**Appendix 6:** Talking to patients with dementia and delirium

Speak

clearly

“age appropriately”

calmly

with empathy and patience

Agitated or angry patients are often frightened and frustrated as it can seem that nobody is listening to them.

Try to understand their world and what they are worried about, if you can’t identify what is worrying them, reassure them that they are safe, consider distraction to a topic they enjoy or one that is meaningful for them.

Humour (not at their expense) is sometimes (but not always) a good strategy.

Delirious patients can be particularly difficult to communicate with (more so than a patient with dementia alone) – use simple clear calm reassuring instructions. Be aware of the very high falls risk.

Recognise if the conversation is making the person more agitated and find a way to de-escalate this; which might mean bringing the conversation to a close.

**The VERA Acronym** (Royal College of Nursing)

**V**alidation – acceptance of person at face value and empathetically search for what they are concerned about

**E**motion – pay attention to the emotional content as well as verbal content \_ you sound upset?

**R**eassurance – verbally or non-verbally can reduce distress, be kind and optimistic, “well you’ll be safe here”, hold hands

**A**ctivity – engage in a meaningful activity eg walk, go to tv room, look at a book, go for lunch etc

Blackhall et al, “VERA framework: communicating with people who have dementia”, Nursing Standard, 2011