



## Embracing the **DIGNITY** of Resident Relationships



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What to you is a good  
quality of life?

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# Are you willing to take risks to achieve a good quality of life?



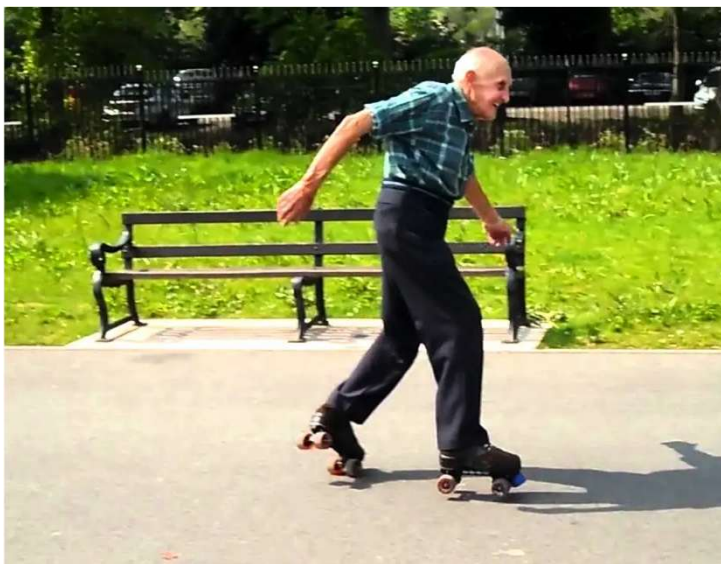
Risk Philic (aka. Risk Seeker)

## Risk Taking Propensity



Risk Phobic (aka. Risk Avoider)

3



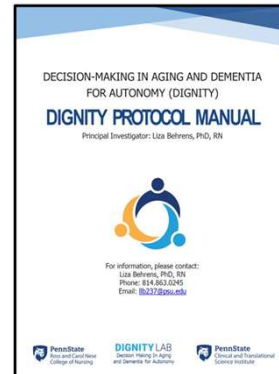
## Dignity of Risk-Taking in Older Adulthood

**Dignity** is a basic human trait that is based internally on self-worth & externally on behaviors of what a person is willing to do or partake in or how they are treated by others.

- Residents living with dementia are at greatest risk for loss of dignity.

**Dignity of risk-taking in older adulthood** refers to an individual's personal dignity being expressed, in part, by their ability to remain **autonomous in decision-making**, which may give rise to risk-taking that subsequently **enhances personal growth & quality of life**.

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## Core Components of DIGNITY Program

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## Assessing Everyday Decision-Making Capacity

Capacity is a clinical determination that a person can understand, make, and take responsibility for health care decisions.

Capacity is most often determined by the clinician.

**We must presume the older adult has capacity** (different than competence) & defer to their wishes, including those wishes that appear risky or ill-advised.

The form is titled "Appendix AA: DIGNITY Decision Making Capacity Tool". It includes fields for "Residents Name:" and "Date:", and "Staff Members Name:" and "Time:". Below these are sections for "Original resident statement of preference or choice" (with a sub-instruction "Write preference or choice in resident's own words"), "Assessment of understanding" (with a sub-instruction "How will helping you to have [insert preference] help you?"), "Assessment of appreciating" (with a sub-instruction "Can you tell me the bad things (problems) could happen if we help you to [insert preference]?"), "Assessment of reasoning (alternatives, risks, benefits, consequences)" (with a sub-instruction "What would happen if we helped you to have something similar [give example] instead of [insert preference]?"), "Assessment of choice" (with a sub-instruction "Has your desire to have [insert preference] changed since the start of our conversation?"), and "Assessment of decision-making capacity". A version number "Version: 5.12.23" and a logo are at the bottom.

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# Assessing Health/Safety Risks & Benefits Associated with Preferences

For the resident's stated preference, you will need to:

Identify potential risks and benefits.

Make judgements on the likeliness of the risk or benefit to occur.

Make judgements on the potential impact to the resident's quality of life.

**Appendix A.8 DIGNIFY Risk and Impact Worksheet**

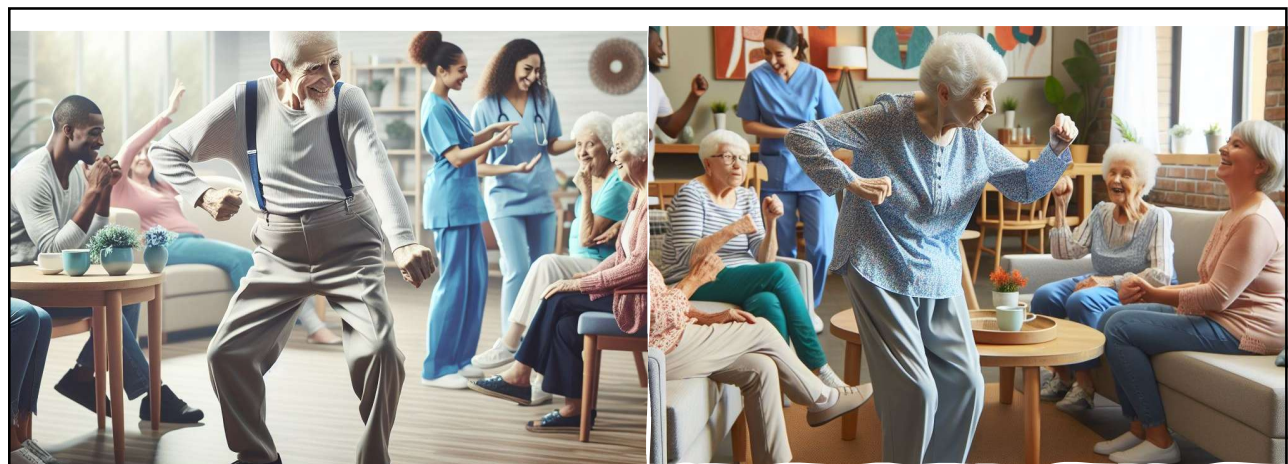
Resident Name: \_\_\_\_\_  
 Assessor Name: \_\_\_\_\_  
 Date: \_\_\_\_\_

Resident's Stated Preference: \_\_\_\_\_  
 Overall, what level of risk do you associate with this preference?  
☐ Minimal ☐ Low ☐ Moderate ☐ High ☐ Very High

What potential benefits or risks do you associate with this preference?	How likely is "this" harm or loss to occur?	If this harm or loss occurs how likely is it to change the resident's quality of life?
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Version 3.0 (2021)


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## Case: Jack & Diane

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## Staff Led Risk Mitigation Strategies

- Negotiation
- Education
- Visual Oversight
- Communication
- Personal/Professional Judgement
  - Empathy
- Health Assessments
  - Cognitive status
- Family Involvement

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**Determine impacts of enabling preferences of persons living with dementia on their quality of life.**

Review the **Personal Risk Portfolio**

Discuss risk mitigation strategies

Make a final determination about how to move forward with the resident's stated preference

Make a plan to monitor the resident's health, safety and well-being

### Personal Risk **PORTFOLIO**

		<b>HIGH</b>	<b>CAREFULLY BALANCE</b> safety enhancement and activity management to protect the person.	<b>MINIMAL SAFETY</b> enhancement necessary, carry out with normal levels of safety enhancement.
<b>CONTRIBUTION to QUALITY of LIFE</b>	<b>HIGH</b>	<b>MAXIMIZE SAFETY</b> enhancement and risk management protect the individual and manage the activity.	<b>CAREFULLY BALANCE</b> safety enhancement and activity management to protect the person.	<b>MINIMAL SAFETY</b> enhancement necessary, carry out with normal levels of safety enhancement.
	<b>MEDIUM</b>	<b>SUBSTITUTE</b> can the same personal benefit be delivered in a different way? See different activity.	<b>CAREFULLY BALANCE</b> safety enhancement and activity management to protect the person.	<b>MINIMAL SAFETY</b> enhancement necessary, carry out with normal levels of safety enhancement.
	<b>LOW</b>	<b>DO NOT ALLOW</b> level of risk is not related to the benefit/value to the person, find alternatives.	<b>CHALLENGE REAL VALUE</b> of the activity to the individual, see alternatives that are more attractive and lower risk.	<b>ALLOW THE ACTIVITY</b> or see alternatives that will provide better relationship with their needs.
		<b>HIGH</b>	<b>MEDIUM</b>	<b>LOW</b>
		<b>RISK of HARM to the RESIDENT</b>		

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# Call to Action

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## What Can You Do Today?

Become a designated champion for the DIGNITY program in your own community.

Advocate for the establishment of a Standard Operating Procedure (SOP) for decision-making related to health/safety risk for residents who are living with dementia.

## Connecting to Broader Initiatives

**EMPOWER US NH Stakeholders to Engage in Patient-Centered Outcomes Research:** Align efforts with this initiative to amplify resident voice and autonomy.

**Future Testing of DIGNITY:** Prepare for upcoming evaluation phases by identifying in interest in participation and providing a letter of support.

