

003.004

Speaker key

RE Researcher
SM Staff Member

RE Okay, right, so as you know, I'm a researcher from xxx and I'm, obviously, going to conduct and record this interview. Everything we talk about is confidential, but could you introduce yourself just for the recording, so the typist knows.

SM Okay. I'm xxxx, one of the senior carers here.

00:00:43

RE So you've been in xxx...

SM xxx...

RE Something...

SM xxx for...

RE For three and a half years.

SM And for this group for three and a half years but to the xxxx, here...

RE Five months.

SM Five months. I'm from xx.

00:01:03

RE Okay, so you've been doing this for a long time and working as a nurse as well, not just...

SM Yes, yes, yes, I came to England in xxx.

RE Okay, thank you. And.. so thank you for agreeing to take part in the interview. I'm interested in how people working in care homes think about and cope with residents who become agitated, so when I'm talking about agitation, I'm talking about, I suppose, behaviours like restlessness or pacing or shouting or aggression, and we're asking because we know that this is something that you and your colleagues manage a lot, and we want to make use of your experience and expertise in doing so.

So I'll be asking about your experiences of working with people with agitation, what works, what doesn't, that sort of thing, and we'll use the information to help us

develop an intervention which we will be testing in a big research trial. Yes, so it's all over the next few years, you know, it's going to take us a while, but this is where we're starting.

00:02:17

So obviously the interview will be audio recorded, and whatever you tell me will be anonymised for the purpose of the study, so that you or anyone you mention won't be identifiable. However, if you do tell us something about someone being harmed in some way, we won't be able to keep that a secret, so we'll talk to you about sharing that information, so, you know, more widely, because we can't... we do respect confidentiality but we can't keep secrets if we think someone's being harmed. Is that okay?

SM Yes.

RE Okay, obviously, if you have to leave part way through, just tell me. If it gets too hot or it's all too much.

SM No, that's okay.

RE I think I've...

SM Yes, it's a bit hot.

RE It's a bit hot for me.

SM Yes, because there's no ventilation.

RE I know, but I can't keep the door open because of the taping, yes, so I might fidget a bit. So can you think of a resident who you know well who... you know, someone here who gets agitated, and just tell me a little bit about their behaviour and what happens?

00:03:28

SM Yes, there's a patient... do I need to mention the name as well?

RE You don't have to. You can. It's... I'll take the name out so if it's easier to use the name...

SM On the third floor, dementia floor, there's xxx She gets agitated sometimes, you know, but it depends upon... if you ask so many questions to her, she will get agitated very fast. If... the problem is she's making noise while... what word? For nothing, she would... she will argue with the resident sitting beside her: don't touch my bag. Even though the bag is not there, she will... don't touch my bag. Like, that sense of making noises, you know? Sometimes we will let her speak and she will calm down, but sometimes when the programmes are going on, she will get... be agitated and make noises and everything.

So sometimes what we will do, we will take her upstairs to sit in the lounge. At that time she will calm down.

RE And when you're saying, making noises, is it that she's, kind of, shouting or screaming, or is it that she's just talking a lot or... what kind of noise?

00:04:49

SM Like, if it's a song is going on, she will sing loudly to make that song... you know, like that, aaah, and making others uncomfortable.

RE And so at the time you maybe will move her to somewhere else?

SM Yes, otherwise we will let her. If it's people coming from outside and doing the concert or something, if she's making the problem, then there will be a problem for her to continue it. If it's our people, it's our activity coordinators doing it, we will let her sit down there for some time. If it's so much disturbance to others, then we will take her upstairs. Sometimes she will settle in time, but sometimes...

RE Yes, and what do you notice happens when she does that, like, to other people around her or... you know, what effect does it... does the agitation have?

SM You mean what makes her agitated?

RE Well, no, what effect does it have on the, kind of, other residents or the people when she's doing that?

SM They will try to... well, no, stop it. They will get agitated... some people get agitated. They will... shut up, stop it, and, like, then she will get more agitated. If we, like, calm her, like, ok xxx, it's fine, you want to go to your room? Okay, we can go to your room. Sometimes she will allow us to... okay, we will go upstairs. Sometimes she will not; say, no, no, no, no. Why should I want to go? I will sit here.

00:06:16

RE And what do you think maybe causes her to behave in that way?

SM Maybe she doesn't like the noises, big sounds or something, noises. She maybe doesn't like it. Maybe she has... very fast, gets agitated. Her... maybe her behaviour before, her... gets fast... you know, get agitated.

RE So she's someone who's always been like that, you mean, or, you know, before she got dementia?

SM Yes, if someone who is very angry very fast, they will get agitated very fast, isn't it? If someone who... may take something or touch her, she'll get agitated. Even with the dining table, even though... if she sits beside, she will snatch things or she will beat hands, and not just slap the hands, like that, or... she will do.

RE Yes, and what else do you understand by that sort of behaviour, or what do you think she... I suppose what do you... what do you think it means when she behaves in that way?

00:07:36

SM Maybe sometimes she wants the attraction of everyone, attention, you know? She wants maybe sometimes... she's sitting in the corner, so if somebody's not listening to her, maybe she wants the attention of everyone, or... I don't know what's... maybe she thinks... if the things are not in a proper way... she thinks, like, it's not in a proper way, she gets agitated very fast.

RE So it might be about getting some attention or it could be other things, yes. Can you think of other people here or who get agitated, or have you noticed other things in other residents happening?

SM Yes, there are lots of... xxx on the fourth floor.

RE Lots of...?

SM xxx.

RE Oh, is that the... that's the person?

SM Yes, xxx is... even when we're trying to help him. He's a big man, you know, very... height and very big. He'll squeeze our hands like this. If you tell... come on, xxx, stand up, he will squeeze our hands. But he's okay. He's nice when... I don't know, when we give the personal care, he will get agitated very fast. Even when we tell him to come on, calm down, we're trying to help you, don't squeeze my hands, he will smile and he will squeeze it, and he can understand... I will tell him always, come on, calm down, take three breaths, breathe, calm down. At that time, it's okay, but again, we put the pads and everything, he will get agitated fast. Maybe he doesn't like the touching in private area or something, maybe, yes.

00:09:22

RE And what... how do... you know, I was going... yes, I was thinking, you know, what do you think it means when he behaves like that? What do you think is happening for him?

SM What do I think? Even with his wife also he will squeeze the hands. She's telling one day that like that. I don't know. Actually, I do understand why he's behaving like that. Maybe because of... he can understand what we are telling: xxx, can you please sit down? He will sit for some time. Then again he will stand. Then he will start to walk. All the time he wants, because he was... wants to go to the toilet all the time. Again, he will go to the toilet.

RE And what else do you think generally causes people to get agitated when they have dementia?

SM Maybe I think that when these types of people get more agitated, because I think they don't have the ability to think about what's going, what might come first, they will act it. They don't think what's going on in their surroundings; maybe that's why.

00:10:52

RE So they maybe don't understand what's going on or...

SM Yes, they don't know in what stage they are in various days in which society, maybe they don't know. I mean, they get agitated fast. They don't have that capacity to think first.

RE And are there any other causes of agitation that you, kind of, are aware of?

SM Maybe because of the surrounding situations, you know, some residents can get agitated fast when... with the other people who do something, making noises; like, that type of thing.

RE Yes, there are lots of things, aren't there, and what helps? You know, what... when someone gets agitated like the lady with the shouting, you know, what works to, kind of, help calm down the situation or...?

SM I think better to sit down with her and talk to her sometimes is the best way to calm her down. Otherwise, if you tell her, oh, come on xxx, shut up, please sit, don't make noise, she will get more agitated if we... if we tell her like that type, she will get agitated, so better to sit with her. Let's calm her down. Then we can explain to her that this is going on, this whole thing. Again, she's going to do this one, always we want to sit more time with her. Otherwise, we want to move her from there.

RE So you try different things; maybe sitting down with her, maybe moving her from there.

00:12:25

SM Yes, we want to talk to her with the... once the situation's going on - it's a concert, it's a music programme, they're coming from outside - you don't want to make noise.

RE Yes, and what else works with managing agitation? What works for this guy xxx?

SM xxx is very difficult to manage. You know, with one person, it's very difficult. There should always... a man should be there, want to, because he's very strong. He will squeeze our hands very fastly, so there's always one person who will hold his hands when we want to give the personal care. But if we try to... come on, xxx, sit on the toilet, he will sit on the toilet. If you try to wash or something, he will get agitated very fast. It's very difficult to give him a shower. You know, we want to forcefully... if it's very messy, like poo and everything, we want to give it very forcefully, we want to give the bath or shower or something.

RE And what happens if he won't do that?

SM I didn't get the...?

00:13:28

RE If you can't do that, you know, what helps? Like, what, kind of... what do you try...?

SM Sometimes he will... if it's a man, I think he's a bit strong, he will hold the hands, then he will calm down, you know, he can...

RE So is he different with men and women?

SM Women, yes. If he understands that he is strong, then he will be a bit relaxed then; he will allow us to do it. Otherwise, he will... if it's a girl or woman, you know, he will fight with us.

RE Okay, so having more people there, that helps, yes, and what have you noticed other people doing with the agitated residents? Anything else that you've noticed your colleagues doing to try and...?

SM Not... here it's almost everyone is not that much of, I think, aggressive, like... if we are... if we... come on... he will tightly hold her, he will... he will stand like that. Then...

RE In the other places you've worked, have you had people who have been much more difficult to manage or...?

00:14:31

SM Yes, there is one person, there's xxx he's died, and he was like this. We wanted four people to give him a shower or bath in the bed. It was very difficult. Always, he would kick in our face or something. We just... hold one person on one hand, one person on one hand, to give him a shower.

RE That must have been very difficult.

SM Very difficult.

RE And what helps in terms of...?

SM I mean, the difficulty comes when it's... get poo and the urine everywhere. We need to give them personal care. If somebody comes and sees this one, they can't tell them that he's not allowing, because he has dementia, so we want to do the personal care to them, you know, otherwise they get infections and everything.

RE And is that difficult when you know that you've got to help clean someone but they're refusing to let you do that? Is that hard to be in that situation because you want to clean them up?

SM Yes, when they get agitated, we want to call others as well. Maybe they're a bit difficult because we want others from the different floors, and anyway they are... okay, they are a... teamwork; they will come and help us.

00:15:41

RE Yes, so you tell... so you call people from other floors, and they...

SM Floors, yes.

RE Yes, and does that...?

SM And we will ask them to help us if it's getting very difficult to manage.

RE Good, and what helps you to communicate well with people when they're agitated? What do you try and do or what does your team try and do?

SM We are just trying to explain it. All the time: we are trying to help you. We are just cleaning you. Just calm down, please. Just hold our hands. Or like that, we want to continuously... we want to tell... to remind them what we are doing, yes.

RE Yes, so reminding people, yes.

SM Yes, reminding people constantly so they understand what we are doing, doing, doing, because we don't know that... maybe they can suddenly forget what we are doing, maybe they think we are hurting him, but we are just telling that we are trying to help you, just calm down, because you are a mess; like, that whole thing.

00:16:40

RE And if you say those things, what... does that help or...?

SM For a short time it will help. With xxx, we... xxx, we are helping you. Just relax, take a deep breath. Come on, xxx, please. You're sweet. Like that, just relax for... yes, but again... but again, when he's out of the toilet, he's okay. He can come and sit in there. Only with the personal care he's getting agitated.

RE And who else gets involved when people are agitated? Like, who else gets involved in managing it?

SM With carers, it's... it doesn't go, like, so many words, like that. It's, like, only with the personal care. With carers, it's... we will manage to...

RE So the carers, sort of, manage that.

SM Yes.

RE And are there other times where... maybe not with him but generally where, you know, people from outside get involved, or...?

00:17:39

SM No, we will report to the office about the situation. We will report to the office that this happened because he was so agitated that we needed to forcefully shower or bath. We needed... we did it like that. We always inform the office.

RE And then what do they do?

SM Oh, they just record it: gave a shower, he was refusing, but he was in a mess. Just gave a shower, like that.

RE And do you feel that they, kind of, understand or that they're helpful when you do that?

SM To the resident? The office?

RE The... when you report it in the office, do they...?

SM Yes, so they can tell the family that the resident is like this, or we gave a shower, or like that.

RE And are there things that the relatives do, generally, like, to... that you see the relatives doing to manage the agitation?

SM Manage to... relatives?

RE Yes, do you see... do you ever see the relatives doing things which are helpful or which...?

00:18:38

SM Well, there is a patient, xxx, who is on the third floor. She was born in Italy, she's Italian, but she's lived in Britain for a long time. She knows... you know, then if her friend came a lot... sometimes... several times in a week, yes. She tells us she knows English, but sometimes she forgets the English. She's always telling the Italian, so we don't... and she's deaf as well. Sometimes she doesn't understand what we are telling, but when she comes, when she speaks in Italian, she sometimes calms down. You know, she speaks to her.

RE So when her relatives can, kind of, talk with her, that, kind of, helps.

SM Yes.

RE In Italian.

SM Yes, Italian, but I think she doesn't know who she is, but when she speaks in Italian, in her language, I think she can understand, so she forgets the English, but sometimes she starts to speak English as well.

RE And are there any activities that seem to help people when they're agitated or...?

SM Activities?

00:19:43

RE Like, is there anything you can do with people when they get upset or... you know?

SM We will sit with them and talk with them. We will talk about something... you know, something they are interested in. Like that, we will sit with them and talk. Like, that we will do.

RE Yes, and what about things that... I can hear the...

SM The violins.

RE Music, does that...?

SM It's a patient that...

RE Is that one of your residents, then, or...?

SM No, no, no, it's xxx. Somebody's coming from the church or something. He is doing the violin, so every Thursday, I think, he is coming.

RE Yes, and does that help calm people down or...?

00:20:26

SM This time, everyone will go to bed at 6:30, seven o'clock.

RE Oh, really, so he plays...

SM For xxx, he will sit there and he's telling some bible things and everything to him, so they will come. Some people will sit, some... everyone isn't going.

RE Oh, okay.

SM But he comes. He likes it. xxx likes this [overtalking]

RE And so one person maybe likes it.

SM Yes, one person or two people who want to, they can sit there.

RE Okay, and do you... do you know of any... are there any other, kind of, approaches or treatments when people get really agitated?

SM Sometimes I think leave them for some time, then come back and talk to them. If they get agitated, whatever we tell them, they can't understand it... it depends upon the people and it depends upon the situations. Some people can get fast agitated and maybe they will get calmed down very fast. Some people it takes time to calm down, but I think most of the people, they will get calmed down very fast, here I saw, yes.

00:21:29

RE And you said, you know, it depends on the person and it depends on the situation.

SM Yes, where I said... xxx I told you, even we can't touch his body. He will get agitated fast. He was like that. It was very difficult to manage him. Even to... we were giving the sandwiches, we can't feed him or we just leave the plate in front of him. He will take... he will take it and eat it. But there are some people... they have some people, the residents like them, to prefer. If they approach him, they will calm down and they will do.

RE So there might be people who prefers or get... you know, knows and...

SM Yes, people who know the people very well, they will get calmed down very fast.

RE And how come? Like, what it is it about that that calms them down, do you think?

SM Maybe their approach to them, maybe that's why.

00:22:33

RE Yes, and what do you... so do... you know, I was thinking, like, your approach to people or the approach that you see in other people, what do you think is a, kind of, good approach?

SM Good approach means always sit with them and talk with them. Always see your face constantly, seeing every day, every day, so they know that you are constant, yes.

RE So it's just, sort of, giving people...

SM Yes, constantly seeing his face or her face, so they understand they are coming to help us, you know, so they understand every day, coming... coming every day, so they don't get afraid or... you know, we are trying... so they can understand it, then.

RE Okay, and is there anything else that you think, kind of, helps to manage agitation? Do you ever have specialists coming in or anything like that? You know, doctors or anyone like that if people are really, kind of, distressed?

SM I don't know about that one here.

00:23:42

RE Okay, and is there anything that makes it easier for you to manage when people get very agitated? What helps you to do... to do it, to do your job?

SM Just leave them for some time or just we talk with them. Otherwise, to find out what's making him agitated. Maybe he's wet or in poo; maybe that's why he's getting agitated. Maybe, like, those things, you know?

RE And is there anything about the team that helps you to, kind of, manage?

SM Yes, always the people who are working with us to help us, you know, what to do, you know? Yes, for the... if they get agitated, if they will help us in their personal care and everything.

RE And what about the, kind of, management here or the team leaders and things like that? Do you feel that they help you to manage when people get agitated, or do they make it harder in any way or...?

SM No, no, no, they don't make it harder. They will... we will report it. Sometimes we cannot... in xxx there's a patient, Mr xxx he's always getting agitated if he cannot get a cigarette. If he has... if he has a pain here or here, he doesn't want us to touch him. He wants the team leaders from the office to put some bandages on him. He wants to see... only from them, he will be getting calmed down. He knows... oh, they know everything so they can put a bandage so it will be okay.

RE Yes, and is there anything else about... say, when the families come in, does that help the situation or does that make it harder?

00:25:35

SM No, when family comes, I think they get more relaxed, because even though they have dementia, some people know their wife, their children, and they... and so they are a bit relaxed, I think, with them.

RE So the family come in and that...

SM But some people are there; they don't know her, they don't know him. They will just come and talk and go. But when we talk about the previous things, you know, past things, I think they know when they get... showing the photographs and everything, when they talk about it. They will talk with them, you know? They get more relaxed, we can see that.

RE And so when you talk about the past and things, does that also help people to relax if they're looking at photos and...?

SM Yes, I think so. When we talk about the past things and showing the photographs, the children, I think it gets a bit relaxed for them. I think they are more... enjoying talking about these things.

00:26:36

RE Yes, and is there anything that makes it harder for you to manage the agitation? Anything that, kind of, gets in the way or makes it harder?

SM Getting harder is I suppose, like, when you get agitated, you know? It's very difficult.

RE Yes, and is there anything about, kind of, this care home that makes it harder or...?

SM No.

RE No? When you compare it to other places you've worked, is it...?

SM It depends upon the... how many people are working on one floor.

RE Okay.

SM You know, if it's... on the dementia floor, we need more staff than the normal floors, because sometimes people get agitated. Sometimes, you know, they get... we get more help from other people, yes.

RE Yes, and does the number of staff, does that make it... does that sometimes make it quite hard or...?

SM No, here it's okay. They are giving the staff... enough staff for, you know, each floor, so it's okay for us.

00:27:43

RE Yes, and have you worked in other places where there's not been as many staff or where it's...?

SM I don't know much about other homes because I didn't work in any other companies. I only worked in this company. Here they are giving the proper staffing and everything is fine.

RE It sounds like this is quite a good company to work for.

SM Yes, I think so, yes, because they're giving the proper staffing. Even when I was working in xxx, they were giving the proper staffing. Yes, even the staff are very cooperative; if we are calling for help from the other floors, they will come and help. It's teamwork.

RE Yes, and does the team work well here? Does that, kind of...?

SM Yes, of course, it works. Some people know how to manage the residents, you know, with the agitated people.

RE Some people know.

00:28:28

SM Yes, with the words, with the way they're talking, like that. They know the way to manage them.

RE Do some people find it harder?

SM Maybe the experience makes a difference like that. Lots of people working for ten years, 15 years, like that, they know, you know, how to manage with that stage of...

RE Yes, and do some people find it a bit harder than...?

SM Yes, when we start this job, it gets hard, you know? You don't understand. When I got... also, when I started my job, it was very difficult, because I didn't have any experience in care homes. I mean, it's, like, agitated people here. We don't know how to deal with it, you know, so it... then we will struggle to cope with it, but when...

RE You have a lot to learn.

SM Yes, we have to know... we want to know how to cope with the... especially dementia, so we want to speak to them, we want to calm, we want to get to know them; what they want, you know?

00:29:28

RE Yes, why is it... do you think it's important to get to know people with dementia?

SM I think yes, of course, we want to get to know the people, because dementia people, they don't know how to speak. No, they don't know what they want. When we work with them and when we know them, their routines and everything, so we know what they want, isn't it? She likes ice cream normally. She doesn't like any other things. She doesn't like fish. Like, all those things, you know? Night time, when she goes to bed, she wants hot milk, like that.

RE So you need to, sort of, get to know...

SM Know about the residents, and them, too, that they come to know about us also so we can see... when they see the patients... like, when they see us, they will be very glad; our face, you know, like that.

RE And what helps you to get to know the residents?

SM I think that when we... it depends upon when we go and talk with them, sit with them, be very soft and gentle with them, then they will be very nice; I think so.

00:30:37

RE Yes, okay, and it sounds like, you know, it's not too bad, most of the time it's okay, but sometimes it can be quite challenging for you and for the other staff. What impact does the residents' agitated behaviour have upon the staff? Like, how does it affect the staff when the residents are agitated?

SM Oh, we will... we would... what to do, how to cope with, how to manage him to calm down.

RE How does it make you feel?

SM Normally, what we will do... if we can... some residents, if we can talk to them, they will calm down, you know; some, they will not, so we will just leave them for some time, just letting them relax, get them... to leave them alone for some time. Whatever we tell them, they will not get... they don't go to that. Just leaving them for some time, then come back again.

RE Yes, and what effect does it have on how you feel? Like, can it make you feel, I don't know, like, sad or...?

SM Oh, I don't, because we know they are dementia... that's their character, so just leave them for some time, then come back and just try again. That's all we can do. We can't do anything more.

RE And do you see... does it ever affect other people? Other people, does it make them feel frustrated or stressed or...?

00:32:20

SM When there is... it's busy on the floor, you know, people will get upset, everybody will get... all the time it's going, it's we want to finish it, like that, so we get...

RE But it sounds like, actually, for you, it's part of your job and you, you know...

SM Yes, just relax, that's all.

RE Yes, okay, and when it is difficult, if it's difficult, do you get support?

SM Yes, of course, I will ask. If it's very difficult, if I'm very tired, I will tell the staff in the office that I can't manage, I need somebody else, or I am... well, I can't, it's very difficult to manage them because I am working from morning to the evening, the dementia floor, sometimes it gets very difficult for us, you know? The long day on the dementia floor, it's very difficult, too.

RE And is there anything else that helps you to cope with the job?

SM You mean...?

RE I mean, like, do you get support from your colleagues in the team? Do you [overtalking]

00:33:30

SM Yes, of course, we get... we cannot work alone. You cannot... you cannot work as one person, especially on dementia floors. We need the team support. Even if it's a dementia floor, if a person is getting agitated, it depends on who is the person working with us. If he's very supportive, definitely it is easy for us.

RE Yes, so it's all about the people that...

SM Work with, yes.

RE You are working with.

SM Yes, it's easy for the... it's easy.

RE And what about training? Have you had training to help you manage when residents get agitated?

SM Yes, and I think that I got a programme. Yes, I think, yes, I got training for the agitation. I think so. Actually, I forgot. Sorry.

RE It's all right. Thinking about, you know... when you think about training you have had, what has been most useful? What is useful?

00:34:29

SM In the training?

RE Mm-hmm.

SM They will tell them more techniques to cope... how to deal with the residents... with agitated people, how to cope with...

RE Yes, so having ideas about how to cope and things.

SM Cope with the residents, but it's all theories. When we come to the patients, only we can know about it. It's different with different residents.

RE Yes, because I was going to say, you know, is there anything you don't find helpful in training? Is it... is it... is it not helpful when it's all theory?

SM It's helpful but we need... whatever we're taught, we want experiences with it, and when we get to... get to know the residents, only we can know about the... how to deal with the residents.

RE So you need to what? Put it into practice or...?

SM Yes.

00:35:25

RE Yes, and do you feel... when you do training, do you feel you can put what you learn into practice?

SM Yes.

RE Yes, what helps you to do that?

SM Actually, I forgot what I learned with the training.

RE Yes, does it help when in training there are examples, or when you use your own examples of, kind of, things that are difficult? Does that help or...?

SM Yes, when we tell about the agitated people, just leave them for some time. Like, those are the types of... they will add ways as to what to do in the situation that will help.

RE Yes, and what else would you like training in? You know, what training would help you?

SM What training will... yes, like agitation, how to manage the agitation, that training would be helpful, especially in dementia.

RE Yes, so in relation to dementia, and is there anything that helps you to feel that you're putting it into practice or, you know...?

00:36:35

SM More staffing will be more helpful for the residents, you know?

RE More staffing?

SM Yes, more staffing will always be very helpful for the residents, as well as for the carers, because then we get time to spend with the resident.

RE Yes, if you had more staff, what would it mean you could do?

SM Then we can... we can... we can monitor them or we can sit and talk to them, so we can get to know about the residents very fast, like, other things.

RE Yes, those sorts of things, okay.

SM Their likes and dislikes. Maybe some people like music, some people like watching football, so they will be calm and quiet at that time, watching the television; they're, like, interested in things, you know?

00:37:32

RE Yes, okay, and before we finish, is there anything else that you wanted to say or talk about that we've not already talked about? No? That's fine. That's fine. That's really helpful. So we'll probably develop some, like, materials, training materials, those sorts of things. Are you happy for us to be in touch with you to show you what we've developed and things, get you to comment, yes?

SM Yes, of course. I think training is okay, but when the new people come to the carer field, it is very difficult for them to cope with, especially in the dementia areas, you know?

RE Yes, so what...?

SM They will get agitated very fast [unclear] residents.

RE Yes, but I suppose that's what I'm interested in, is what... when people come in new, you know, what should we be telling them? What should you be telling them? What's going to help them to learn?

SM Yes, just always watch what others are doing, and sit and talk to them, even though they are not interested to talk to you. Just sit with them and give them coffee. They like coffee and tea very much. Just give them tea or coffee, just talk to them, so they can... day by day we can understand their... what they like and what they dislike, you know? Only working with them, only they can understand the things.

00:39:02

RE So you learn by doing it and by spending time with...

SM Spending time with the residents.

RE I think you're right. You're right. Okay, thank you. That's really helpful, xxx.

SM You're welcome.