

WHY PAC SKILLS MAKE A DIFFERENCE

*Focusing On Positive Physical ApproachTM
(PPATM) And Hand-Under-HandTM (HuhTM)*

Contributed by Dan Bulgarelli And Kelly Fenish

Imagine if you will, sitting in a room that looks vaguely familiar. You see people moving about that are all dressed alike though you don't know who they are. Even still, you are pretty sure you don't like them. Something in the back of your head tells you that the last time one of them approached you they tried to hurt you.

Out of nowhere, one of them is by your side and telling you something. They talk too fast for you to really understand but you are pretty sure you heard the word shower. You don't want to take a shower right now. Heck, you just had a shower this morning, you are sure of it. This person won't listen and is now pulling you up and dragging you away. What are you supposed to do? You don't know who they are or where they are taking you. You start to fight; you won't go down without a struggle. You start yelling to try and get someone else's attention to help stop this. When that doesn't help you start to hit, kick, bite... anything to get this person to stop hurting you. You see someone coming, but it's someone else in a uniform and now they are on the other side of you, holding your other arm and helping, actually helping this person that is dragging you away. They get you into a room and start to take off your clothes. They are assaulting you so you continue to scream hoping someone will hear you but your screams become sobs as they pull you into a smaller room. Soon water is streaming down on you and their hands are all over you, touching you... everywhere. You continue to sob uncontrollably as there is nothing you can do to stop them and no one is coming to help. You don't know why they are doing this to you. After a while the water stops and they put clothes back on you. You are physically and mentally spent as they walk you back to the room. You don't understand why nobody helped. You don't understand why they would do this to you.

Now you find yourself in a room that looks vaguely familiar. You see people moving about that are all dressed alike though you don't know who they are. You don't recognize them but you know that you don't like them. You don't know what it is they did to you but you know they tried to hurt you...

Now, you and I know the people in the uniforms are caregivers in an assisted living facility/memory care unit/skilled nursing facility. We also know that they are not attacking or trying to hurt anyone. In fact, they care deeply for their residents and they are doing the best that they can to keep them healthy. They know that if a resident doesn't shower it can create an unhealthy situation for her. So how do we accomplish the tasks needed to keep our loved ones healthy while making sure they feel safe?

Kelly Fenish is a PAC Mentor and an early adopter of Teepa Snow's Positive Approach™ philosophy of keeping the relationship first and assisting our residents/loved ones with their care instead of doing it to them.

"When I started to adopt Teepa's methods, particularly the Positive Physical Approach™ (PPA™) and Hand-under-Hand™ (HuH™) it was like night and day. The difference was remarkable for me and for the residents. One woman stands out in my mind, I'll call her Dorothy, but my experience with her was like many others. I really liked Dorothy but I knew she wasn't always happy to see me because we were giving her care whether she wanted it or not. She yelled, kicked, hit, bit, and anything else she could to keep us from showering/feeding/toileting her. It wasn't fun for her and I didn't like doing it to her, but that was my job. I had to get her showered/fed/toileted or I was going to be in trouble and I knew it was good for her.

When I started to learn from Teepa, she helped me see things from Dorothy's point of view and everything changed for me. I loved learning PPA™ and HuH™ but even still I was a bit skeptical about how well it would actually work, but I gave it a shot. The next time I saw Dorothy I approached her from the front, greeted her, and waited for her permission to come closer. This time I didn't tell her I was taking her to shower but instead I chatted with her for a moment. I complimented her on her blouse and asked her how she was doing. Immediately, I could see her relax which allowed me to relax. When it was time to get moving I gave her two choices, either of which helped me towards my main goal which was getting her to the shower. However, with her making the choice she felt like she was in control. Then I started to use the HuH™ that Teepa had taught me as we walked. She walked with more confidence as I was able to keep her stable, but again, she felt that she was in control. When we got to her room, I continued to use HuH™ as she chose to take off her clothes. It was her muscle memory and my skill fingers that worked as we accomplished this task together. It was no longer me doing it to her, but her doing what she could while I helped. We continued this way throughout the course of the shower, getting her dressed, and back to one of the choices I offered her.

I wondered if what had happened with Dorothy had been a fluke, but it became obvious to me that it worked with everyone. Taking the time to focus on the relationship first, giving my residents the feeling of being in control, and assisting them instead of forcing my care on them made every difference in the world. What surprised me even more was that taking the time for the relationship did not require any more time to complete my tasks because we worked together.

Soon, my colleagues started to notice the difference as well. They started calling for "that Teepa lady" referring to me, to help them with their difficult residents. I was happy to help, but I couldn't do it on my own. I began to train any of my colleagues that were interested in what Teepa had taught me. You could feel the stress and anxiety in the residents and staff members go down as it changed from an us versus them mentality to a feeling of all being in this together.

It's hard to put into words the change this made for me and my residents. The bond that formed between us, the connection we had, the joy we shared...it became less a job for me and more about doing what I loved; helping my residents live life well. We shared stories and I was able to learn about the lives they led before moving to my facility. I got to learn what it was they they

enjoyed and still enjoy. I was able to share my adventures with them and we found so many things we had in common. It wasn't long before they became more family than residents.

There are always going to be challenges when we are dealing with brain change and I have learned to adapt my PPA™ and HuH™ techniques to work with different people. I have said 'I'm sorry' more times than I can count, even when I wasn't at fault. But I do this because I know that the relationship, in that moment, is the most important thing I can focus on.

I have always cared deeply for the residents that I have worked with. Thanks to PPA™ and HuH™ I believe they now feel that care, too."

Now, imagine if you will, sitting in a room that looks vaguely familiar. You see people moving about that are all dressed alike though you don't know who they are. When you see one coming your way you can't tell who she is but she looks familiar. Then she smiles and introduces herself to you and you smile back, knowing you are with someone who cares about you.