

ESSENTIALS OF DEMENTIA CARE: BECOMING AN EFFECTIVE TRAINER

November 4, 2009
8:00 a.m. – 4:00 p.m.
Fayette County Cooperative Extension Office
1140 Red Mile Place, Lexington, KY

Sponsored By:



Ohio Valley Appalachia Regional
Geriatric Education Center

Co-Sponsors:



Essentials of Dementia Care: Becoming An Effective Trainer

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PROGRAM DESCRIPTION

An estimated 4.5 million Americans have Alzheimer's disease. The quality of life for persons with Alzheimer's disease is directly related to the relationship they have with their direct care providers. In order to provide quality care, direct care providers must be trained in dementia care. This training will help trainers and educators to develop effective dementia care training programs for their direct care providers and family caregivers. Participants in the training will learn creative ways to teach dementia care concepts as well as innovative strategies for incorporating training into everyday work. Participants will receive a training manual complete with presentations and interchangeable learning activities for implementation within their training programs.

PRESENTERS

- **Sarah Teeters, CTRS** – Alzheimer's Association – Greater Kentucky & Southern Indiana Chapter
- **Gregory Jicha, M.D., Ph.D.** – University of Kentucky, Sanders Brown Center on Aging, Alzheimer's Disease Center
- **Carlene Daley, B.A.** – Belmont Village
- **Aletha Malone, B.S.W.** – Alzheimer's Association – Greater Kentucky & Southern Indiana Chapter

WHO SHOULD ATTEND

This training is designed for professionals who are responsible for implementing training in their care settings (i.e. Physicians, Nurses, Parish Nurses, Nursing Home Administrators, Home Health, Area Agencies on Aging, Allied Health, Social Workers, Extension Agents, Staff Development Coordinators, and other health care professionals).

REGISTRATION FEE

\$30 made out to the University of Kentucky. Fee includes refreshments, instructor manual, training materials, lunch, and CE credits. **Registration deadline: October 21, 2009**

CONTINUING EDUCATION:

- 8.4 CE contact hours pending for KY and OH Social Workers: University of Kentucky College of Social Work.
- 8.4 CE contact hours pending for KY Nurses; Southeast Kentucky Area Health Education Center/ARH is a Kentucky Board of Nursing (KBN) approved provider.
- 8.4 CE contact hours pending for KY Nursing Home Administrators: Southeast Kentucky Area Health Education Center/ARH is a Kentucky Board of Nursing (KBN) approved provider.

LOCATION

Fayette County Cooperative Extension Office

1140 Red Mile Place (off Red Mile Road, behind Fayette Seed)

Lexington, Kentucky

(859) 257-5582

Essentials of Dementia Care: Becoming An Effective Trainer

OBJECTIVES

By the end of the training, participants should be able to:

- Define Alzheimer's disease and dementia
- Effectively communicate and relate with persons with dementia
- Identify successful strategies for preventing and responding to challenging behaviors
- Discuss ways to use icebreakers, group activity and new techniques to help staff become better problem solvers and dementia care providers
- Complete an action plan and provide 2 hours of training for at least 3 Certified Nursing Assistants and/or other caregivers for persons with Alzheimer's disease within 6 months of the training.

Agenda

8:00 a.m. – 8:30 a.m.	Registration and Refreshments
8:30 a.m. – 8:45 a.m.	<i>Essentials of Dementia Care: Becoming an Effective Trainer</i> -Aletha Malone, BSW <ul style="list-style-type: none">○ Define training objectives and purpose of an action plan○ Discuss the importance of setting training goals and objectives○ Review of training experience by previous participant
8:45 a.m. – 9:45 a.m.	<i>Overview of Alzheimer's Disease & Related Disorders</i> – Gregory Jicha, MD, PhD <ul style="list-style-type: none">○ Identify the symptoms of dementia○ Describe the diagnostic process○ Discuss treatment options
9:45 a.m. – 10:00 a.m.	Break
10:00 a.m. – 11:30 a.m.	<i>Communicating & Relating to the Person with Dementia</i> –Aletha Malone, BSW & Sarah Teeters, CTRS <ul style="list-style-type: none">○ Describe how dementia changes communication○ Apply communication techniques and approaches
11:30 a.m. – 1:00 p.m.	Lunch (Provided) <i>Calgon, Take Me Away: Renewing the Joy of a Day</i> – Carlene Daley, Belmont Village <ul style="list-style-type: none">○ Identify the warning signs of burnout○ Discuss methods of self-care
1:00 p.m. – 2:15 p.m.	<i>Successful Approaches to Preventing and Responding to Challenging Behaviors</i> - Aletha Malone, BSW & Sarah Teeters, CTRS <ul style="list-style-type: none">○ Describe ways challenging behaviors occur○ Identify appropriate methods to prevent challenging behavior○ Identify appropriate techniques to respond to challenging behaviors
2:15 p.m. – 2:30 p.m.	Break
2:30 p.m. – 4:00 p.m.	<i>Training for Success</i> – Sarah Teeters, CTRS & Aletha Malone, BSW <ul style="list-style-type: none">○ Recognize adult learning principles○ Design and use icebreakers and group activity in training○ Create a plan for teaching others about dementia
4:00 p.m.	Evaluations and Certificates

OVAR/GEC REGISTRATION FORM

Essentials of Dementia Care: Becoming an Effective Trainer 11/4/09 8:00 am – 4:00 pm
1140 Red Mile Place, Lexington KY

The session is partially supported by funding through the USDHHS and HRSA. In order to continue to receive funding we are required to report as Group Data the following information about participants who attend GEC trainings. The information you provide is kept confidential. We sincerely appreciate your assistance in answering the questions below.

PLEASE PRINT

Last 4 digits of Social Security #: _____ **Highest Degree/Credentials:** _____

First Name: _____ **MI:** _____ **Last Name:** _____

Agency/University/Organization: _____ **Position:** _____

Street Address: _____ **City:** _____

State: _____ **Zip:** _____ **EMAIL:** _____ **Counties of work:** _____

Work or Cell Phone: (____) _____ **Month/Year of Birth:** ____/____ **Gender:** Male Female

Age: Under 20 20-29 30-39 40-49 50-59 60-69 70+

Racial/Ethnic Background:

- | | |
|---|---|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Asian (specify: _____ e.g. Asian Indian, Chinese, (Filipino, Japanese, Korean, Thai, etc.) |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Native Hawaiian/Other Pacific Islander | <input type="checkbox"/> Other, Specify: _____ |
| <input type="checkbox"/> White or Caucasian | |

I would like to receive Continuing Education Credit for the following discipline/s (check all that apply):

- ___ KY Nursing
- ___ KY Nursing Home Administrator
- ___ KY/OH Social Work

If you are a **health care practitioner** and spend at **least 50% of your time** with underserved populations (e.g., low socioeconomic status, limited access to care, geographically isolated, etc.) please check below the type of your agency or institution:

Type of Agency: (please choose only ONE response)

- | | | |
|--|---|---|
| <input type="checkbox"/> Not Applicable | <input type="checkbox"/> Migrant Health Center | <input type="checkbox"/> Mental Health Center |
| <input type="checkbox"/> Community Health Center | <input type="checkbox"/> Primary Care HPSA (Federally Designated Health Professionals Shortage Area | <input type="checkbox"/> Indian Health Service |
| <input type="checkbox"/> Health Care for Homeless Center | <input type="checkbox"/> Dental HPSA | <input type="checkbox"/> State or Local Health Department |
| <input type="checkbox"/> Rural Health Clinic | <input type="checkbox"/> Mental Health HPSA | <input type="checkbox"/> Governor designated area |
| <input type="checkbox"/> Federally Qualified Health Center | <input type="checkbox"/> Public Housing Primary Care Center | <input type="checkbox"/> Other, Specify _____ |
| <input type="checkbox"/> Ambulatory Practice Sites Designated by State Governors | | |

Discipline or Profession and Educational Background: Pick the **ONE category** out of the three columns that best describes your discipline/profession and **check only ONE response** under that category).

Primary Care Disciplines:

- Dentistry
- Family Medicine
- General Internal Medicine
- Nursing (circle: LPN, RN/BSN, NP, CNS, MSN, Parish Nurse, Other _____)
- Pharmacy
- Physician Assistant
- Psychiatry
- Other, Specify _____

Health Disciplines:

- Clinical/Counseling Psychology
- Counseling
- Gerontology
- Health Administration
- Health Education
- Health Ministry
- Nursing Home Administration
- Pastoral Care
- Protective Services
- Public Health
- Recreational Therapies
- Social/Behavioral Sciences
- Social Work
- Other, specify: _____

Allied Health Disciplines/Other:

- Assistants (CNAs, STNAs, Home Health Aides, Medical Assistants)
- County Extension Agent
- Food & Nutrition Services (DIT or Technicians)
- Health Information (Med. Records/Transcription)
- Other Techincians (EEG, EKG, EMT)
- Rehabilitation (Therapist or assistant in OT, PT, Recreation /Activities, Speech/Audio)
- Other, specify _____

Employment Information (What is Your Primary Role?) (Check one)

- | | |
|---|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Administrator/Manager <input type="checkbox"/> Academic Faculty <input type="checkbox"/> Clinical Faculty <input type="checkbox"/> Inservice/Continuing Education Coordinator | <ul style="list-style-type: none"> <input type="checkbox"/> Health Care Practitioner (anyone in a field related to health care or social services who shares responsibility for delivery of health care or related services) <input type="checkbox"/> Student (also circle if: medical resident or fellow) |
|---|--|

Please estimate the **number of patient or client encounters** that you have in an average day: _____

Please indicate the clinical site(s) in which you work:

- | | | |
|--|--|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Ambulatory Care Center <input type="checkbox"/> Assisted Living <input type="checkbox"/> Chronic & Acute Hospital <input type="checkbox"/> Hospice <input type="checkbox"/> Home Care | <ul style="list-style-type: none"> <input type="checkbox"/> Mental Health <input type="checkbox"/> Nursing Home <input type="checkbox"/> Palliative Care <input type="checkbox"/> Senior Housing <input type="checkbox"/> Senior Center | <ul style="list-style-type: none"> <input type="checkbox"/> Telehealth <input type="checkbox"/> Other: specify _____ |
|--|--|--|

**Please return this completed form (3 pages) with your \$30.00 check payable to the University of Kentucky. Send all to: Julie Brock
University of Kentucky OVAR/GEC
658 South Limestone Street – Ligon House
Lexington, KY 40506-0442**

This fee includes Instructor Manual, Training Materials and Lunch.

For more information call (859) 257-1510 or email julie.brock@uky.edu

Thank you for your time & assistance!

July 2009

Thank you for registering for the Essentials of Dementia Care: Becoming an Effective Trainer, to be taught on November 4, 2009. We would like to find out more about your organization’s training needs. Please complete and send it with your registration form and check. Your responses will help us respond to your needs and evaluate our effectiveness. **Please circle the most accurate response:**

Understanding Dementia

- 1. Direct care providers in our organization accurately identify the symptoms of and treatments for dementia.

Never Seldom Frequently All of the Time

- 2. I effectively teach and demonstrate to direct care providers how to identify the symptoms and treatments for dementia.

Strongly Disagree Disagree Agree Strongly Agree

Communication

- 3. Direct care providers in our organization communicate effectively with persons with dementia.

Never Seldom Frequently All of the Time

- 4. I effectively teach and demonstrate to direct care providers how to use communication skills with persons with dementia.

Strongly Disagree Disagree Agree Strongly Agree

Activities

- 5. Direct Care providers in our organization identify and implement successful programs and activities for persons with dementia.

Never Seldom Frequently All of the Time

- 6. I effectively teach and demonstrate to direct care providers how to identify and implement successful programs and activities for persons with dementia.

Strongly Disagree Disagree Agree Strongly Agree

Life Story/Life History

- 7. Direct care providers in our organization effectively use the life history/life story of persons with dementia in daily activities and communication.

Never Seldom Frequently All of the Time

- 8. I effectively teach and demonstrate to direct care providers how to use the life history/life story of persons with dementia in daily activities and communication.

Strongly Disagree Disagree Agree Strongly Agree

OVAR/GEC will send a written survey to you six months after training to document your use of training materials. This enables us to meet the requirements of our HRSA funding agency, and helps us to improve trainings and health care for older adults.

ESSENTIALS OF DEMENTIA CARE:
TRAIN THE TRAINER

November 4, 2009