
	1. Screaming
	2. Crying
	3. **Repeating questions**
	4. Noises that have no meaning
	5. Talking loudly and repetitively
4. What causes a person to be vocally disruptive?
	1. They like to be annoying
	2. **They are unable to express their needs, thoughts and wishes**
	3. It is a compulsive behaviour they cannot control
	4. They do not realise they are being disruptive
	5. They are trying to get attention
5. What is psychological distress?
	1. Pain within the body
	2. When a person has experienced trauma
	3. When a person feels anxious or stressed
	4. **A range of symptoms or experiences that the person finds troubling or confusing**
	5. Experience of negative emotions such as sadness and fear
6. Fill in the blank: It is important to look for \_\_\_\_\_\_\_\_\_\_\_\_\_\_ behind the words.
	1. The behaviour
	2. **The feeling**
	3. The action
	4. The tone
	5. The body language
7. When dealing with someone asking questions repetitively, what should you avoid?
	1. Answering the question differently
	2. **Reminding them they already asked the question**
	3. Turning the question into a discussion
	4. Allowing them to ask the question again
	5. All of the above
8. What can you increase as a way of managing repetitive behaviour?
	1. **Social interaction**
	2. The number of objects they have in their room
	3. The time a support worker is working with the person
	4. The time they can spend watching TV
	5. The medications they are on
9. Fill in the blank: To meet the needs of each person, you need to be able to change what accordingly? - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	1. Physical contact
	2. Food intake
	3. Stimulation
	4. Social contact
	5. **All of the above**

## Segment 6 – Catastrophic reactions and sun downing

1. What are catastrophic reactions?
	1. When a person becomes catatonic
	2. When the reaction is such that it causes damage to person and property
	3. When the reaction is such that it injuries the person or someone else
	4. **Overreactions to ordinary situations that result in responses or outbursts**
	5. When the reaction is such that there is a significant safety concern
2. Which of the following is NOT an example of catastrophic reaction?
	1. Shouting
	2. Crying
	3. **Sleeping**
	4. Making unreasonable accusations
	5. Displaying a high level of agitation
3. What causes catastrophic reactions?
	1. Stress
	2. Feeling out of control
	3. Frustration at not being able to communicate
	4. Underlying illness or health issue
	5. **All of the above**
4. The best thing a support worker can do in regard to catastrophic reactions is what?
	1. Hold the person
	2. Isolate the person
	3. **Avoid the reaction in the first place**
	4. Reducing choices
	5. Let the person have the reaction and tire themselves out
5. Which of the following statements is NOT true?
	1. You can often avoid a catastrophic reaction by having a good routine
	2. **Catastrophic reactions are unpredictable and unmanageable**
	3. Catastrophic reactions may occur quickly and leave others feeling afraid
	4. It is important to figure out what lead to a catastrophic reaction
	5. You can avoid a catastrophic reaction by doing a task the same way each time
6. What tool can you use to understand what might trigger a catastrophic reaction?
	1. **A diary to document what has happened and when**
	2. Positive attention
	3. A debriefing interview with the person and other staff
	4. Video surveillance
	5. Behaviour modification techniques
7. What is sun downing?
	1. **The term used to describe increased confusion, restlessness, and agitation that people living dementia may experience in the evening and sometimes into the night**
	2. The term used to describe decreased confusion and increased focus that people living with dementia may experience in the evening and sometimes into the night
	3. The term used to describe when a person with dementia has become more confused than lucid
	4. The term used to describe the progression of dementia
	5. The term used to describe a person at the end of their life where it is expected they will die within the next few weeks
8. Why does sun downing occur?
	1. Evidence suggests the person gets energised throughout the day causing restlessness and agitation
	2. **Evidence suggests it’s caused by severe damage to the parts of the brain that control the internal body clock**
	3. Evidence suggests there is a chemical reaction within the body linked to the gravitational pull of the moon, for people with dementia the chemical reaction heightens mood and confusion
	4. Evidence suggests there is an increased serotonin release in the afternoon linked which increased tiredness, this appears as agitation in people with dementia
	5. Evidence suggests it is most likely linked to a support workers energy at the end of shifts and shift changes that people with dementia are picking up on causing agitation
9. How can you manage sun downing?
	1. **Provide Stimulating activities throughout the day without exhausting the person**
	2. Provide stimulating activities throughout the day that tires the person out
	3. Give the person additional naps during the day
	4. Put the person in their room where they will not disturb anyone in the afternoon
	5. There is nothing you can do to manage sun downing, it is a part of dementia

## Segment 7 – Sexually inappropriate behaviour

1. Why does inappropriate behaviour occur?
	1. **Behaviours are connected to damage in the frontal and temporal lobes of the brain**
	2. People with dementia stop caring about social cues
	3. Behaviours are connected to damage in the Cerebella cortex
	4. Because the person is a misogynist
	5. Behaviours are connected to damage in the thalamus
2. Which of the following statements is true?
	1. People with dementia often feel a sense of liberation from social expectations and enjoy being more promiscuous
	2. **There is often an innocent explanation, such as removing all their clothes because they are too hot**
	3. People with dementia are more sexualised due to the disease impacting the primitive parts of the brain
	4. People claim it is linked to dementia, however often older adults are less aware of the impact of sexual assault and are inappropriate because of the era they grew up in
	5. Sexual inappropriateness is not linked to stress or feelings of loss of control or inadequacy
3. Who should you report inappropriate behaviour to?
	1. The police
	2. Their family
	3. Age concern
	4. **Healthcare professional**
	5. You do not need to report it
4. It is a good idea to keep a journal of inappropriate sexual behaviours and what?
	1. Consequences given
	2. Who the behaviours are towards?
	3. **Possible triggers**
	4. Results of behaviour
	5. All of the above
5. Scenario: You work in a retirement home and you walk into a persons’ room and they are on their own behaving inappropriately, what do you do?
	1. Tell them to stop immediately
	2. Write an incident report
	3. Distract them from what they are doing and engage them in an activity
	4. **Leave them alone, it’s up to them what they do there**
	5. It is up to the support worker to set the rules according to their comfort levels
6. Fill in the blank: It is important to remember it is the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, so do not take it personally
	1. Age and stage
	2. Persons’ poor impulse control
	3. Primitive brain
	4. Right of the person
	5. **Disease**
7. True or false: A persons with dementia displaying inappropriate behaviour is more likely to upset you the support worker than the person doing the behaviour
	1. **True**
	2. False
8. Which of the following is a true statement on how to deal with someone displaying inappropriate behaviour?
	1. Remain calm and do not chastise the person
	2. Avoid showing shock or irritation
	3. If you are able to figure out triggers you will be able to prevent the behaviour
	4. It can help to distract the person or redirect them to an activity
	5. **All of the above**

## Segment 8 – Triggers for behaviour

1. What type of dementia affects the part of the brain that controls thinking and movement?
	1. Alzheimer’s
	2. Vascular
	3. **Lewy Body**
	4. Parkinson’s
	5. Frontotemporal
2. What part of the brain controls behaviour?
	1. **Frontal lobe**
	2. Hypothalamus
	3. Medulla
	4. Cerebella cortex
	5. Temporal lobe
3. When you are speaking to a person with dementia, how should you position your body?
	1. Standing over them
	2. Looking up at them
	3. To the side of them
	4. **Facing the person**
	5. There is no set way that is best
4. Too much stimulation can lead to what?
	1. Sleepiness
	2. **Agitation**
	3. excitement
	4. Fear
	5. Inappropriate behaviour
5. Too little stimulation can make the person feel what?
	1. Angry, bored, and frustrated
	2. Apathetic, frustrated, and tearful
	3. Tired, unresponsive, and bored
	4. Scared, lonely and frustrated
	5. **Apathetic, unresponsive, and frustrated**
6. If a person’s behaviour changes, what should you do?
	1. Ask them what is wrong
	2. Help them to their room to lay down
	3. **Look to see what is going on in the environment that is not making sense to them**
	4. Tell the person to calm down in a strong, affirmative voice
	5. Call their family to see how they would like you to handle the situation
7. Understanding there are triggers for a way a person behaves will help you what?
	1. Know how best to get them to comply
	2. Eliminate all triggers
	3. **Understand those in your care better**
	4. Cope with their unwanted behaviour when they do it
	5. All of the above
8. What environmental changes can impact a persons’ behaviour?
	1. Noise
	2. Light
	3. Activity levels
	4. **All of the above**
	5. Environment will not impact behaviour

## Segment 9 – Triggers for behaviour

1. If a person with dementia cannot see you and see your facial expressions what will happen?
	1. They will panic and become afraid
	2. They will act out
	3. It will not bother them
	4. **They will not respond to you**
	5. They will become angry and hostile
2. When might it be appropriate to do a medication review for a person with dementia?
	1. **If you are noticing changes in their behaviour**
	2. A person with dementia should have a medication review every 2nd week
	3. A person with dementia should have a medication review every month
	4. If you start getting inappropriate behaviour
	5. Whenever the family requests one
3. If a person feels embarrassed at having to accept help getting bathed or other daily cares, how are they likely to act out?
	1. They will tell you they are embarrassed
	2. They will become quiet and compliant
	3. **They will become aggressive and hostile**
	4. They will go red in the face and hide behind a towel
	5. They will cry
4. When a person is angry that they are unable to do things for themselves, what can you do that is a major factor in balancing their frustration levels?
	1. Remind them that it is a normal part of aging
	2. **Maintain the person’s independence whenever possible**
	3. Help them then afterwards distract them
	4. Sing a song they like or talk about things they like while doing the cares to distract them
	5. There is not a lot you can do; you have to allow them to grieve their loss of function
5. True or false: You should always avoid getting into conflict with a person with dementia
	1. **True**
	2. False
6. Scenario: You are scheduled to shower a person, but they do not want a shower, what should you do?
	1. Make them shower, it is important for their health and wellbeing
	2. Give them a sponge bath instead
	3. Ask a co-worker to help you get them in the shower
	4. **Give alternative solutions or try again later**
	5. Try and convince them to get in the shower in the allotted time frame
7. When talking to a person or giving their cares, it always needs to be done with what?
	1. **Compassion and respect**
	2. Respect and sympathy
	3. Compassion and efficiency
	4. Respect and efficiency
	5. Sympathy and efficiency
8. Which statement is true about cultural impacts on people with dementia?
	1. Always speak slowly in simple language so they can understand
	2. They may end up losing weight and become under nourished through loss of appetite as they get used to new flavours and foods
	3. Culture can affect communication through language as they may misunderstand what is being said or not even understand what you are saying at all
	4. Knowing the cultural background of the person living with dementia is important in

determining the kind of support that will be provided

* 1. **All of the above**

## Segment 10 – Steps for managing behaviour

1. When thinking about management of behaviour it is important to remember that every behaviour has a what?
	1. Consequence
	2. **Solution**
	3. Connection to life events
	4. ‘Point of no return’
	5. Reaction
2. With behaviour management what is the first thing you need to do?
	1. **Define the problem**
	2. Observe the behaviour for triggers
	3. Discuss the problem with the family
	4. Look at strategies that have worked in the past
	5. Create a diary to document the behaviour
3. Which of the following is a contributor to behaviours?
	1. Medications
	2. Environment
	3. Physical health
	4. Mental health
	5. **All of the above**
4. Whose job is it to figure out the solution to the problem?
	1. **It is a team effort**
	2. The persons
	3. Yours as the support worker
	4. Management
	5. The family
5. Why might it take longer for a person with dementia to react to information given to them?
	1. They have forgotten what you said
	2. They don’t understand they are supposed to respond
	3. **They have reduced neurons in their brain**
	4. They are old and it takes older adults longer to do things
	5. People with dementia don’t like to talk and need prompting to do so
6. You can minimise reactions by always keeping a sense of safety, how is this achieved?
	1. By using PPE
	2. By working with another support worker so there are two workers to a client
	3. Talking quietly and calming in a reassuring tone
	4. **By practising consistency and continuity without changing routine**
	5. Safety doesn’t help minimise reactions
7. When your client is having a reaction with their medication what is something you should consider?
	1. Are they taking the right medication?
	2. Is this a new medication to them
	3. Are these pills actually required?
	4. Has the correct dose been given?
	5. **All of the above**
8. Where should you document behaviours?
	1. On their medication chart
	2. On their personal plan
	3. **On a behaviour log**
	4. On an incident form
	5. You do not need to document behaviours

## Segment 11 - Strategies for change

1. In the acronym PIECES, what does the P stand for?
	1. Plan in Place
	2. Places that trigger
	3. Pain
	4. **Physical cause**
	5. Physical ability
2. Which of the following is an example for an Intellectual cause of behaviour?
	1. They are in pain
	2. They have been triggered by something
	3. **Being frustrated with not having the ability to communicate**
	4. They have been reminded of a grief or loss
	5. A persons’ ability to carry out a task
3. In the PIECES acronym, what does the E represent?
	1. **Emotional cause**
	2. Emotional intelligence
	3. Emotional capacity
	4. Emotional regulation
	5. Emotional breakdown
4. A persons’ ability to carry out a task is under what category in the PIECES analysis.
	1. Emotional intelligence
	2. **Capability**
	3. Capacity
	4. Intellectual ability
	5. Social ability
5. Personal experiences style of support and culture are all types of what causes for behaviour?
	1. Capabilities
	2. Physical
	3. Environmental
	4. Emotional
	5. **Social**
6. When working to avoid triggers in the environment, you need to be alert to what?
	1. **Upcoming noises or events that might trigger the person**
	2. How the person is coping with being supported to do their ADLs
	3. Whether they are in pain or have an underlying health issue
	4. Whether they are coping and behaving with events that day
	5. What is going on for the person emotionally
7. What is the purpose of using “time out”?
	1. To punish the person for misbehaving
	2. To stop them from upsetting others
	3. **To give the person space from an overwhelming situation**
	4. For you to gain control over a potentially serious situation
	5. So the person learns the behaviour is unacceptable
8. In order for you to be able to cope with behaviours, you need to be able to do what?
	1. **Manage your stress**
	2. Control the situation
	3. Be highly trained
	4. Avoid the behaviour
	5. Supress your emotions at work
9. What is a debrief?
	1. A type of discipline meeting as it is felt you did not handle a situation correctly
	2. An investigation to find out who is at fault for a situation happening
	3. **An interview or discussion about an event after it has happened**
	4. An interview or discussion about an event that is about to take place
	5. A type of risk assessment for a situation that could potentially arise
10. Each person should have what in order to guide protocols around behaviour?
	1. A standardised behaviour plan
	2. A medication plan
	3. A copy of expected behaviours policy
	4. **An individual plan**
	5. An agreement around behaviours and consequences

## Segment 12 – How to use strategies for managing behaviour

1. Supporting a person living with dementia requires good what?
	1. Observation skills
	2. Creativity
	3. Resourcefulness
	4. Patience and understanding
	5. **All of the above**
2. When working with a person who has dementia, we can encourage positive responses how?
	1. By asking questions and expecting answers
	2. By being direct and creating boundaries
	3. By Engaging them in activities
	4. **By the way we speak and the body language we use**
	5. By being positive ourselves
3. Scenario: The person you are working with is resisting your support and is starting to become aggressive, they are not causing harm to themselves or to others, what should you do?
	1. Remind them they need to have cares done and you only have so long you can spend with them
	2. **Leave them alone to calm down, and try again later**
	3. Put them into their room so they can calm down
	4. Let them know they are beginning to upset people and should calm down
	5. Keep trying, change your tone of voice
4. When you are doing cares, which of the following sentence is the most appropriate to use with a person who has dementia?
	1. Begin washing their face and say “There, doesn’t that feel nice”
	2. Begin washing their face and ask them questions to distract them from what you are doing
	3. Before washing their face say “I’m going to use this cloth to wash your face so that you are all clean, wont that be nice” to remind them of what you are doing and why
	4. **Before washing their face say, “I am going to wash your face now” and show them the cloth, use positive tone of voice**
	5. Smile nicely at them, use your body language to convey that you are a nice person and wash their face, you do not need to use words, maybe hum, or sing if they like music
5. How do you approach a person with dementia?
	1. The same as you would anyone else
	2. **By ensuring they can see you as you approach**
	3. From the side so that you can step away easily
	4. Begin talking to get their attention as you approach
	5. There is no set guideline, just however you feel comfortable
6. You will be able to ‘read’ a person with dementia best when you do what?
	1. Continue with professional development
	2. Learn by mistakes
	3. Read their personal plan
	4. Gain a better understanding of dementia
	5. **Get to know the person better**
7. True or false: It is essential that you believe in and respect the right of the person to make choices within their abilities.
	1. **True**
	2. False
8. Fill in the blank: You need to adjust \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to the person’s rhythms.
	1. Your behaviour
	2. The plan
	3. The room or environment
	4. the support you provide
	5. **Your actions**
9. When working with people who have dementia routines need to be what?
	1. Firm
	2. Fixed
	3. **Flexible**
	4. Consistent
	5. Completed