



# Dementia Friendly @ Work Training

Trainer's Guide







## Trainer's Guide

Thank you for taking action to help spread dementia awareness to local workplaces, organizations and community settings throughout Minnesota. This training will help equip any setting with tools to better serve and support people living with dementia and family and friend caregivers. The training is designed for organizations that have face-to-face interaction with walk-in customers or the general public.

More than 100,000 Minnesotans have dementia or a related disorder. By 2050 the number of people age 65 and older with Alzheimer's disease and other dementias may nearly triple. We will all be affected by these statistics because they represent family members, friends, neighbors, co-workers, colleagues, clients, and customers. It makes good sense personally and professionally to increase awareness about dementia in every part of the community.

This 60-minute training will help everyone in the organization understand dementia and the warning signs of Alzheimer's disease, and it will provide tips on what's involved in creating a dementia friendly physical space. The training is not intended as a means for staff to diagnose or describe someone as having dementia. It's intended to help participants notice and, when needed, assist a person in navigating community environments, as well as encourage additional support from health care and other providers.

This training should be conducted by someone who is familiar with dementia.

### **This trainer's guide is divided into two sections:**

- 1. The 60-minute Dementia Friendly @ Work training**

This training corresponds with the Participant's Guide.

- 2. Optional case study activity**

These case studies can be adapted for different sized groups and settings. They help participants practice what they learned in the training. Note: The case study activity will take approximately 15-20 minutes and is not calculated into the 60-minute training.

## Overall Learning Outcome

Participants will learn what dementia is, what the warning signs are for Alzheimer's disease, communication tips, and how to create a dementia friendly physical space.

## Trainer Checklist

### Environment

Do this training in an area where there is comfortable seating. You may not have a choice on how the room is set up. When the space and participant count allow it, a U-shaped room setup works well. Try to stand in a spot that everyone can comfortably see and where you can interact with participants.

### Materials and Resources

- Trainer's Guide
- Participant's Guide (have 3 more copies than number of participants expected)
- Trainer Check Sheet (page 6)
- Sheets of paper for participants to write responses to case studies (optional activity)
- Pens/Pencils
- Brochure or bookmark listing community resources (if available)
- Clock or watch to keep track of time
- Review supporting materials at: [www.actonalz.org/dementia-friendly-work](http://www.actonalz.org/dementia-friendly-work) and prepare as needed (optional):
  - Certificate of Participation (have 3 more copies than number of participants)
  - Working to Become Dementia Friendly signs
  - Action Slips: Distributing an action slip is an option when you want to document the actions participants have identified. Have more slips available than the number of participants expected; have scissors to cut the action slips.

## Trainer Preparation

- Make a copy of the Trainer's Check Sheet (page 6) to help ensure all preparations for the training are completed.
- Make contact with the host/setting to determine:
  - Date and time
  - Contact person and phone number on day of training
  - Number of participants
  - Room setup
  - Key questions or concerns a specific group might want answered.
- Review content of the presentation and case studies (optional activity) to ensure the examples pertain to the organization or community setting. Be flexible about creating alternative examples that are more relevant to the setting's participants.
- Arrive at least 30 minutes prior to the start time.
- Set up the room to accommodate the expected number of participants.

## After the Training

- ❑ Complete the Dementia Friendly @ Work On-Line Reporting form at: [www.actonalz.org/dementia-friendly-work](http://www.actonalz.org/dementia-friendly-work)

## Trainer Tips

**You are not an expert on dementia.** As a Dementia Friendly @ Work presenter, you are not expected to know everything about Alzheimer’s disease or dementia. Refer participants to the Alzheimer’s Association Minnesota North Dakota 24/7 Helpline (800.272.3900) for assistance clarifying any misunderstanding and to answer questions. The Helpline serves people with memory loss, caregivers, health care professionals, the general public, diverse populations, and concerned friends and family. It offers referrals to local community programs and services, dementia-related education, crisis assistance and emotional support. Participants can also visit: <http://www.alz.org/mnnd/>

**Practice, practice, practice.** Practicing with the training materials several times will help build a comfort level with what you are sharing and will boost confidence in your own skills.

**Be aware of time.** It’s great to get the group involved in a discussion, but you only have 60 minutes total. If someone leads the group down a different path, suggest, “That is interesting. I want to respect everyone’s time, so if we have a few minutes left at the end, we can come back to that (question, topic, or discussion).” Make sure you have a watch or clock available to stay on track.

**Do group introductions?** Participants are probably from the organization, workplace or community setting and will know each other. Introductions are optional.

## Key to Icon Graphics



Time



Champion tips



Materials needed



Trainer/group interaction



Trainer-led content



Participant activity

*This training was developed by ACT on Alzheimer’s, a volunteer-driven, statewide collaboration seeking large-scale social change and community capacity-building to transform Minnesota’s response to Alzheimer’s disease and related dementias. Across the state, Minnesotans are coming together to strengthen quality of life for people with dementia and their caregivers by creating dementia friendly communities. Learn more at: [www.actonalz.org](http://www.actonalz.org)*

## Trainer Check Sheet

		✓
Organization's name		
Date of presentation		
Time of presentation		
Location of presentation		
Industry/Sector (Health Care, Retail, Faith Organization, Education, Bank, Government, etc.)		
Contact person's name and phone number on day of training		
Number of participants expected		
Room setup (U shaped, tables, chairs, auditorium, etc.)		
Key questions or concerns a specific group might want answered.		
Review content of presentation		
Review case studies to determine if the examples are relevant for the organization/setting		
Have copies of all materials ready (3 additional copies)		

# Section 1: Dementia Friendly @ Work

**Time:** 60 minutes, in-person

**Note:** The following lesson plan for the training has suggested words in **bold** that you can use in introducing the material. Feel free to use your own words to get the message across.

## Part 1 of 8 – Welcome and Session Goals

	5 minutes
	Participant's Guide – Page 1
	<p>Welcome the participants, review learning outcomes, and review materials that you provided them.</p> <p><b>Thank you for coming today to learn what dementia is, the signs of Alzheimer's disease and how to create a dementia friendly physical space. My name is.... and</b> (share your experience or reason for being the facilitator.). <b>I am excited to be talking with you today because...</b>(share why you think this information is important in your community).</p> <p><b>I would guess that some of you are here to learn how to handle a situation when someone comes into your (organization, workplace or community setting) and seems confused or upset. Others may want to learn more about how to help someone they know who is living with dementia, and others are here because their organization said it was important to be aware of community members living with dementia.</b></p> <p><b>In front of you is a Dementia Friendly @ Work Participant's Guide that we will be using today.</b></p>

## Part 2 of 8 – Dementia Definition and Facts

	4 minutes								
	Participant's Guide – Page 2								
	<p><b>Let's take a look at the definition of dementia on page 2 of your guide.</b></p> <p><b>Dementia is not a specific disease. It's an overall term that describes a wide range of symptoms associated with a decline in memory or other thinking skills severe enough to reduce a person's ability to perform everyday activities. Alzheimer's disease is the most common type of dementia and accounts for 60 to 80 percent of cases. Other types of dementia include Dementia with Lewy Bodies, Frontotemporal, and Vascular.</b></p> <p>Read the facts found in the graphic below(also found on page 2 of the participant guide).</p> <div data-bbox="290 884 1442 1344" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;">More than <b>100,000 Minnesotans</b> have dementia or related disorders.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; padding: 10px;">   <p><b>One in ten</b> people age <b>65+</b> has Alzheimer's.</p> </td> <td style="width: 50%; text-align: center; padding: 10px;">   <p><b>One-third</b> of people age <b>85+</b> have Alzheimer's.</p> </td> </tr> </table> <p>The number of individuals <b>age 65+</b> with Alzheimer's disease is projected to increase.</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">2017</td> <td style="width: 60%;"></td> <td style="width: 25%; text-align: right;">5.3 Million</td> </tr> <tr> <td>2050</td> <td></td> <td style="text-align: right;">13.8 Million</td> </tr> </table> <p style="text-align: center;"><b>Young onset</b> Alzheimer's, occurring in people under age 65, is also <b>on the rise</b>.</p> </div>	  <p><b>One in ten</b> people age <b>65+</b> has Alzheimer's.</p>	  <p><b>One-third</b> of people age <b>85+</b> have Alzheimer's.</p>	2017		5.3 Million	2050		13.8 Million
  <p><b>One in ten</b> people age <b>65+</b> has Alzheimer's.</p>	  <p><b>One-third</b> of people age <b>85+</b> have Alzheimer's.</p>								
2017		5.3 Million							
2050		13.8 Million							

## Part 3 of 8 – Know the Signs of Alzheimer’s Disease

	10 minutes
	Participant’s Guide – Page 3
	<p><b>Say:</b> There are 10 early signs and symptoms of Alzheimer’s disease.</p> <p>Our role is not to diagnose someone with dementia, but rather to help that person more easily navigate our organization or community setting. In some cases, we may need to encourage the person to see their health care provider so that a professional can assess changes happening.</p> <p>In your guide on page 3, you will see a table with one column listing the early signs and symptoms of Alzheimer’s disease and another column offering examples of what you may notice in various community settings.</p> <p>Read the bolded statements below one at a time. Say or paraphrase the information following the bolded statements. Next read the example in italics. Go through the list one statement at a time.</p> <p><b>1. The first sign is memory loss that disrupts daily life.</b> <b>Say/Paraphrase:</b> One common sign, especially in the early stage of Alzheimer’s, is forgetting recently learned information. Other signs include forgetting important dates or events, asking for the same information over and over, and increasingly needing to rely on someone for things they used to handle on their own.</p> <p><b>You may notice:</b></p> <ul style="list-style-type: none"><li>• <i>A customer walks out of the store without paying for items.</i></li><li>• <i>A customer calls for the third day in a row to refill a prescription that you filled last week.</i></li><li>• <i>A member of your faith community looks to his spouse to answer questions that he would have answered on his own in the past.</i></li></ul> <p><b>2. The second sign is challenges in planning or solving problems.</b> <b>Say/Paraphrase:</b> Some people may experience changes in their ability to develop and follow a plan or work with numbers. They may have trouble following a familiar recipe or keeping track of monthly bills. They may have difficulty concentrating and take much longer to do things than they did before.</p>

***You may notice:***

- ***A neighbor tells you she can't make her favorite cookies because the recipe doesn't work anymore.***
- ***An employee turns in a financial document with errors and does not seem to understand the errors.***

**3. The third sign is difficulty completing familiar tasks at home, at work or leisure.**

**Say/Paraphrase:** People with Alzheimer's often find it hard to complete daily, familiar tasks. They may have trouble driving to a familiar location, managing a budget at work or remembering the rules of a favorite game.

***You may notice:***

- ***A cashier isn't able to count the money in her drawer at the beginning of work and is frustrated that "the way we do this changed."***
- ***As a police officer you find a long-time community resident driving in circles. He explains that he can't find the church and is sure they changed the street names in town.***

**4. The fourth sign is confusion with time or place.**

**Say/Paraphrase:** A person with Alzheimer's can lose track of dates, seasons and the passage of time. They may have trouble understanding something when it is not happening right now. At times, they may forget where they are or how they got there.

***You may notice:***

- ***A customer comes into the grocery store and is very confused about where she is, how she got there and what she is supposed to do while she is there.***
- ***A patient begins to show up at your dental office on the wrong day and time.***

**5. The fifth sign is trouble understanding visual images and spatial relationships.**

**Say/Paraphrase:** For some people, having vision problems is a sign of Alzheimer's. They may have difficulty reading, judging distance and determining color or contrast, which may cause a problem with driving.

***You may notice:***

- ***A customer comes into your car repair shop multiple times because of small dents and dings. This time he says that the city just moved the light pole behind his garage and he can't see it correctly.***
- ***A patient comes to the medical office frequently for falls—down steps, on pavement, and at home.***

**6. The sixth sign is new problems with words in speaking or writing.**

**Say/Paraphrase:** People with Alzheimer's may have trouble following or joining a conversation. They may stop in the middle of a conversation and not know how to continue or they may repeat themselves. They may struggle with vocabulary, have problems finding the right word or call things by the wrong name (e.g., calling a watch a "hand clock").

**You may notice:**

- ***A bank customer who has always been very independent asks you to read documents for him.***
- ***A drug store customer points to things she needs and asks for "that stuff over there". She can't find the right words to clarify what she wants and becomes frustrated.***

**7. The seventh sign is misplacing things and losing the ability to retrace steps.**

**Say/Paraphrase:** A person with Alzheimer's disease may put things in unusual places. They may lose something and not be able to go back over their steps to find it. Sometimes, they may accuse others of stealing. This may occur more frequently over time.

**You may notice:**

- ***A customer sets down their purse or wallet, cannot find it and accuses you of stealing it.***
- ***As a gentleman leaves the county office, he leaves all his paper work behind.***
- ***You find all of a patient's take-home instructions in the waiting room of the medical clinic.***

**8. The eighth sign is decreased or poor judgment.**

**Say/Paraphrase:** People with Alzheimer's may experience changes in judgment or decision making. For example, they may use poor judgment when dealing with money, such as giving large amounts to telemarketers. They may pay less attention to personal grooming.

**You may notice:**

- ***A regular customer withdraws a large amount of cash several times over a few weeks, which is out of character for him.***
- ***A friend tells you that her mother gives money away to every charity that calls her.***

**9. The ninth sign is withdrawal from work or social activities.**

**Say/Paraphrase:** A person with Alzheimer's may start to withdraw from hobbies, social activities, work projects or sports. They may have trouble keeping up with a favorite sports team or remembering how to complete a favorite hobby. They may also avoid being social because of the changes they are experiencing.

	<p><b>You may notice:</b></p> <ul style="list-style-type: none"> <li>• <i>A regular at Bingo starts to have trouble following along and stops coming.</i></li> <li>• <i>As a waitress at the local café you notice that one of the Thursday coffee regulars isn't coming anymore.</i></li> </ul> <p><b>10. The tenth sign is changes in mood and personality.</b></p> <p><b>Say/Paraphrase:</b> The mood and personalities of people with Alzheimer's can change. They can become confused, suspicious, depressed, fearful or anxious. They may easily become upset at home, work, with friends or in any place out of their comfort zone.</p> <p><b>You may notice:</b></p> <ul style="list-style-type: none"> <li>• <i>Someone who has been easygoing seems angry every time he comes into the store.</i></li> <li>• <i>A woman who has been independent for many years calls the police because she believes someone is climbing in her windows. She cries and seems very fearful.</i></li> </ul> <p>Ask the group to share examples: <b>What examples of the warning signs do you see at your workplace?</b></p> <p>Allow the group time to share.</p> <p><b>Say:</b> Next let's talk about how we can effectively communicate with a person with dementia.</p>
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### Part 4 of 8 – Know How to Communicate

	10 minutes
	Participant's Guide – Page 5
	<p><b>Communication is about what we say and how we say it. The tone of voice we use and our body language become more important as a person with dementia loses the ability to understand spoken language.</b></p> <p><b>Use a calm voice and try not to speak loudly. Make sure you are talking to the person in a quiet environment so that they can focus on you and hear you easily. Smiling and gentle humor may also help the person feel more comfortable.</b></p> <p><b>Consider your body language—how you are standing and how you use your arms and hands. Does your posture convey that you want to help or that you are frustrated?</b></p>

**On page 5 of your guide are tips to help you communicate and interact with someone showing signs of dementia.**

Read the tips below in bold.

- ✓ **Approach the person from the front.** The person with dementia may have a loss of peripheral vision. Often times they have tunnel or binocular vision. Approaching from the front may reduce fear or prevent them from being startled.
- ✓ **Speak clearly and be patient.** Speak clearly, calmly, and allow the person time to understand information. It may take a little longer for information to process for someone with dementia. They may hear the information but have trouble interpreting what they hear. Try using different words if the person is not responding. Use simple short sentences and avoid direct questions. Keep choices to a minimum and don't raise your voice. When possible, use a quiet, non-distracting space/place to talk.
- ✓ **Listen closely.** Listen carefully to what the person has to say. Give plenty of encouragement as you look for clues about what they may be trying to communicate. The person may seem confused and say something that doesn't make sense to you. If the person finds it difficult to come up with a word, suggest one. But, be careful not to interrupt or finish their sentence. Don't rush. Try to go at their pace and work through the situation as best you can.
- ✓ **Smile warmly and make eye contact.** Someone with dementia may find it difficult to understand what is being said, but may quickly interpret the look on your face, your tone of voice, and your body language. Use a friendly tone and give body cues that respect their personal space.
- ✓ **Respond to a look of distress.** At times, people with dementia may have forgotten where they live. If someone looks lost and distressed, offer to help by asking if their address is on something in their pocket or bag. When necessary, local police can be of help.
- ✓ **Watch for signs of change and offer help accordingly. Every day can be different.** For some people with dementia, each day can bring a change in what they can do. How you help someone may differ each time you interact with them.

## Part 5 of 8 – Practice and Discussion

	10 minutes
	Participant's Guide – Page 6
	<p><b>Let's turn to page 6 of your guide. Work with a partner (or in small groups) and discuss a situation here at .....(name the setting you're in) that has happened or could happen involving someone with dementia. Describe the situation and list ideas on how you would handle the situation. For example...</b> (give an example relevant to the organization if one is known or use the example below in italics).</p> <p>Give partners/small groups up to five minutes to identify a scenario and discuss how to handle the situation. Ask for volunteers to share the scenario they identified and their ideas for handling it.</p> <p><i>*Example situation: A woman came into your business and stood in the middle of the walkway. You approached her and asked if you could help. She just said "bathroom." What could you do to assist her? If example situation is used, ideas follow:</i></p> <ol style="list-style-type: none"><li><i>1. Approach the woman from the front.</i></li><li><i>2. Speak clearly and slowly. "Would you like me to show you where the bathroom is?"</i></li><li><i>3. Maintain eye contact.</i></li><li><i>4. Walk her to the bathroom and show her the women's sign (if there is one).</i></li><li><i>5. You may want to ask a question about why she stopped in today just to determine if she is going to need more help (depending on the organization) or if you need to call someone to come and get her.</i></li></ol> <p>Facilitate a group discussion for each scenario and ideas identified.</p> <p><i>(continued on next page)</i></p>

	<p><b>Based on what you have learned today, does anyone have anything more to add (to the scenario that was shared)?</b></p> <p>When discussing ideas, encourage the group to take notes on page 6 of their guide. Summarize the activity by saying or paraphrasing the following:</p> <ul style="list-style-type: none"> <li>• <b>There are easy steps we each can take to support community members living with dementia.</b></li> <li>• <b>Remember your role is not to diagnose someone with dementia, but rather to help that person more easily navigate your organization or community setting.</b></li> <li>• <b>In some cases, we may need to encourage the person to see their health care provider so that a professional can assess the changes happening.</b></li> </ul>
	<p>This activity can also be completed as a large group using the example situation or a situation that has occurred in the organization/setting.</p>

## Part 6 of 8 – Know How to Create a Dementia Friendly Physical Space

	<p>15 minutes</p>
	<p>Participant’s Guide – Page 7</p>
	<p><b>There are little things you can do to the physical environment to make it safer and more welcoming to people living with dementia. You have the opportunity to make it easier for someone with dementia. Let’s talk about some things you can do.</b></p> <p>Read through the check-marked statements below with participants. Ask them to think about their own setting as you go through the list.</p> <ul style="list-style-type: none"> <li>✓ <b>Entrances</b> should be clearly visible and understood as an entrance. Make sure that glass doors are clearly marked.</li> <li>✓ <b>Signage</b> for finding your way around should be clear, should use bold type, and should have contrast between the words and the background. Signs should be mounted to the doors or spaces they refer to – not mounted on nearby surfaces. Signs should be at eye level and well-lit. Avoid using highly stylized or abstract images or icons on signage. Think about placing signs at key decision points for someone who is trying to navigate your premises for the first time. Signs for getting to and from public restrooms are particularly important.</li> </ul>

- ✓ **Lighting** at entrances should be high powered and include natural light when possible. Avoid pools of bright light and deep shadows as they appear to be “holes” to people with vision issues.
- ✓ **Flooring** should be plain, not shiny, and not slippery. Bold patterns on carpets, curtains or wallpaper can cause perceptual problems; plain walls and flooring are recommended. Keep floor finishes flush; stepped surfaces can cause confusion. Pathways should be wide.
- ✓ **A family/unisex restroom or changing facility** will allow someone to be assisted without causing embarrassment to them or another user.
- ✓ **Quiet** areas for someone who may be feeling anxious or confused can help that person recover enough to independently complete what they were doing.
- ✓ **Seating** areas in large spaces, especially areas where people are waiting, can help someone relax.
- ✓ **Layout** of an area should be free of clutter and arranged to make it easy to move around.



**Ask the group: Thinking about this list and your physical space here at ....(name the setting you’re in), what are some barriers someone with dementia may have? What are two ideas you have to make the physical environment more dementia friendly?**

- Have them write their thoughts in their guide on page 8.
- Then ask the group to share examples.

## Part 7 of 8 – Thank You and Call to Action

	3 minutes
	<p>Thank participants for participating, offer your contact info (if appropriate), and recap:</p> <p><b>Today we learned about dementia and Alzheimer’s disease. We learned that in our organizations and community settings we can better serve people living with dementia by using effective communication tips and by having a physical environment that feels safe to be in.</b></p>
	<p><b>In the box on page 8 write down one idea you learned today that you can implement in the next month to help your organization or community setting be dementia friendly.</b></p>

## Part 8 of 8 – Resources

	5 minutes
	<p>Participant’s Guide – Page 8          Brochure or bookmark listing community resources (if available)</p>
	<p>Conclude with letting participants know about community resources.  <b>Say: To learn more about resources in your community contact:</b></p> <ul style="list-style-type: none"> <li>• <b>Alzheimer’s Association MN/ND 24/7 Helpline</b> (800.272.3900) serves people with memory loss, caregivers, health care professionals, general public, diverse populations, and concerned friends and family, and provides referrals to local community programs and services, dementia-related education, crisis assistance and emotional support. <a href="http://www.alz.org/mnnd">www.alz.org/mnnd</a></li> <li>• <b>Senior LinkAge Line®</b> provides information and assistance and connects people with resources in their community. 1-800-333-2433 or <a href="http://www.MinnesotaHelp.info">www.MinnesotaHelp.info</a>®</li> </ul> <p>Thank participants for their time!</p>
	<p>Hand out any additional resources you may have. If you have a listing of local community resources, reference that specifically. Check out <a href="http://www.actonalz.org">www.actonalz.org</a> for resources and ideas.</p>

## Section 2: Dementia Friendly @ Work

### Optional Case Study Activity

The next few pages contain an OPTIONAL case study activity if there is time. This activity will take approximately 15-20 minutes therefore it is a good additional activity if the organization would like more practice or if you have longer than 60 minutes for the presentation. **Note:** The 15-20 minute time allotted for the case study activity is not calculated into the 60 minute presentation.

	5 minutes
	<ol style="list-style-type: none"><li>1. Depending on the size of the group (15 or less), have participants get into small groups of 5.</li><li>2. Give each group a handout (or laminated sheet) of the case studies (found on page 25 of this guide) and tell them which one you want them to work on.</li><li>3. Have the small groups discuss the case study they have been assigned.</li><li>4. Ask them to write down key points on how they would handle the situation. Suggest that they can refer back to the list of communication techniques on page 5 of the participant guide to help.</li></ol> <p><b>Alternative Option 1:</b> Use the case study appropriate for the training group. Read and discuss it as a large group rather than in small groups. This may save time. Blend the practice section here with the next “debrief” section.</p>

### Debrief

	5-9 minutes
	Facilitate a group discussion for the case study and steps identified: <ul style="list-style-type: none"><li>• <b>Based on what you have learned today, does anyone have additional steps to add?</b></li></ul>
	Next you will find the case studies in italics. Following each case study are tips for dealing with each scenario. After you have facilitated a discussion for the assigned case study, reinforce the tips listed for that case study.

### **Retail Business**

*A customer appears to be having a difficult time selecting an item. When they do select the item, they turn and walk slowly to the exit. You approach this person before they leave the business. What do you say/do? If they argue with you or become agitated, what strategies can you use to calm the situation?*

- ✓ People with dementia often have little difficulty completing tasks they have done many times in the past. In fact, they may find doing such tasks to be comforting and meaningful. If they can't complete the task, it may be because they miss steps that use recent or current memory and planning.
  - Approach the person from the front slowly and calmly with a smile. If you know his or her name, use it.
  - Introduce yourself and ask if you can help.
  - Point to and offer to walk with the person to a cashier.
  - If the person argues or becomes upset, just listen. If you remain calm, it will help him or her calm down, too.
  - Apologize for your "miscommunication" and offer again to walk to the cashier with the person. You may need to let him or her walk out with the item.
  - Track what happened in the incident.

### **Faith Community**

*A long-time congregation family has mentioned memory changes with their mother. One week the family group attends a service. In the middle of the service, the mother stands up and wants to leave. She is very vocal about needing to leave, gets out of the pew, and loudly walks out. How can you support her and the family? What can you do right away to be sure she is safe?*

- ✓ People with dementia often find long-standing faith rituals to be comforting and meaningful. However, as dementia progresses, they may have a shorter attention span for an activity. They may also seem confused in settings with crowds, noise and a lot of distraction. And, the person may need to use the restroom, may be hot/cold or hungry and unsure how to communicate their needs.
  - Safety is an immediate concern. Try to get a family member to come with you and leave with the mother. (You especially may need the family member if there are many entrance/exit points for the building.)
  - Calmly, quietly and slowly approach the mother from the front. Use her name and tell her yours.
  - Walk with her and try to find a quiet place to sit and wait for the service to end.
  - At a more private time, talk with the family. Ask what the congregation can do to support them.
  - Make sure they know that the family is always welcome at services. Suggest that they sit towards the back and near an aisle so that the mother can leave when she needs to. Suggest they trade off having a family member scheduled each week as the "mom care partner."
  - Make sure clergy, ushers and other congregational support people know what is

happening and engage them in supporting the family and the mother.

### **Local Government Office**

*A community resident comes in with a bill in their hand and you believe they are here to pay the bill. The person looks confused and then becomes distracted and starts to wander toward the offices of staff members. How do you approach this person and what do you say/do? How do you move the person back to the public area of the offices?*

- ✓ This person may have brought property tax payments to this office for years. He or she is still able to do that part of the task, but has difficulty with the payment details. If the office has been remodeled or is noisy and busy, it may add to the confusion.
  - Approach the person from the front slowly and calmly with a smile. If you know his or her name, use it and tell them your name.
  - Ask if you may help them find the payment window.
  - To help move the person back to the public area, apologize for the confusion and gently turn them back to the public area by moving your body. Move slowly and calmly.
  - If possible stay with the person until they reach the appropriate window and help explain what the need is.
  - Track what happened in the incident. Check with co-workers about other interactions with this person.

### **Community or Social Service Organization**

*A regular volunteer who has early stage dementia comes to help with an event for your nonprofit organization. They become frustrated about not completing the task and not doing it well. They begin to talk loudly about their frustration. What strategies can be used in this situation?*

- ✓ People with dementia, particularly at a younger age, often find it meaningful to continue to help with community activities. For such a person, it's important that tasks are clear, direct and broken down into small steps.
  - Apologize for the directions being a bit confusing. Empathize with the person that it is frustrating to not be able to complete a task.
  - Offer to have him or her start over. Break the task into smaller steps. Be sure the work area is quiet and not too distracting. Demonstrate the task and give verbal directions.
  - Observe the person to be sure the tasks are not too difficult and help them move on to other social activities if they can no longer do the tasks you need.
  - Consider having the person complete just one part of a task. For example, folding t-shirts for the community marathon rather than folding and sorting into color and size piles.
  - Follow up with other volunteers and help them understand what this person may be experiencing. Let them know how they can help in the future.

**General (substitute any setting for “store”)**

*Option 1:*

*A customer who you have recently seen in the store with a family member is concerned because they cannot find their wallet/purse. The person has asked other people (sometimes repeatedly) in the store if they have seen the wallet/purse. The customer is sure that someone took it. What strategies can be used in this situation?*

- ✓ A person with dementia may do well when a familiar person is helping them. If they are alone, they may become confused and not sure how to carry out a task.
  - Approach the person from the front calmly and slowly, with a smile. If you know his or her name, use it. Introduce yourself.
  - Acknowledge that he or she seems to be upset about something. Empathize that it is frustrating to lose a purse/wallet. Point out that you would be upset, too, if it seemed like someone had taken your purse/wallet. Assure the person that you will help find it.
  - Move to a quiet area and ask if there is someone you can call to help. Continue to assure the person that you will help.
  - If a family member comes to help, be nonjudgmental and matter of fact with them. Let them know you are happy to help, but also let them know about your concerns for their family member.

*Option 2:*

*Your friend’s mother is at the checkout and seems confused about handling money and paying for her items. She wants to pay in cash and has opened her wallet. She gives you too many big dollar bills. What do you say/do?*

- ✓ Money can be an abstract idea for many people with dementia. They still understand the concept of paying for items with cash, but can’t make sense of the details about how the cost of the purchase relates to the cash they have. If this woman always carries a lot of cash with her, it’s also a safety issue. Connect with the family and help them get support for her.
  - Use the person’s name and let her know who you are. “Hello Betty. I’m Sue. Your daughter Carol and I are friends.”
  - Calmly take the bills she offers and, without judgment, tell her the purchase price. “Your total is \$18.95. I need one \$20.00 bill.” Make the change and give her all the extra cash back.
  - If needed, help her put all of the cash safely into her wallet.
  - Let her daughter know how much cash she had and what happened. Offer the daughter support and resources.

*Option 3:*

*You notice a person standing in the middle of an aisle and staring straight ahead. They have been there for a few minutes without moving or they appear to be waiting for someone. How do you approach this person and what do you say/do? (This scenario is a good opening to talk about wandering in the training. It would not be a surprise if this*

person were to say something about a drug store in Litchfield when you are in Marshall. Contact local police for help and contact Medic Alert-Safe Return to be sure the person has not been reported as missing.)

- ✓ Shopping at a drug or grocery store may be a very familiar outing for a person with dementia. But the specifics about what they need to do or how to complete the shopping task may be difficult. Your focus for this scenario is safety. Stay calm and offer support to this person.
  - Approach the person from the front, make eye contact and introduce yourself.
  - Ask if you may help him or her.
  - Take cues from the person. Do not argue. Offer support.
  - Move to a quiet area. If you do not know this person, ask their name and address or to see their identification card so that you can help.
  - Look for a Medic Alert bracelet for identification.
  - If possible, contact a family member to come and escort the person home. Again, if necessary, contact the police to come and help. The important thing is to make sure the person is safe and has a safe place to go.

*Option 4:*

*A community member approaches the counter but appears to have forgotten why they are there or what they need. What strategies can be used in this situation?*

- ✓ A person with dementia may know where to go for help, but not be able to communicate his or her needs. Your focus for this scenario is safety. Stay calm and offer support to this person.
  - If you know the person's name, use it and introduce yourself. Smile and stay calm.
  - Ask how you can help him or her.
  - Take any cues from the person. Do not argue. Offer support.
  - Assure him or her that you will help. Move to a quiet area. If you do not know this person, ask their name and address or to see their identification card so that you can help.
  - Look for a Medic Alert bracelet for identification.
  - If possible contact a family member to come and escort the person home. Make sure the person is safe and has a safe place to go.

**Other**

*A long-time community resident has served on many committees and leadership groups. His area of expertise is finances. He has helped prepare budgets and done audit preparations. One year he made numerous mistakes on the budget. The next year he was very confused and disorganized. How can you support him and his family?*

- ✓ Doing financial work like reports and audits requires both precise and abstract thinking. In the past, many financial tasks were done manually. Now with spreadsheets, computers and credit card transactions, the work has changed.
  - While a person with early dementia may be able to perform some tasks, they

	<p>may have difficulty with complex calculations, planning and focusing on a task. Making errors with tasks that a person has done easily for years may be embarrassing. Support the person and his or her dignity as you help them move to tasks that they can complete successfully. Share the issues with his or her family and with others on the committee so that everyone understands what is happening.</p> <ul style="list-style-type: none"> <li>• Keep the person’s dignity at the center of your communication with them and with all others involved.</li> <li>• Have another task ready that is not as complex. Let him or her know that you have concerns about errors and offer the alternative task. Perhaps they could sort and collate documents for the audit. “Bob you have been so helpful for the past 6 years getting our budgets and audits completed well, and on time. It seems like this is now a bit frustrating for you. We need help sorting and collating documents for the audit this year. We need someone who is detail focused. Would you be willing to help with these documents?”</li> </ul>
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### Conclusion

	1 minute
	<p>Conclude the debrief by saying the following:  <b>As noted earlier in this training, there are a number of reasons why a community member may appear to be confused or acting differently than usual. Our role is to notice and, when needed, help that person get to a safe environment and encourage seeking support from their health care or other provider.</b></p> <p><b>For all scenarios, track what happened. Share with colleagues so that everyone can be alert to helping this person. One incident is one incident, but several begin to make a pattern, which is important. Let family members know about the incident in a non-judgmental way and offer help and support. If the person lives alone, share the information with community professionals who can help.</b></p>



## Case Studies

### **Retail Business**

A customer appears to be having a difficult time selecting an item. When they do select the item, they turn and walk slowly to the exit. You approach this person before they leave the business. What do you say/do? If they argue with you or become agitated, what strategies can you use to calm the situation?

### **Faith Community**

A long-time congregation family has mentioned memory changes with their mother. One week the family group attends a service. In the middle of the service, the mother stands up and wants to leave. She is very vocal about needing to leave, gets out of the pew, and loudly walks out. How can you support her and the family? What can you do right away to be sure she is safe?

### **Local Government Office**

A community resident comes in with a bill in their hand and you believe they are here to pay the bill. The person looks confused and then becomes distracted and starts to wander toward the offices of staff members. How do you approach this person and what do you say/do? How do you move the person back to the public area of the offices?

### **Community or Social Service Organization**

A regular volunteer who has early stage dementia comes to help with an event for your nonprofit organization. They become frustrated about not completing the task and not doing it well. They begin to talk loudly about their frustration. What strategies can be used in this situation?

### **General (substitute any setting for “store”)**

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A customer who you have recently seen in the store with a family member is concerned because they cannot find their wallet/purse. The person has asked other people (sometimes repeatedly) in the store if they have seen the wallet/purse. The customer is sure that someone took it. What strategies can be used in this situation?

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Your friend's mother is at the checkout and seems confused about handling money and paying for her items. She wants to pay in cash and has opened her wallet. She gives you too many big dollar bills. What do you say/do?

*Option 3:*

You notice a person standing in the middle of an aisle and staring straight ahead. They have been there for a few minutes without moving or they appear to be waiting for someone. How do you approach this person and what do you say/do?

*Option 4:*

A community member approaches the counter but appears to have forgotten why they are there or what they need. What strategies can be used in this situation?

**Other**

A long-time community resident has served on many committees and leadership groups. His area of expertise is finances. He has helped prepare budgets and done audit preparations. One year he made numerous mistakes on the budget. The next year he was very confused and disorganized. How can you support him and his family?

**Notes:**