This toolkit is intended for use by anyone (residential provider, community member, in-home care, family) caring for an individual who may have dementia.

To navigate the toolkit, use the following documents:

- My History Form
- My Future Form
- Observation Form
- Behavioral Communication Flowchart
- Plan of Action

Care Continuity:

Residential providers are encouraged to keep the forms in the person's chart, readily accessible to staff.

Individuals receiving in-home care are encouraged to have the documents available for their caregivers. If a change in care setting or provider occurs (example hospitalization, respite, new caregiver staff hired) provide these documents for care continuity.

To Begin:

Utilize the My History and My Future forms. The individual should complete their own My History and My Future forms when able. It is recommended to ask family or friends to provide information or complete the My History and My Future forms when the individual is unable to complete the forms independently. Begin this conversation early as the individual diagnosed with dementia being able to participate adds to the personalization of the information gathered. If you are a Residential Provider, you may wish to add these forms to your new admission packet. These forms may be used at care conferences as well to generate conversation regarding the individuals past actions/behavior/norm and how the individual envision their care to look in the future. No need to wait until there is a problem or concern. Being knowledgeable of the individual likes/dislikes, routine, history etc. will allow staff to be proactive using a strength-based process which may fend off potential behavioral communications and will give you a general understanding of who the individual is.

Is there a Problem Behavior NEEDING to be Fixed?

Begin utilizing the Observation form. Complete using specifics to better determine triggers as well as what works to alter the behavioral communication being displayed by the individual. Don't be afraid of documenting the small most unusual details as this may be the trigger. The purpose of the Observation form is to assist you in determining trends as well as triggers. A separate Observation form needs to be created for each specific problematic behavioral communication you wish to track.

Follow the flow chart (next page) or Problem Behavior Flowchart (Dementia Toolkit). Choose the one that works best for you.

Does the behavior put someone at RISK?

- No – This is not really a PROBLEM behavior for the person with dementia. It may be irritating or embarrassing for the caregiver, but it is really a "SO WHAT" behavior.
  - ✓ Learn to let it go!
  - ✓ Leave it alone!
  - ✓ Don't sweat the small stuff!

- Yes – It is time to PROBLEM SOLVE!
  1. Describe the behavior in detail using the ***Observation Form***.
     - Where does it happen?
     - When does it happen?
     - Who is involved?
     - How does it start? Stop?
     - What is said? Done?
  2. Answer these questions using the ***Personal History Form***. Consider emotional and physical unmet needs.
     - Could the level of dementia explain some of this behavior?
     - Could how the person is approached or helped have some impact?
     - Does the person have other medical or psychiatric conditions that might be active or a contributing factor?
     - Could personal history (work, leisure, family, religion, personality, routines, etc.) play a role?
     - Could the environment or cues in it be causing some of the trouble?
     - Could the time of day or personal habits be a factor?
  3. BRAINSTORM with the Puzzle Pieces
     - Partner with all formal supports and actively involved informal supports. You are not alone!
  4. Come up with a ***PLAN OF ACTION***! See plan of action in paragraph below.
     - Decide on **what** to do
     - Decide **who** will do what
     - Decide **how** to do it
     - Decide **when** to start it and when to look again
  5. Are things better?
     - Yes – CELEBRATE! Woo-Hoo!
     - No – RETHINK and problem solve again

Plan of Action

The purpose of the plan of Action is to be available to daily caregivers as a tool to work more effectively with the individuals they support. The Plan of Action is a fluid document and is expected to be updated as new trends and triggers are noted and new interventions are discovered as well as those intervention attempts that become ineffective. A separate Plan of Action needs to be created for each specific problematic behavioral communication needing to be addressed.

If you have questions, please feel free to reach out to:

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