dementia capable care
a CPI specialized offering

The *Dementia Capable Care*
Training Program and the
State of Iowa –
IA ADC 481-57.7(135C)

cpi

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State of Iowa – IA ADC 481-57.7(135C)

Correlation to Crisis Prevention Institute's (CPI) *Dementia Capable Care* training program

The following chart is designed to assist you in identifying some of the ways in which CPI's *Dementia Capable Care* training program can help the Iowa Inspections and Appeals Department facilitate Alzheimer's disease and dementia symptoms training requirements for staff at residential care facilities in the state of Iowa. It will also assist in identifying areas that may require a review and/or revision of facility policies and procedures.

Program Alignment

§57.7(6) – Staff Training	Correlation to *Dementia Capable Care* training program
All staff working in a memory care unit or facility shall have training appropriate to the needs of the residents (I, II, III).	The *Dementia Capable Care: Foundation Course* provides a common framework around Alzheimer's disease and related dementias (ADRD). It teaches a best-abilities perspective, dementia stages, behavior management, and care techniques for those with Alzheimer's disease and dementia-related symptoms.
	Other objectives of this program include teaching and demonstrating an understanding of ADRD's impact on cognitive functions.
	The course teaches and discusses how care partners can support and compensate for the memory loss of the persons they care for.
	A memory activity allows participants to compare and contrast different types of memories:
	▪ Short-term
	▪ Long-term
	▪ Procedural
	▪ Working
	The *Foundation Course* teaches the stages of dementia and approaches to maximize function and emotional well-being. It identifies care approaches that promote best abilities which correspond to the Allen Cognitive Levels and ways to support care and treatment plans suited to the needs of individuals with ADRD.
	This training also discusses measurable outcomes related to care for persons with ADRD—for residents, staff, families, and the organization as a whole.
	Dementia Capable Care meets the Alzheimer's Association's Dementia Care Practice Recommendations in the following topics: Alzheimer's and dementia disease awareness; strategies for caring for the person with dementia; communication and understanding behavior; social needs and activities; eating well; falls; and wandering.

§57.7(6)(a)	Correlation to *Dementia Capable Care* training program
Upon assignment to the unit or facility, all staff working in the unit or facility shall be oriented to the needs of residents requiring memory care. Staff shall have at least six hours of special training appropriate to their job descriptions within 30 days of assignment to the unit or facility (I, II, II).	The *Dementia Capable Care* training curriculum includes a *Three-Day Instructor Program*. This train-the-trainer program certifies staff to teach the *Dementia Capable Care: Foundation Course* at the organizations where they work. The program can take six to 10 hours, depending on class size and organizational needs. This in-house instruction may be delivered in one continuous session or segmented into smaller sections, as determined by the organization. Organizations can train their own staff members, as well as any clinical or contractual partners, such as rehab/therapy, hospice, or home health/home care. The *Dementia Capable Care: Foundation Course* outline includes the following content (with approximate time frame): - Philosophical framework (1 hour) - Theoretical framework (0.5 hours) - ADRD & cognition (0.5 hours) - Stages of dementia (2.5 hours) - Behavior and communication (1.5 hours) - Supporting families (0.5 hours)
§57.7(6)(b)(1)	Correlation to *Dementia Capable Care* training program
Training shall include the following topics: (II, III): An explanation of Alzheimer's disease and related disorders, including symptoms, behavior and disease progression.	The *Dementia Capable Care* training program focuses on turning negative perspectives of dementia into positive ones through a paradigm shift from disabilities-based to abilities-based care. Activities include a pre-test and group activity on changing destructive perceptions of ADRD into constructive ones, as well as discussion of measurable outcomes related to care for persons with ADRD—for residents, staff, families, and the organization as a whole. *Dementia Capable Care* delves into ADRD stages and symptoms, behavior management strategies, and care techniques for those at every stage. The program identifies and compares different forms of irreversible dementia, their characteristics, and the challenges they pose. Forms of dementia include: - Alzheimer's Disease - Vascular Dementia - Lewy Body Dementia - Frontotemporal Dementia

§57.7(6)(b)(1)	Correlation to *Dementia Capable Care* training program
	The course defines function and its components: • Emotional • Sensory • Physical • Cognitive—with an emphasis on the importance of understanding cognition as the primary determinant of a person's abilities It also broadens participants' understanding of impaired attention, as it relates to persons with ADRD, by covering: • Definitions and examples of forms of impaired attention (selective, divided, switching, and sustained). • How to identify impaired attention with compensatory approaches. • How to modify the environment, minimize distractions, and provide sequencing cues as needed to facilitate attention. The *Dementia Capable Care* training program discusses problem-solving and sequencing ability. • How to recognize impaired problem-solving abilities and support the person with compensatory approaches. • Sequencing activity (individual and in pairs) helps participants to understand how to direct someone through the steps of a particular activity, yet allow the person to be as independent as possible. The program includes a communication activity, demonstrating how the intensity of a behavior problem does not necessarily correlate with the reason for the behavior. Participants practice how to document behavior and look for behavioral patterns for each individual patient. The *Dementia Capable Care* training program teaches activities which allow the participants to discuss the probable cause of a behavioral challenge and how to minimize or prevent that challenge. *Dementia Capable Care* training identifies common behavioral challenges (e.g., resistance to care, verbal and physical aggression, anxiety, and sundowning) and the appropriate non-pharmacological behavior management techniques that staff can use to best manage and support the individual.

§57.7(6)(b)(2)	Correlation to *Dementia Capable Care* training program
Skills for communicating with persons with dementia.	The *Dementia Capable Care* program emphasizes an understanding of how even negative behavior is communication, and how to adjust one's communication skills and care approaches in response to this behavior. The communication approaches and activities in the program help participants to link common cognitive challenges with the appropriate communication technique/response through role-play. Also, the course identifies different forms of communication (verbal vs. nonverbal) of staff, families, and persons with ADRD. It discusses and teaches how messages are delivered and received, and potential communication breakdowns and recoveries.

§57.7(6)(b)(3)	Correlation to *Dementia Capable Care* training program
Skills for communicating with family and friends of persons with dementia.	*Dementia Capable Care* training teaches approaches to communicate with family members in order to facilitate best ability to function (BATF) and increase quality of life.

§57.7(6)(b)(4)	Correlation to *Dementia Capable Care* training program
An explanation of family issues such as role reversal, grief and loss, guilt, relinquishing the caregiving role, and family dynamics.	The *Dementia Capable Care* program teaches key ways to reduce transfer trauma and family guilt and to understand the importance of a team approach in creating a community for persons with ADRD.

§57.7(6)(b)(5)	Correlation to *Dementia Capable Care* training program
The importance of planned and spontaneous activities.	The *Dementia Capable Care* training program teaches the just-right challenge and Can Do/Will Do/May Do activities, empowering participants to contemplate the cognitive level, life story, and living situation of their patients with ADRD in order to create care and activity plans that facilitate BATF and quality of life. *Dementia Capable Care* training includes specific care approaches that facilitate BATF for each stage of dementia. ▪ Video footage of activity interventions with persons at each Allen Cognitive Level helps bridge participants' understanding of stages of dementia from theoretical to practical. ▪ Group discussion and care approach checklists promote analysis and problem solving of real-life situations for care partners and their patients with ADRD.

§57.7(6)(b)(6)	Correlation to *Dementia Capable Care* training program
Skills in providing assistance with activities of daily living.	The *Dementia Capable Care* program teaches memory activities which allow participants to compare and contrast different types of memories as they relate to ADLs: ▪ Short-term ▪ Long-term ▪ Procedural ▪ Working The training program discusses how care partners can support and compensate for the memory loss of the persons they serve during ADLs. This can broaden the participants' understanding of impaired attention and its impact on ADLs, including: ▪ Definitions and examples of forms of impaired attention (selective, divided, switching, and sustained). ▪ How to identify impaired attention with compensatory approaches. ▪ How to modify the environment, minimize distractions, and provide sequencing cues as needed to facilitate attention. The *Dementia Capable Care* course discusses problem-solving and sequencing ability. ▪ How to recognize impaired problem-solving abilities and support the person with compensatory approaches. ▪ Sequencing activity (individual and in pairs) helps participants to understand how to direct someone through the steps of a particular activity, yet allow the person to be as independent as possible. The just-right challenge and Can Do/Will Do/May Do activities teach participants to contemplate the cognitive level, life story, and living situation of their patients with ADRD in order to create care and activity plans that facilitate BATF and quality of life. The *Dementia Capable Care* program also teaches and discusses specific care approaches that facilitate BATF for each stage of dementia. ▪ Video footage of activity interventions with persons at each Allen Cognitive Level helps bridge participants' understanding of stages of dementia from theoretical to practical. ▪ Group discussion and care approach checklists promote analysis and problem solving of real-life situations for care partners and their patients with ADRD.

§57.7(6)(b)(7)	Correlation to *Dementia Capable Care* training program
Skills in working with challenging residents.	*Dementia Capable Care* training emphasizes that behavior—even negative behavior—is communication, and teaches how to adjust one's communication and care approaches in response. The Communication Approaches activity asks participants to link common cognitive challenges with the appropriate communication technique/response through role-play. The training program identifies different forms of communication (verbal vs. nonverbal) of staff, families, and persons with ADRD. It also teaches how messages are delivered and received, and potential communication breakdowns and recoveries. The *Dementia Capable Care* training program's Behavior Is Communication activity demonstrates how the intensity of a behavior problem does not necessarily correlate with the reason for the behavior. Participants practice how to document behavior and look for behavioral patterns for each individual patient. Activities also allow the participants to discuss the probable cause of a behavioral challenge and how to minimize or prevent that challenge. The *Dementia Capable Care* program identifies some of the common behavioral challenges (e.g., resistance to care, verbal and physical aggression, anxiety, and sundowning) and the appropriate non-pharmacological behavior management techniques that staff can use to achieve the best outcomes.
§57.7(6)(b)(8)	Correlation to *Dementia Capable Care* training program
Techniques for cueing, simplifying and redirecting.	The *Dementia Capable Care* training program teaches and discusses how care partners can support and compensate for the memory loss of the persons they serve during ADLs. It discusses problem-solving and sequencing ability. ▪ How to recognize impaired problem-solving abilities and support the person with compensatory approaches. ▪ Sequencing activity (individual and in pairs) helps participants to understand how to direct someone through the steps of a particular activity, yet allow the person to be as independent as possible. The just-right challenge and Can Do/Will Do/May Do activities teach participants to contemplate the cognitive level, life story, and living situation of their patients with ADRD in order to create care and activity plans that facilitate BATF and quality of life.

§57.7(6)(b)(8)	Correlation to *Dementia Capable Care* training program
	The program teaches and discusses specific care approaches that facilitate BATF for each stage of dementia.
	▪ Video footage of activity interventions with persons at each Allen Cognitive Level helps bridge participants' understanding of stages of dementia from theoretical to practical.
	▪ Group discussion and care approach checklists promote analysis and problem solving of real-life situations for care partners and their patients with ADRD.