CONNECTIONS:

Engagement in Life for Persons Diagnosed with Dementia

Ellen Phipps, CTRS
Alzheimer’s Association Central and Western Virginia Chapter

Barbara Braddock, PhD
University of Virginia
Families experiencing a diagnosis of dementia will find satisfaction and meaning in their daily lives.
What on earth can we do all day?
Incidence of dementia increasing
Good Activities resources but....
Lessons Learned from Home Visitation

- Persons with a diagnosis needed to be engaged in life
- Practical solutions for engagement were missing
- Caregivers needed support
- Adult Day programs, while an excellent option, are not for everyone
Successful Evidenced-Based Programs

1. Therapeutic Recreation
2. Montessori-Based Dementia Programming
3. Cognitive Intervention
1. Therapeutic Recreation

The primary purposes of recreation services are to provide recreation resources and opportunities in order to improve health, well being, and independence.
2. Montessori-based Programming for Persons with Dementia

- Based on the process developed for disadvantaged children by Maria Montessori
- Designs a prepared environment
- Breaks activities down into steps
- Esthetically pleasing objects
3. Cognitive Intervention

Objects are placed in the environment to facilitate orientation and memory, as well as to encourage engagement in activities.
How would it be possible to provide the training and tools necessary to support and empower caregivers and offer strength-based meaningful activities at home?
DEFINITIONS

- Activity
- Meaningful Activity
- Strength-based
CONNECTIONS

WHAT MAKES AN ACTIVITY MEANINGFUL?
Meaningful Activity

- Activities are meaningful when they reflect a person’s:
  - Interests
  - Lifestyle
  - Education
  - Current level of function

  …and are enjoyable to the person!
7STAGES OF AD divided into 3 categories:

- Early Stage
- Middle Stage
- Late Stage
### COMMON SYMPTOMS
- Problems coming up with right words
- Trouble remembering names
- Trouble with performing tasks
- Forgetting material one has just read
- Trouble planning and organizing
- Forget recent events
- Mood changes

### COMMON STRENGTHS
- Able to express oneself verbally
- Able to converse intellectually
- Understands spoken language
- Able to engage in work
- Able to self advocate
- Able to write
- Able to use memory strategies
- Long term memory in tact
- Able to continue use of technology
- Sense of smell may be in tact
### SYMPTOMS AND STRENGTHS CHART
#### MIDDLE STAGE

<table>
<thead>
<tr>
<th>COMMON SYMPTOMS</th>
<th>COMMON STRENGTHS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Problems recalling current address, telephone number</td>
<td>• Ability to express some thoughts, feelings or ideas</td>
</tr>
<tr>
<td>• Confusion with date, time</td>
<td>• Able to engage in conversation</td>
</tr>
<tr>
<td>• Difficulty choosing appropriate clothing</td>
<td>• Visual awareness</td>
</tr>
<tr>
<td>• Loss of recent experiences and surroundings</td>
<td>• May be able to write</td>
</tr>
<tr>
<td>• Changes in sleep patterns</td>
<td>• May be able to read some words</td>
</tr>
<tr>
<td>• Wandering or becoming lost</td>
<td>• Able to enjoy some physical activity</td>
</tr>
</tbody>
</table>

- Able to recall some past memories
- Able to engage in modified work
- Able to recall familiar songs
- Able to gain pleasure from activity
SYMPTOMS AND STRENGTHS CHART
LATE STAGE

COMMON SYMPTOMS

• Trouble with bowel and bladder control
• Significant personality and behavior changes
• Decreased ability to respond to environment
• Need total assistance for ADLs

COMMON STRENGTHS

• May be aware of the presence of others
• May respond to touch
• Able to hear
• May be communicating through facial expressions
• Able to gain pleasure from activity
Bringing it all together: Connections

- Connecting people with dementia to meaningful activity
- Connecting communities for intergenerational experiences
- Connecting principles of 3 practice fields
- Connecting volunteers with persons with dementia

Stimulating brain cells for neurological connections.
Bringing it all together: Connections

- Person and relationship-centered
- Home and community-based
- Strength-based
- Volunteer and community partnership driven
- Supportive to caregivers and persons experiencing memory loss
- Empowering to caregivers and persons experiencing memory loss
## AIMS OF CONNECTIONS:

- Provide the necessary training, tools, and support to enable caregivers to structure strength-based meaningful programs at home for persons experiencing a diagnosis of dementia.
- Optimize the home environment for success.
- Facilitate intergenerational relationships.
- Reduce caregiver stress through enhanced interaction.
- Educate volunteers to the unique needs of families dealing with a diagnosis of dementia.
Unique strategies:

- Home Visitation / Partnered Volunteers
  - Make the Connection
  - Assess – (LIS; LQ)
  - Summarize
  - Design – focus on three
  - Guidance / support to family
  - Implement – Color coding / intervention strategies
  - Evaluate / Assess
STEPS TO CONNECTING

ASK
- What are the person’s interests, and lifestyle?
- What are the person’s CURRENT abilities?
- What is enjoyable to the person?

OBSERVE:
- Cognitive Ability Checklist (CAC)
- Leisure Interest Survey (LIS)
- Life Story Conversation Starters (LSCS)

SUMMARIZE
- Focus on strengths
TOOLS

Leisure Interest Survey (LIS)

Life Story Conversation Starters (LSCS)

Being in the moment

Cognitive Checklist – Color-Coded

Information Summary

Sample Activity Charts
DESIGNING THE PROGRAM

- Select 2 – 3 Activities from the “I” Column of the Leisure Interest Survey (a comprehensive checklist of activities)
- Determine the Color from the cognitive checklist (looks at cognition, language, orientation & memory, attention span)
- Create Activity Stations – our use mobile Activity Tool Kits
Be Flexible

- Being “in the moment” for persons in later stage
- If the chosen activity does not work, try another
Example: **RED ACTIVITY CENTER**

*Care for the animals*

**RED ACTIVITY CENTER**

*Wash hands and wipe off the bathroom counter with spray and cloth*
CONNECTIONS

BLUE ACTIVITY CENTER
Make a tuna sandwich for lunch

GREEN ACTIVITY CENTER
Indoor herb garden – smell and touch
The environment is held constant by developing consistency in:

- caregivers and volunteers;
- routines and schedules;
- location of activity centers; and
- materials.
Preliminary data shows:
- 11 of 12 participants successfully engaged in selected activities
- Caregivers reported increased confidence in structuring activities in the home

Future work:
- Data analysis
- Training / In-services
- Training Manual
- Funding Opportunities
- Faith Communities

Evaluate at each step | Adapt as needed
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References

References


Ellen Phipps, CTRS
Vice President Programs & Services
Alzheimer's Association Central & Western Virginia

The Jordon Building
1160 Pepsi Place
Charlottesville, VA 22901

Phone: 434-973-6122    Fax: 434-973-4224

ellen.phipps@alz.org
www.alz.org/cwva