

Scenario: Mealtimes - Foods

People with dementia might change their eating choices increasing the risk of developing concomitant eating disorders because of their impaired appetite due to: an increase in sensory thresholds (smell and taste), changes in circadian rhythms with a shift toward eating earlier, physiological changes such as the loss of skeletal muscle mass, swallowing difficulties (dysphagia) or because of comorbid psychological conditions (e.g. depression, anxiety). In addition, they may develop optic ataxia and/or apraxia and have problems recognizing food and cutlery. Therefore, people with dementia may not be able to bring food to their mouths and may need to be fed by someone else.

Aims



The aim of this training scenario is to simulate the feeling of unpleasantness associated with the lack of taste and/or different food textures experienced by people with dementia during their meals. The second aim is to simulate the feeling of being fed by another person.

Learning Objectives



- Increase awareness of the physical, perceptual, and sensory limitations that impact the eating habits of people with dementia
- To understand the experience of being dependent on someone else for food and how it is to feed another person.
- Increase empathy towards people with dementia and develop a person-centred approach to support people during meal times

When to use this scenario



This scenario is used to simulate symptoms associated with the severe stage of dementia when a person is almost completely dependent on others and experiences perceptual and sensory difficulties. It is only suitable for in-person training.

Equipment



- Cutlery
- Drinking glass
- Drinking straw
- Dish
- Minced and/or blended foods e.g. smoothies
- Tasteless food e.g. porridge oats
- Ingredients to enhance flavour of tasteless food. Ingredients that are very bitter/salty/sweet e.g. porridge oats with honey
- Simulation glasses

Downloadable supporting materials



- Slide show
- Evaluation form

Helpful Tips



- If you don't have access to simulation glasses, try covering the lens of an old pair of glasses with vaseline to demonstrate blurred vision.
- It is also useful to use various types of crockery and cutlery e.g. bowls, spoons
- This training scenario works well alongside the following scenarios: Mealtime - Plates, Mealtime - Cutlery, and Containers.
- If participants are unaware of the different hand feeding techniques e.g. hand over hand, hand under hand, you may wish to show the following video to demonstrate such techniques: https://www.youtube.com/watch?v=eN_PMqmtt0

Facilitation Instructions

Setting up:

- Set up a table and 2 chairs.
- Layout the cutlery, dish, glass, and food to create a typical scene for having meals.
- Divide participants into pairs and assign the following roles: a person with dementia and a healthcare professional
- Prepare two portions of blended foods that are bland in taste. In one portion of food add ingredients that will enhance the flavor of the food. For example adding sugar, salt, or lemon to modify the taste
- You may wish to use a range of foods that vary in taste and texture and require the use of different eating utensils.

Briefing:

- Prior to starting the activity, it is important to ask participants if they have any food allergies.
- If a participant presents with a food allergy that is not contact-related, they may wish to only play the role of the healthcare professional.

To introduce the scenario and brief participants on the intent of the simulation you may use the following:

- *"People with dementia may experience changes to their food preferences and food intake due to a number of reasons. These include an increase in sensory thresholds (smell and taste), physiological changes such as swallowing difficulties (dysphagia), and reduced visual function which impacts a person's ability to recognise food on their plate."*
- *"The following scenario simulates a meal time experience in which a healthcare professional is supporting a person with dementia to eat various types of blended food that range in taste/texture. Using simulation glasses to mimic reduced visual function the participant playing the role of a person with dementia will receive hand feeding assistance to taste food."*





15 minutes

Activity Instructions

1. Divide pairs into the following roles; a person with dementia and a healthcare professional and ask them both to take a seat at the table that has been laid out for mealtime.
2. In this scenario, the healthcare worker is asked to support the person with dementia to eat food.
3. The participant playing the role of the person with dementia is asked to wear simulation glasses
4. The person with dementia is first presented with tasteless food to eat; however, they remain unaware of the contents of the blended mixture.
5. The healthcare worker uses different hand feeding techniques (e.g. hand over hand) to support the person with dementia to eat the tasteless food.
6. After tasting the food, the participant playing the role of the person with dementia is asked to describe their experience and comment on the taste/texture of the food.
7. Following this, the person with dementia is then presented with blended food that has been enhanced in flavor.
8. Using another hand feeding technique (e.g. hand under hand) the healthcare worker once again helps the person with dementia to bring the food to their mouth.
9. The person with dementia will once again report on their experience.
10. After the scenario, participants may switch roles so that both individuals get the opportunity to step into the shoes of a person with dementia and a healthcare worker. In this case, the participant now playing the role of a person with dementia should be presented with a different blended mixture of food, starting with the food that has been enhanced in flavour.



Group Reflection / Discussion



- Following the dementia simulation activity, take some time to reflect on individuals' experiences. As this activity may cause distress it is important to check in on how people are feeling.
- Split participants into small groups to discuss how they may approach the situation of a person with dementia eating meals.
- After 5-10 mins ask one person from each group to share their group's thoughts with the wider group.
- During this discussion, it is important to highlight the benefits of taking a person-centered approach to this situation. This might include highlighting some of the useful tips outlined on <https://www.dementia.org.au/> or https://www.dementia.org.au/sites/default/files/helpsheets/Helpsheet-CaringForSomeone12-Eating_english.pdf

Additional Resources

The following websites offer some useful video resources that demonstrate how best to support a person with dementia experiencing eating and drinking problems:



- **Social Care Institute for Excellence (SCIE)** - Alzheimer <https://www.scie.org.uk/dementia/advanced-dementia-and-end-of-life-care/end-of-life-care/eating-drinking.asp>
- **National Institute of Health (NIH)** - dementia <https://www.nia.nih.gov/health/infographics/tips-make-meal-times-easier-people-alzheimers>