



## 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:

Audiovisual Supplies	General Supplies	Participant Materials
Computer	Name badges	Sign-in sheet
Projector	Markers (to write on board)	PowerPoint slides
Speakers	Pens	Worksheets
	Post-it notes	DCS Toolkit
	Easel Pads	Post-training evaluation
		Certificates of completion/CEUs

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.



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 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.



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:
  - **Dialogue** (facilitate sharing life experiences and insights; participants will benefit from hearing from their peers/colleagues)
  - **Respect** (appreciate the contributions and life experiences of participants; connect existing knowledge to learning objectives)
  - **Relevance to previous experience** (make connections to what people already know or can do)
  - **Immediate relevance** (participants should see how they can immediately use and apply what they have learned; application of knowledge to jobs is important)
  - **Future relevance** (participants need to realize the utility of what they are learning for the future)
  - **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
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](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-oxZTng4>
- 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=cpV57QGdU7I>

- 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=SwoyEB5o8ml>

## 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=4tFjcMeYDFg>



## 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.