

Normal Aging vs Not Normal

Presented by Shelly Edwards
Certified Trainer, Consultant and Mentor
July 10, 2020

Positive
Approach
to Care

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Overview

- Understanding Human Data Processing: What's Normal
- Dementia: What is it and What Changes?
- What Do Care Partners Need To Know
- Teepea Snow's GEMS®
- Questions & Discussion

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5 Senses How Humans Take In Data



1. What you see
2. What you hear
3. What you feel/ touch
4. What you smell
5. What you taste

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Visual Data



- **The most powerful sensory input.**

People with dementia pay more attention to what they see than what they hear.

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Auditory Data



- **What do we often do wrong?**

Care partners like to talk.

The person with dementia is focused on how we look visually and they are not processing the content.

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Make a Note



- No touching until you've done a visual/ verbal
- Don't do **"to"** someone...do **"with"** someone
- Dementia robs skill before robbing strength
- Use "hand under hand" to support

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NORMAL Aging

- Can't recall a word. Describe the word to get it to pop up.
- Give people time to process information. Go more slowly.
- Slower to think.
- Slower to do.
- May hesitate more.
- More likely to look before they leap.
- Will know the person, but not find the name.
- May pause when word finding
- New data reminds me of old data

NOT Normal Aging

- Unable to think the same
- Unable to do as before
- Unable to get started on a task
- Will get stuck in a moment of time
- Unable to think things out
- Unable to successfully place a person
- Words won't come even with visual, verbal, or touch cues
- Confused between past and present
- Personality and/or behaviors will be different

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Realize ...

*It Takes TWO to Tango ...
or two to tangle...*

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Dementia: What is it?

It is BOTH

a chemical change in the brain

AND

a structural change in the brain

This means...

It may come and go.

"Sometimes they can and sometimes they can't."

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Dementia: What changes?

- Structural changes – permanent
Cells are shrinking and dying
- Chemical changes - variable
 - ✓ Cells are producing and sending less chemicals
 - ✓ Can 'shine' when least expected – chemical rush



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Dementia Equals...

Brain Failure

The person's brain is dying



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- **DEMENTIA**
does not =
Alzheimer's
does not =
"Memory Problems"



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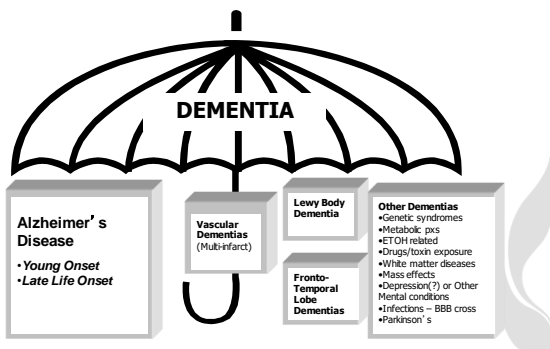
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Four Truths About Dementia

1. At least 2 parts of the brain are dying
2. It is chronic and can't be fixed
3. It is progressive and will get worse
4. It is terminal

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Alzheimer's



- Recent memory worsens
- Problems with word finding
- May misspeak
- Will become more impulsive and indecisive
- Gets lost
- Changes are noticeable every 6-12 months
- Typically lasts 8-12 years

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Mild Cognitive Impairment



- MCI is the beginning of a not-normal condition
 - ✓ Memory
 - ✓ Language
 - ✓ Behavior
 - ✓ Motor skills
- Not life altering, BUT definitely different...

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Is MCI always Dementia?

- Could be a form of DEMENTIA
- Symptom of another health condition
- Medication side-effect
- Hearing loss or vision loss
- Depression
- Delirium
- Pain-related

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Mimics of Dementia Symptoms



- | | |
|--|--|
| <p>• Depression</p> <ul style="list-style-type: none"> • can't think • can't remember • not worth it • loss of function • mood swings • personality change • change in sleep | <p>• Delirium</p> <ul style="list-style-type: none"> • swift change • hallucinations • delusions • on & off responses • infection • toxicity • dangerous |
|--|--|

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If You Notice Changes ...

- You Should
- ✓ Get an assessment
- ✓ Go see the doctor

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Dementia

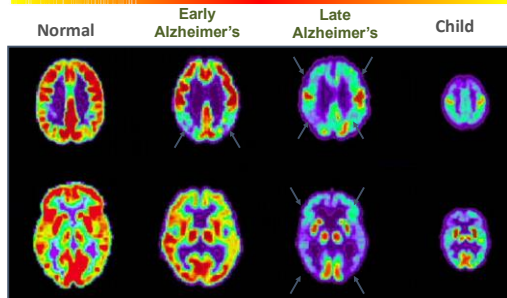


- It changes everything over time
- It is NOT something a person can control
- It is NOT the same for every person
- It is NOT a mental illness
- It is real
- It is very hard at times

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Positron Emission Tomography (PET) Alzheimer's Disease Progression vs. Normal Brains

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Normal Brain

Alzheimer's Brain

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Brain Atrophy

- The brain actually shrinks
- Cells wither then die
- Abilities are lost
- With Alzheimer's area of loss is fairly predictable
- BUT the experience is individual...

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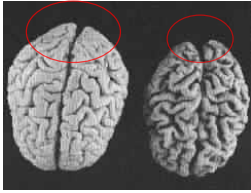
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Vision Center – BIG CHANGES



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Vision



Losses

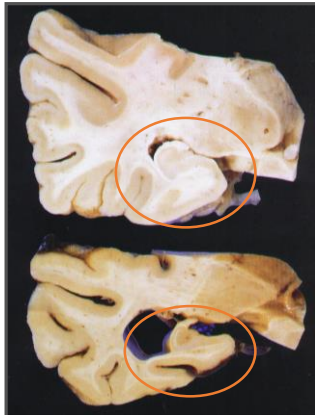
- Edges of vision – peripheral field
- Depth perception
- Object recognition linked to purpose
- SLOWER to process – scanning & shifting focus

Preserved

- 'See' things in middle field
- Looking at... curious

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Learning and
Memory
Center:
Hippocampus
– Big Change

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Memory Loss



Alzheimer

Loss

- Immediate recall
- Attention to selected info
- Recent events
- Relationships

Preserved Ability

- Long ago memories
- Confabulation!
- Emotional memories
- Motor memories

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Understanding Language – BIG CHANGE

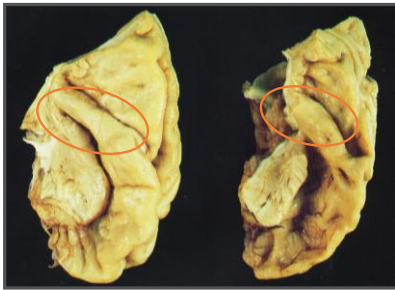


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Hearing of Sound – Not Changed



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Understanding



Loss

- Can't interpret words
- Misses some words
- Gets off target

Preserved Ability

- Can get facial expression
- Hears tone of voice
- Can get some non-verbals
- Learns how to cover



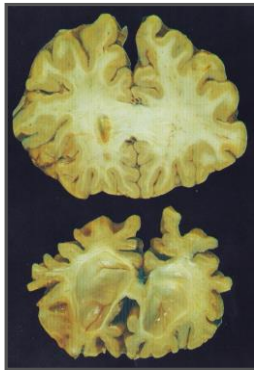
Normal

Alzheimer

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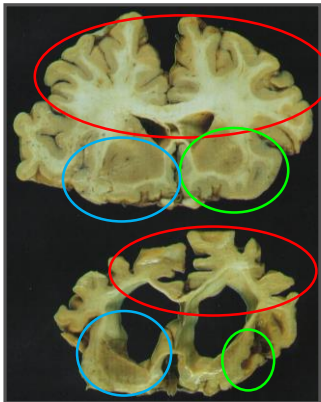
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- **Executive Control Center**
- Emotions
- Behavior
- Judgment
- Reasoning

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Sensory Strip
Motor Strip
White Matter
Connections
BIG CHANGES

Automatic
Speech
Rhythm –
Music
Expletives
PRESERVED

Formal Speech
& Language
Center
HUGE
CHANGES

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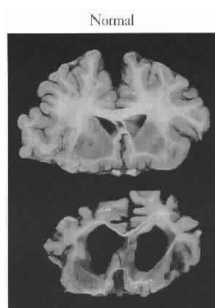
Sensory Changes

Loss

- Awareness of body and position
- Ability to locate and express pain
- Awareness of feeling in most of body

Preserved Ability

- 4 areas can be sensitive
- Any of these areas can be hypersensitive
- Need for sensation can become extreme



Alzheimer

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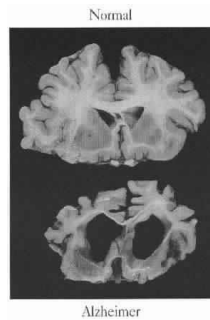
Self-Care Changes

Loss

- initiation & termination
- tool manipulation
- sequencing

Preserved Ability

- motions and actions
- the doing part
- cued activity

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Language

Loss

- Can't find the right words
- Word Salad
- Vague language
- Single phrases
- Sounds & vocalizing
- Can't make needs known

Preserved Ability

- Singing
- Automatic speech
- Swear words, sex talk, forbidden words

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The Basics for Success

- Be a Detective NOT a Judge
- Look, Listen, Offer, Think...
- Use Your Approach as a Screening Tool
- Always use this sequence for CUES
 - ✓ Visual - Show
 - ✓ Verbal - Tell
 - ✓ Physical - Touch
- Match your help to remaining abilities

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Build Skill

- Positive Physical Approach™
- Supportive Communication
- Consistent & Skill Sensitive Cues
 - ✓ Visual, verbal, physical
- Hand Under Hand™
 - ✓ for connection
 - ✓ for assistance
- Open and Willing Heart, Head & Hands

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Approach Matters

Use a consistent Positive Physical Approach™

- Pause at edge of public space
- Gesture and greet by name
- Offer your hand and make eye contact
- Approach slowly within visual range
- Shake hands and maintain Hand-Under-Hand™
- Move to the side
- Get to eye level & respect intimate space
- Wait for acknowledgement

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Supportive Communication

Make a connection

- Offer your name – “I’m (NAME)... and you are...”
- Offer a shared background – “I’m from (place) ...and you’re from...”
- Offer a positive personal comment – “You look great in that” or “I love that color on you...”

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Emotional Communication



Validate emotions

- EARLY – “It”’s really (label emotion) to have this happen” or “I”’m sorry this is happening to you”
- MIDWAY – Repeat/reflect their words (with emotion)
 - ✓ LISTEN for added information, ideas, thoughts
 - ✓ EXPLORE the new information by ‘watching and listening’ (wonder what they are trying to communicate)
- LATE – Check out their ‘whole’ body –
 - ✓ Observe face, posture, movement, gestures, touching, looking
 - ✓ Look for NEED under the words or actions

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Keep it Simple



- USE VISUAL combined VERBAL (gesture/point)
 - ✓ “It”’s about time for...”
 - ✓ “Let”’s go this way...”
 - ✓ “Here are your socks...”
- DON’ T ask questions you DON’ T want to hear the answer to...
- Acknowledge the response/reaction to your information...
- LIMIT your words – SIMPLE is better always
- Wait, Pause, Slow Down

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When words don't work well



Hand-under-Hand™

- Uses established nerve pathways
- Allows the person to feel in control
- Connects you to the person
- Allows you to DO with not to
- Gives you advance notice of ‘possible problems’
- Connects eye-hand skills
- Use the dominant side of the person

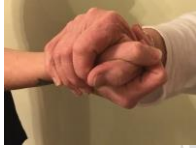
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Use Hand-under-Hand™



- Connecting – comforting and directing gaze
- Guiding and helping with movement
- Getting eye contact and attention
- Providing help with fine motor
- Offering a sense of control, even when you are doing almost everything



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For All Communication



- **If what you are trying is NOT working...**
- STOP
- Back off
- THINK IT THROUGH...
- Then, re-approach
- And try something slightly different

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Care Partners Need To



- Take care of yourself
- Understand the symptoms and progression
- Build skill in support and caregiving
- Build skill in communication and interactions
- Understand 'the condition' of brain change
- Identify and utilize local resources
- Set limits for yourself

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Gem Dementia Abilities

Based on Allen Cognitive Levels



- A Cognitive Disability Theory – OT based
- Creates a common language and approach to providing:
 - ✓ Environmental support
 - ✓ Caregiver support and cueing strategies
 - ✓ Expectations for retained ability and lost skill
 - ✓ Promotes graded task modification
- Each Gem state requires a special 'setting' and 'just right' care
 - ✓ Visual, verbal, touch communication cues
- Each can shine
- Encourages in the moment assessment of ability and need
 - ✓ Accounts for chemistry as well as structure change

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People living with dementia
need care partners to think about and act on
what they want, need, and think.

Watch and Observe

- What they show you- how they look
- What they say – how they sound
- What they do – physical reactions

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What's on your mind?



Enter your question in the chat box on the right side
of your screen.

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Apparent Plan

- Tracy Keibler, Director
- tracy@apparentplan.org
- 952-215-7052



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Additional Resources

- Ted Talk with Karen Stobbe. Using use the rules of improvisation to break through conventional caregiving techniques and open up new worlds for persons with dementia.: https://youtu.be/GciWltvLo_s
- Family Caregiver Alliance (www.caregiver.org) - they have a behaviors page: <https://www.caregiver.org/caregivers-guide-understanding-dementia-behaviors>
- ACT on Alzheimer's is a good resource for connection to dementia-friendly resources and information on making churches dementia-friendly (www.ACTonALZ.org).

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Additional Resources, pg. 2

- Positive Approach to Care (www.teepasnow.com) – Consulting services – free 30 minute consultations to discuss any issue around support someone living with dementia or brain change; webinars, tools, etc.
- Find Teepa Snow on Facebook – she is live every day at 8 am EST, PAC team is live week days 5 pm EST.
- Questions about Lewy Body Dementia, check out www.lbda.org
- Questions about Fronto Temporal Lobe, check out www.theaftd.org

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Additional Resources, pg. 3

- **Positive Approach to Care, LLC.** Teepa Snow Positive Approach to Care Certified people are trained in a variety of dementia education levels.
 - **Trainers** can give presentations and/or do training sessions for your church or community. Trainers often present in churches for free.
 - **Consultants** work with family members or a person living with dementia looking for care resources or help on the journey
 - **Coaches** if you are looking for assistance in helping staff learn how to work better with those they are caring.
- If you have any questions in general, you can reach out to Shelly Edwards, Business Development Coordinator for Positive Approach to Care at shellye@teepasnow.com or visit www.teepasnow.com for more info.

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DEMENTIA & THE CHURCH
WEBINAR SERIES II

Shelly Edwards July 26 12:00pm CDT	Normal vs. Not Normal: Aging and Keys to Connecting with Someone Living with Dementia This session emphasizes the value of reaching helping behaviors to the person's needs and related abilities to provide a sense of control and self-direction. www.mcdiscipleship.org/webinars/2020-normal-vs-not-normal-aging-and-keys-to-connecting-with-someone-living-with-dementia
Shelly Edwards August 27 12:00pm CDT	Tools for Connecting with People Living with Dementia when Behaviors are Challenging The goal of this session is to reduce or minimize unproductive conversations and reactive behaviors by using effective verbal and physical skills. www.mcdiscipleship.org/webinars/2020-tools-for-connecting-with-someone-living-with-dementia-when-behaviors-are-challenging
Eric Carlson September 13 12:00pm CDT	Common Challenges in Nursing Homes and Memory Care and How to Avoid Them This presentation is a guide for help caregivers, who either anticipate a future need for skilled care or those who are already utilizing skilled care. www.mcdiscipleship.org/webinars/2020-common-challenges-in-nursing-homes-and-memory-care-and-how-to-avoid-them
Terrie Lewis November 3 12:00pm CDT	Essential Documents for Protecting You and Your Loved One Living with Dementia In this session, we will discuss the legal documents, how they are used, how they should be reviewed and the steps to avoid these pitfalls. www.mcdiscipleship.org/webinars/2020-essential-documents-for-protecting-you-and-your-loved-one-living-with-dementia

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