

# Occupational therapists help those with dementia and their carers

## Key facts:

Leisure activities that provide intellectual and social stimulation protect against dementia. Even small amounts of mental, physical and social activity matter when accumulated. It is therefore important for older adults to participate in mentally, socially and physically stimulating activities as this may postpone the onset of dementia (Fratiglioni et al 2007).

An occupational therapist can:

- Provide help and training in undertaking daily living activities such as bathing, dressing, eating, and participating in a favourite hobby
- Provide memory services to minimise problems with remembering and help those with dementia stay out of services longer (Martin 2010). The Memory Service in Belfast audited the occupational therapy rehabilitation programme for early stage dementia patients and recorded evidence of taught techniques still being used 24 months on from treatment (McGrath and Passmore 2009).
- Provide effective rehabilitation programme for those with dementia (Graff et al 2006) (Chard et al 2008).
- Advise and recommend electronic assistive technology, equipment and adaptations to enable service users to retain independence and reduce care costs and remain safe in their home (Martin 2010) (Alzheimer's Society 2011).
- Improve environmental design that helps compensate for impaired memory and learning and reasoning skills. This helps reduce levels of stress experienced by people with dementia and their carers (Barber-Miller 2010).
- Provide appropriate exercise or other activities that are graded to an individual's capabilities to increase their quality of life, preserve their identity and provide them with a positive emotional outlet. (NICE 2008)
- Advise carers how to support someone living with dementia (Gitlin et al 2001).

## Cost Benefit:

Providing 10 sessions of occupational therapy to those with dementia over 5 weeks improves functioning and reduces burden on the care giver. Effects remain significant after 3 months (Graff et al 2008).

Postponing entry into residential care by just one year through adapting people's home saves £28,080 per person (Allen et al 2010).

Evaluations from local telecare interventions reveal savings around emergency hospital and residential care admissions i.e. £85,837 as a result of saved bed days (Bowes et al 2006).



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