DEMENTIA CARE SPECIALIST TRAINING
FACILITATOR GUIDE

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Dementia Care Specialist Training Overview

The Dementia Care Specialist (DCS) Training is an advanced-level training designed for care managers at health plans and healthcare organizations who are specially trained to provide dementia care management. DCSs are selected to participate in the training program.

The DCS Training aims to improve dementia capacity within health plans and healthcare organizations by:

1. Increasing knowledge and self-efficacy of the DCS so he/she has more dementia expertise to support care managers, members, and families
2. Strengthening dementia-specific care coordination systems through the use of assessments and best practice care plans

The duration of the DCS Training is three days and includes, lecture, videos, activities, facilitated discussions, and problem-based scenarios/case studies.

DCS Training Learning Objectives:

- Describe hallmark symptoms of Alzheimer’s disease and related dementias (ADRD)
- Demonstrate correct use of a cognitive screening tool
- Summarize the components of the IDEA! behavior management strategy
- Describe the importance of identifying, assessing, and supporting family caregivers
- Demonstrate ability to develop care plans for people with ADRD and/or their caregivers
- Describe the importance of making appropriate referrals to home- and community-based services (HCBS)
Materials/Supplies

The following materials/supplies will be needed for the training:

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Trainers are encouraged to review all materials and activities prior to the training so they are familiar with what needs to be set up ahead of time.
Symbols

The following symbols are used throughout the DCS Training presentation. Corresponding colors are used in the training outline to differentiate direct instruction from other forms of learning.

**VIDEO/VIGNETTE**

Videos/vignettes help illustrate, provide insight, and put a “face” to training topics; immediately following a video, it is helpful to debrief main ideas, relevant topics, or areas that merit further attention. During the training, refer back to videos/vignettes so that concepts can be applied to what was seen.

**FACILITATED DISCUSSION**

Facilitated discussions help the trainer guide discussions so that participants actively engage in dialogue, relate concepts to previous experiences, discuss immediate relevance, and determine future relevance. Facilitated discussions shift the focus of the training from being didactic to participatory. They also allow participants to process concepts and exchange ideas in a respectful manner.

During facilitated discussions, the trainer should encourage participation from multiple participants and set the tone for respectful discussion. Make sure to allow different people opportunities to speak and provide affirmations.

**ACTIVITY**

Activities help participants apply what they are learning and build team learning. Activities encourage active participation and problem solving. Like facilitated discussions, activities shift the focus of the training from being didactic to participatory and interactive.
DCS Training Modifications/Considerations

- The DCS Training has been designed as three-day training [note: time on outline is only an estimate and should be used as a guide].
- In accommodating and respecting the time allocated to the training, flexibility must be used.
  - If a plan allocates additional time to the training, more in-depth discussions can take place, more thorough review of activities can occur, and the trainer will be able to provide more detailed examples throughout the training.
  - If a plan allocates less time to the training, the trainer will need to scale back activities and discussions.
- Each trainer should incorporate examples, stories, and vignettes into the training. This helps bring topics “to life,” increases relevance, and promotes application of concepts.
- Because the DCS Training is being delivered within various health plans and healthcare organizations, the training content may need to be modified for each health plan or healthcare organization. Training content may need to reflect the different structures, systems, and needs of health plans, the variations in home and community based services in different geographical locations throughout the State, and different services available through various Alzheimer’s organizations.

Although modifications will need to be made to the training, primary components of the training and general content need to be maintained so there is fidelity.

- It is important that breaks are built into the training. Breaks are not pre-determined because each health plan will structure the training differently. The trainer needs to allow time for participants to take breaks. This will facilitate learning and make the overall training more productive.
- Throughout the training, the trainer will need to assess group dynamics to determine if activities are better completed individually, with a partner, or in groups. Most activities have been designed to allow for flexibility. If the trainer sees that the larger group enjoys working collaboratively and uses time effectively, activities should be adapted to accommodate for this learning style. Conversely, if the trainer sees that people prefer working independently, more individual activities can occur.
• The trainer should **utilize concepts of adult learning** throughout the training to maximize effectiveness. Principles of adult learning that should be integrated throughout the training, include:

  o **Dialogue** (facilitate sharing life experiences and insights; participants will benefit from hearing from their peers/colleagues)
  
  o **Respect** (appreciate the contributions and life experiences of participants; connect existing knowledge to learning objectives)
  
  o **Relevance to previous experience** (make connections to what people already know or can do)
  
  o **Immediate relevance** (participants should see how they can immediately use and apply what they have learned; application of knowledge to jobs is important)
  
  o **Future relevance** (participants need to realize the utility of what they are learning for the future)
  
  o **Active participation** (professionals have a depth of knowledge and skills to contribute to the training; they are not passive recipients of knowledge)
DCS Training Outline

Part I: Fundamentals of Cognitive Impairment, Alzheimer’s Disease, and Related Dementias
1) Dementia-Capable Healthcare & Role of the Dementia Care Specialist
2) Fundamentals of Cognitive Impairment, Dementia, and Alzheimer’s Disease
   a. Impact of Alzheimer’s on Health Care
   b. Age-Related Memory Loss vs Potential Warning Signs
   c. Stigma and Moving Beyond Stereotypes
   d. Dementia Overview
   e. Disease Progression
   f. Risk Factors
3) Screening and Diagnosis—AD8 Validated Dementia Screening Tool
4) Alzheimer’s Clinical Care Guideline

Part II: Practical Dementia Care Management
1) Management of Alzheimer’s Disease and Related Dementias
   A. Mandatory Reporting: Elder Abuse/Driving
   B. Medication Management
   C. Managing Co-Existing Conditions with a Dementia-Informed Lens
   D. Safety
   E. Managing Behavioral Symptoms-IDEA! Strategy
   F. Alternatives to Pharmacological Approaches

Part III: Caring for the Family
1) Role of Family Caregivers
2) Diverse Perspectives on “Caregiving”
3) Family Caregiver Identification—Caregiver Identification Tool
4) Family Caregiver Assessment—Caregiver Assessment Tools
5) Supporting Caregivers
   a. Best Practice Care Plans
6) Making Referrals
   a. Alzheimer’s Los Angeles Resources
7) Culminating Activity/Problem-Based Scenario: Developing an Alzheimer’s-Informed Care Plan
Sample Training Agenda

*All times are approximate; trainer should adjust times, as needed

**DAY 1**

8:45am-9:00am  Registration/Welcome
9:00am-9:30am  Dementia Capable Healthcare & the Role of the Dementia Care Specialist
9:30am-10:30am Age Related Memory Loss & Warning Signs
10:30am-10:45am Break
10:45am-12:00pm Stigma/Stereotypes & Dementia Overview
12:00pm-1:00pm Lunch
1:00pm-1:30pm  Dementia Overview Continued
1:30pm-2:30pm  Disease Progression
2:30pm-2:45pm  Risk Factors
2:45pm-3:00pm  Break
3:00pm-4:30pm  Screening and Diagnosis & Alzheimer’s Clinical Care Guideline
4:30pm-4:45pm  Questions/Wrap Up

**DAY 2**

8:45am-9:00am  Registration
9:00am-9:30am  Mandatory Reporting: Elder Abuse & Driving
9:30am-10:00am Medication Management
10:00am-10:45am Managing Co-Existing Conditions with a Dementia-Informed Lens
10:45am-11:00am Break
11:00am-11:30am Safety
11:30am-12:00pm Behavioral Symptoms
12:00pm-1:00pm Lunch
1:00pm-3:00pm IDEA! Strategy
3:00pm-3:15pm Break
3:15pm-4:20pm IDEA! Strategy Continued & Alternatives to Pharmacological Approaches
4:20pm-4:45pm Questions/Wrap Up
DAY 3

8:45am-9:00am   Registration
9:00am-9:40am   Role of Family Caregivers
9:40am-10:10am  Diverse Perspectives on “Caregiving”
10:10am-10:30am Family Caregiver Identification—Caregiver Identification Tool
10:30am-10:45am Break
11:00am-12:00pm Family Caregiver Assessment—Caregiver Assessment Tools
12:00pm-1:00pm  Lunch
1:00pm-2:20pm   Supporting Caregivers & Best Practice Care Plans
2:20pm-3:00pm   Making Referrals
3:00pm-3:15pm   Break
3:15pm-4:15pm   Culminating Activity
4:15pm-4:45pm   Wrap Up/Post-Training Evaluation

Videos

Various video clips are embedded into the training. Trainers are encouraged to download the videos prior to the training in the event that the videos in the PowerPoints do not work. Below are the links where the videos, or video clips, can be found.

Day 1

1) Building Systems of Healthcare for People with Dementia  
   Running time: 1 minute 49 seconds  
   https://www.youtube.com/watch?v=fdQ4Tv5L7Gc

2) Alzheimer's and Dementia Statistics 2018 ALZLA  
   Running time: 1 minute 36 seconds  
   https://www.youtube.com/watch?v=okoiJCS1rn4

3) What is Alzheimer's Disease?  
   Running time: 3 minutes 14 seconds  
   https://www.youtube.com/watch?v=7_kO6c2NfmE&t=61s

4) The Unspoken Impact of Dementia  
   Running time: 4 minutes 2 seconds  
   https://www.youtube.com/watch?v=z15-0xZTng4

5) HBO Documentary: The Alzheimer's Project (Woman with Middle Stage Dementia)*
Running Time: 3 minutes
https://www.hbo.com/documentaries/the-alzheimers-project-caregivers
*Note: The video clip has been manually extracted

Day 2
6) HBO Documentary: The Alzheimer’s Project (Driving)*
   Running Time: 3 minutes 11 seconds
   https://www.hbo.com/documentaries/the-alzheimers-project-caregivers
   *Note: The video clip has been manually extracted

7) The Alzheimer’s Caregiver—Janice Crenwelge on her Husband’s Wandering
   Running Time: 1 minute 14 seconds
   https://www.youtube.com/watch?v=wOAEJAtfTWU

8) Hallucinations: UCLA Alzheimer’s and Dementia Care
   Running time: 4 minutes 3 seconds
   https://www.uclahealth.org/dementia/hallucinations or
   https://www.youtube.com/watch?v=cpV57QGdU7l

9) Refusal to Bathe: UCLA Alzheimer’s and Dementia Care
   Running time: 4 minutes 28 seconds
   https://www.uclahealth.org/dementia/refusal-to-bathe or
   https://www.youtube.com/watch?t=55&v=sI3Dc1kERto

10) Wandering: UCLA Alzheimer’s and Dementia Care Program
    Running time: 4 minutes 5 seconds
    https://www.uclahealth.org/dementia/wandering or
    https://www.youtube.com/watch?v=Sw0yEB5o8ml

Day 3
11) HBO Documentary: Girl and Grandma)*
    Running time: 2 minutes 38 seconds
    https://www.hbo.com/documentaries/the-alzheimers-project-caregivers
    *Note: The video clip has been manually extracted

12) ABC7 Day in a Life
    Running Time: 5 minutes 18 seconds
    https://www.youtube.com/watch?v=zl8kRGk1zws

13) The Lonely Journey
    Running Time: 1 minute 52 seconds
    https://www.youtube.com/watch?v=4tFjcMeYDFq
Training Evaluation

The DCS Training includes a post-training evaluation. Evaluations should be completed prior to distribution of certificates of completion and/or continuing education credits.