



**PREMIER  
CAREGIVER  
SERVICES**

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Your Alzheimer's & Dementia Experts

# A Guide to **Overcoming Refusal of Care**

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**A Helpful Guide to  
Navigating Transitions &  
Caregiving with Dementia**



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## Welcome to Premier Caregiver Services – a place where compassion meets expertise on providing care for those who matter the most.

I'm John O'Callaghan, and own and operate Premier Caregiver's Services in Louisville, Kentucky. Join me as we delve into Alzheimer's and dementia caregiving, a world I've come to understand through personal experiences.

While I didn't know it at the time, growing up with my great grandmother who lived with our family until the age of 101 gave me a perspective and later appreciation for quality of life as we get older. Additionally, I witnessed my father transform into my mother's caregiver as her Alzheimer's progressed. Unexpectedly, my dad, in "better health", passed before my mother.

I am one of 7 children (6 sisters and myself) and we scrambled to take care of our mother. Each of us brought our own "expertise" to the equation. At the time, I was the new owner of Premier Caregiver Services. This experience laid the groundwork and vision for the type of company I wanted and the services our caregivers provide.

Unlike a lot of other home care agencies that are national franchises, we are privately owned which allows us to specialize in dementia Care, hire the most qualified, trustworthy caregivers in the market, pay them more, provide ongoing training and support, and set them up for career success.

While there are a variety of care agencies from which to choose, I'd like to share with you my philosophy and vision for our company to help you learn more about where we are coming from as you evaluate your options.

- 1. The caregiving profession is one of America's most important yet undervalued, underpaid, and underappreciated jobs.**
- 2. The basis of our training follows The Alzheimer's Association's Dementia Care Practice Recommendations for Professionals Working in a Home Setting.**
- 3. We follow the golden rule, treating you the way we would also want to be treated, by going over and beyond with top-notch customer service, excellent communication, clear expectations, transparency, and real depth of experience and knowledge.**

Finding the right care situation for someone you love is a challenge and a process that is often filled with more questions than answers. Every member of our team understands this in very personal ways, and we are here to answer your questions, and to help you find the best resources and information available for your unique situation.

Please find my direct contact information below and feel free to reach out anytime with your questions, comments, suggestions, or concerns.



Thank you,

*John O'Callaghan*

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# FOREWORD

## A Guide to Overcoming Refusal of Care

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At Premier Caregiver Services, we've learned a tremendous amount about how to overcome refusal of care, specifically with clients who have dementia, and are offering this guide to help you navigate this challenge.

One of the fundamental and critical concepts, (and most difficult for loved ones, caregivers and anyone encountering someone with dementia) is **Anosognosia: a lack of self-awareness resulting from brain cell changes commonly found in 80% of people with dementia.** It is distinct from denial, which involves consciously rejecting difficult truths. Premier Caregiver Services' "A Guide to Overcoming Refusal of Care" helps families navigate this challenge.

Encountering refusal of care from a loved one with dementia can be frustrating and hazardous. Anosognosia causes individuals to be unaware of their condition, leading them to reject necessary care. Understanding this difference is crucial in providing appropriate support.

It is likely your loved one isn't in denial, they are simply showing good sense: *Why would they want a stranger in their home for care they don't need, and then have to pay for it?*

**Our hope is this information and suggested solutions give you and your family better understanding that you are not alone, there are options with strategies that can help.**



# Dementia trained Caregivers are different.

We have witnessed firsthand the success of getting the right “fit” caregiver. This is in personality, training and experience. Dementia caregivers take a proactive stance by engaging the client in meaningful activities to prevent agitation triggers, rather than merely reacting to physical needs.

“Generalist” home care agencies and caregivers help with activities of daily living; preventing falls, preparing and serving meals, bathing, medicine reminders, light housekeeping, and more. Dementia focused caregiving does all this, but with an understanding of what makes that work better for the client and family.

The match between client and caregiver is one of the most important aspects in acceptance of care. As clients need more help, this gives families options for the best quality of life for their loved ones.

We recruit experienced caregivers and invest in ongoing training. We have seen the difference it makes for both the clients and the caregivers.



# CARES Dementia Practice

The CARES Approach to dementia uses "The Alzheimer's Association Dementia Care Practice Recommendations" which focuses on one of the fundamentals of best practice dementia care: tapping into activities that bring your client or loved one joy and meaning.

Each of our caregivers starts with the CARES Training Program which helps the focus on person-centered, activity-based care, where the caregiver learns what has always brought joy and meaning to the client. This helps the client engage in those activities at whatever level they can still participate. Engaging the client in activities that are meaningful prevents their mind from going to places that cause agitation and paranoia.

Most caregivers are task-oriented and focus on the physical needs of the client (bathing, dressing, toileting). Their focus is on the client's disabilities and often circles around doing things for them instead of supporting them through the process.



# C

## onnect with the Person

Communicate or do something meaningful with the person. Mention some piece of personal information every time you talk to them. For example: "Hi James, did you tell me you used to work for the post office? Weren't you a postman?" This will help put the person at ease.

# A

## ssess Behavior

Think about all behavior as a form of communication. Ask yourself what it could mean. Observe the person carefully, and try to understand what they may be experiencing from his or her point of view. It may help to get input from family or other members of the care team.

# R

## espond Appropriately

Try an approach based on what you observed or "assessed." You may need to change or adjust your approach with the person several times depending on the response. Remember to maintain the connection with them. Focus on his or her strengths.

# E

## valuate What Works

Look to see if the person responded positively. Did they smile? Does he or she seem at ease? If not, think about what might work better, and return to the 'Connect with the Person' step.

# S

## hare with Others

Tell members of the care team, including family members, if you found something that worked well or that didn't work. For example: "I noticed that talking to James about his post office job really brought a smile to his face. He didn't even complain about getting dressed today."

# Compassionate Deception

Remembering it is not denial that makes your loved one object to having help, it is a symptom of dementia. They are unaware of the existence of their condition. Whatever title you call it; “Not being 100% transparent”, “leaving out some details”, “white lies”, “therapeutic storytelling”, is one of the most difficult strategies for family caregivers, spouses, to understand and overcome. Understanding that your loved one, and you, can avoid frustrating and dangerous situations by implementing these tactics is critical.

When introducing someone to help, the stories can be especially effective. Saying to your loved one, “I need help because I have to drive the kids carpool today” or “Mom, your car is in the shop, so we are having my friend Laurie coming to drive you,” are effective ways of using compassionate deception.

**Factual and rational reasoning that seems logical is not effective when someone is not capable of processing that and will lead to agitation, anxiety and frustration for all.**

A big objection for dementia clients is about money. Since no one wants a stranger in the house, they surely do not want to pay for it. Saying this is covered by Medicare or Health Insurance is an easy way to defer the question.

Additionally, you might say Medicare (or doctor, or whomever the most trusted advocate is), requires that this person come help you.

**Involving a loved one in the financial aspects of their care usually turns out to be more harmful than helpful.**



# Successful Acceptance of Help

When initiating care, there are tried and proven ways to set a caregiver up for success. From the first phone call, we take the time to listen, gather information, and learn the family's story. All aspects of dementia care are typically new to families. We strive to provide education and make them comfortable.

We spend the time and resources sending two of our Care Managers to meet with the family and client(s). This allows us to have two separate perspectives, gather more information in a comfortable manner, and ultimately help find the compatible caregiver.

Before introducing the caregiver to the client, we create a comprehensive plan of care. We then review it with caregiver and go through the client's background, likes/dislikes, specific triggers, personal history etc.. To help reduce anxiety of having a stranger come to the home, every caregiver is introduced by someone familiar with client and plan of care.





From the initial start, we strategize to help the caregiver not feel like a stranger. There are creative ways to approach this, and the best ways are determined by in depth knowledge of the individual. Knowing their career, hobbies, chronic illnesses, (besides dementia), grandkids, family, pets, etc. is helpful. Using all of this, we can find a way to introduce someone as a friend, a dog walker, an intern/medical student needing volunteer hours, or housekeeper.

We start with small tasks; here to walk the dog, drive to an appointment, change the sheets, do a load of laundry, then build non-threatening relations with patience and understanding through a dementia-based care approach. It's important not to overwhelm the client and say or do anything that will be perceived as taking away someone's independence. For example, most agencies talk in schedules or shifts, with a minimum of four hours at a time. We don't talk about minimum with clients. If necessary, just talk about the specific time the "friend of mine" will be there to walk the dog. A dementia trained caregiver will build rapport and trust with the client. The relationship grows from there.

We also have a four part mentor program where we will send a Mentor Care Specialist to the home to coach and assess. We do this to proactively improve the quality of life for clients, families, and caregivers.





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Please use this as a resource guide and know we are happy to help, answer any questions or connect you to other resources.

Thank you!

*Premier Caregiver Services Team*

## INQUIRIES

Call or Text: 502-718-8727

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**COMPLIMENTARY  
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