

Caring for Yourself While Caring for Others

Module 5: Tips for Maintaining Health and Safety When Working With Clients With Dementia



TRAINER'S GUIDE

Practical Tips for Homecare Workers

STAY SAFE AT WORK

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health



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Module 5: Tips For Maintaining Health and Safety With Clients With Dementia

Learning Objectives:

By the end of this training, participants will be able to do the following:

- Identify the health and safety risks of working with people with dementia.
- Explain factors that contribute to clients with dementia becoming agitated and potentially dangerous to themselves and homecare workers.
- Discuss approaches to make homecare workers as physically safe as they can be when working with clients with dementia.
- Apply effective techniques to keep clients with dementia calm and manage situations when they become agitated and potentially dangerous.

Workshop at a Glance

Activity	Time	Materials
1. Welcome and Introductions— Understanding Dementia	15 minutes	Easel, prepared flip chart page, markers, handouts, PowerPoint slides
2. Understanding the Risks When Working With People With Dementia	15 minutes	Prepared flip chart page, handouts, PowerPoint slides
3. Keeping the Physical Environment and Activities as Safe as Possible	20 minutes	Handouts, PowerPoint slides
4. Physically Interacting With People With Dementia to Keep Them Calm	15 minutes	Prepared flip chart page, handouts, PowerPoint slides
5. Promoting Calm and Positive Verbal Interactions With People With Dementia	45 minutes	Prepared flip chart page, handouts, PowerPoint slides
6. Responding When a Person With Dementia Poses a Danger	10 minutes	Handouts, PowerPoint slides
Total Time	2 hours	

Module 5: Tips For Maintaining Health and Safety With Clients With Dementia

Preparing to Teach:

1. Review the Trainer’s Guide and background materials, and prepare to present.

Read background information, including *Caring for Yourself While Caring for Others*, and the NIOSH Hazard Review “Occupational Hazards and Home Health Care.” This will give you extensive background to support your presentation.

Note: This module will be most effective when presented by a trainer with extensive personal knowledge of, and experience with, clients with dementia. Other trainers will need to read background information on dementia to be successful presenting the module. One resource is the Alzheimer’s Association publication *Dementia Care Practice Recommendations for Professionals Working in a Home Setting, Phase 4*.
http://www.alz.org/national/documents/phase_4_home_care_recs.pdf

Instructions for conducting training are in the “Detailed Lesson Plan” in black.

Tips for Trainers are in shaded boxes.

Please note that the emphasis is on creating a positive, welcoming, and safe environment for dialogue. Focus on encouraging participation and affirming the contributions of participants to the discussion. Thank participants for their role as homecare workers and their dedication.

A risk when teaching health and safety is to “blame the workers” for not upholding the safest practices, which leads to ineffective training and difficulty with day-to-day problem solving. The goal of this course is to empower workers to identify the risks they may face on the job, determine if there are any needed tools or equipment, and pursue safe practices by enhancing their understanding of the pressures, circumstances, and environmental factors that can challenge them and undermine their health and safety. By being supportive, encouraging, and informative, the trainer allows participants to openly explore and more fully understand these challenges, develop strategies that will allow them to positively uphold safety and health, and engage their agencies and employers to work with them to address concerns.

As well as using these tips, think of personal examples related to each of the topics. Personal examples not only encourage discussion—they also provide a model of the type contributions you hope to receive.

Suggested scripts are in **purple**. As you become more familiar with the workshop, feel free to use your own words to convey the key points.

Class size matters! Activities are designed for groups of 8–14 participants to best engage each individual. If you present to larger groups, you will need to adapt some activities, and some participants won’t have time to speak. Large groups need more time for activities and modules.

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2. Place handouts (1 packet for every participant) at each seat before the workshop, and include an evaluation form.

Distribute printed copies of PowerPoint show at the conclusion of the workshop. (It may be printed 2, 3, or 6 slides per page.)

3. Prepare flip chart pages in advance:

- Activity 1—Understanding Dementia.
- Activity 2—Emotions and Behaviors that Create Health and Safety Risks.
- Activity 4—Approaching a Client With Dementia: Do's and Don'ts.

4. Bring the following supplies:

- A package of pens for participants.
- 2 easels and flip chart paper.
- Laptop computer, LCD projector, and screen.
- Markers.
- Painter's or masking tape.

5. Make sure your room is ready:

- Set up chairs and tables in a square or U shape so all participants can see one another. Using round tables with four participants each is an alternative, but not as likely to encourage engaged attention to full-group discussions.
- Have refreshments ready if applicable.
- Arrange for AV equipment and set up PowerPoint to title page before class.
- Set up the easel with the prepared flip chart pages at the front of the room.
- Unless you are using sticky flip chart pages, it's helpful to put some short pieces of tape along the easel to use during the training.

6. For Activity 4, recruit a volunteer to play the role of the person with dementia for the role plays, so you can review the scripts with him or her and prepare before the session.

Tips for Trainers

Your approach to this introduction sets the tone for the entire workshop!

Speak warmly and enthusiastically to convey:

- The importance of the information to be covered.
- Your real concern for workers' well-being.
- Your belief that participants intend to do their jobs well while protecting the health and safety of themselves and their clients.

Detailed Lesson Plan

Activity 1: Welcome and Introductions, Understanding Dementia

Materials: Easel, prepared flip chart, markers, handouts, PowerPoint slides

Time required: 15 minutes

1. Welcome participants to the workshop.

Display the title slide of the PowerPoint, read the workshop title, and mention the host of the program. Introduce yourself, display slide 2 of the PowerPoint, and play the short video. Then review the purpose of the workshop as listed in the session goals on slide 3.

Say:

“Hello! This is the workshop *Caring for Yourself While Caring for Others—Tips for Maintaining Health and Safety With Clients With Dementia*. My name is _____.

“It’s a pleasure to be here with you and have the chance to discuss your health and safety as you provide care, support, and services to clients with dementia. This can be one of the most challenging and rewarding jobs for homecare workers.

“Our goals are on this slide. We want to:

- “Identify the health and safety risks of working with people with dementia.
- “Expand your understanding of the factors that contribute to clients with dementia becoming agitated and potentially dangerous to themselves and workers.
- “Discuss ways to be as safe as you can when working with clients with dementia.
- “Help you apply effective techniques to keep clients with dementia calm, and manage situations when they become agitated and potentially dangerous, so that you can reduce the chances of getting injured on the job.

Tips for Trainers

- You may have to remind participants to give only one or two points. This gives everyone a chance to contribute.
- You may also have to reframe or correct a contribution. If very negative and judgmental statements are made, detect the value in them and try to reframe them as positive or compassionate descriptions of living with dementia. If they are incorrect, be sure to make the correction in as positive and affirming a way as you can.

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“Although the session is designed for you as homecare workers, we believe this information can be important for clients, also. Depending on your understanding of your clients’ current condition, we encourage you to share what you learn with clients, and with their families and other caregivers.

“Each of you has a packet of handouts with space for taking notes. At the end of the workshop, I’ll distribute copies of the slides we’ll be seeing, so you will have that information as well.”

2. Invite participants to introduce themselves and facilitate a discussion about dementia.

Display the prepared flip chart with the title “Understanding Dementia,” as well as slide 4 of the PowerPoint presentation, and explain how the introductions will be done.

Say:

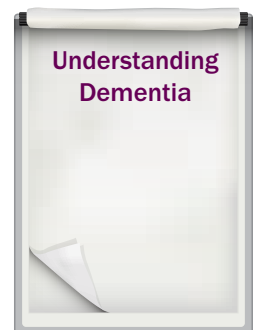
“Now I’d like you to introduce yourselves.

“We’ll start with a volunteer, and I’d like each of you to share your name, your role at work, and how long you’ve been working in homecare.

“Then, please share one thing you know or understand about dementia. You may understand the causes of it, the symptoms, how it impacts people and families, or how it progresses. It’s also completely fine if you don’t already know a lot about it—we’re just beginning our conversation today by seeing what people know. I’ll write your responses on the flip chart and discuss any points that I think we might need to clarify. Please note that page 2 of your handouts has room to take notes.”

Ask for a volunteer to begin, and write his or her point on the flip chart quickly. Then have the first volunteer invite a person to his or her right or left to continue. In order to keep introductions to 10 minutes, keep calling on the next person to speak, restating the questions you’ve asked them to answer, and encouraging them to share their point about dementia.

Once introductions are complete, show slides 5–7 to give an overview of dementia. Offer examples to illustrate the points. Highlight ideas they’ve already given as you cover the information on the slides. Participants are likely to have mentioned other symptoms not on the list, such as agitation, perseveration, wandering, or



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incontinence. Note that dementia is a complex and challenging condition, and it is hard to capture it in a few minutes.

Wrap up by thanking everyone for contributing, and explain that you'll now be moving on to consider the health and safety risks involved in working with clients with dementia.

Activity 2: Understanding the Risks When Working With People With Dementia

Materials: Prepared flip chart pages, handouts, PowerPoint slides

Time required: 15 minutes

1. Introduce and conduct individual vision activity (5 minutes).

Show slide 8.

Say:

“We’re now going to do an exercise that asks you to put yourself in the shoes of someone with dementia. Please close your eyes, and as I speak, imagine how you would be feeling, how you might react to others, and what you might do if you found yourself in this situation and experiencing these things. Are you ready? Close your eyes.

“I can’t remember your name. I know I should. It’s so frustrating! Who are you? Why are you here? Is this my home?”

“They say other people will clean my house and make my meals. Those are my jobs! How can they act like I’m not capable of doing things? I hate having other people I don’t even know in my home! This is just wrong.”

“Where’s Joe? Why isn’t he home? He’s late! Did he call? Why isn’t he home? He should be here! Why isn’t he home yet? What day is it? He shouldn’t be late today! He’s never late! Where’s Joe? When is he going to get home? Did something happen to him? Where is he? Why isn’t he home?”

“All of a sudden, I found myself on a strange street, with no idea where I was. A policeman pulled up, talking to me as if I was a misbehaving child, ‘What are you doing out here this time of night?’ I looked down and I was in my pajamas! What was going on?”

Tip for Trainers

Be sure to speak with inflection and varying degrees of agitation. Convey the common feelings of people with dementia through your tone and presentation.

“Where’s my purse? You stole it, didn’t you! All of you! You’re just trying to steal me blind. Oh, you act nice, but I know. You’re trying to take my money. How dare you! Get out of my home!”

“They’re trying to stop me! I have to get to the bathroom! Why won’t they let me go? I have to go. Oh no! Now look what’s happened! Oh no!”

“OK, please open your eyes now.”

2. Identify the behaviors and underlying feelings that cause health and safety risks for workers providing support to people with dementia (10 minutes).

Ask participants how they felt as they listened. Accept a couple of comments. Say you now want them to identify the behaviors and emotions that can create health and safety risks for workers who help people with dementia. Ask for a volunteer to name just one behavior and one emotion, encouraging them to draw on how they felt as you spoke to them as someone with dementia.



List behaviors and emotions on the flip chart, giving and inviting examples to further explain participants’ ideas. Remind participants that they can take notes on page 2 of the handouts. After many ideas are offered about client behaviors and emotions, say this to participants:

Tips for Trainers

It can help to give an example from your own experience. Or, use these examples:

- “A client does not realize her son died in the military and thinks he should be home from school. She has just asked you for the 15th time in 30 minutes where he is, and you have tried everything you can think of to distract her. You feel as if you’ll scream if she asks you again.”
- “Your client thinks you are a woman her husband was attracted to, and she becomes angry at you, accusing you of leading him on. She has resisted everything you do. When you offer your hand to take her to the bathroom, she roughly slaps it away. You are hurt and angry.”

“Now, I want you to think about how you might feel and react when working with clients who display these behaviors and express these feelings. What could a homecare worker do that might make their clients even more agitated?”

Gather responses. You will want to draw out that working with people with dementia can be frustrating, can try a worker’s patience, and can even cause a worker to become angry with the client. Emphasize that these feelings are normal, and nearly universal, and that it is important to acknowledge and accept clients with compassion for ourselves as well as them. This is a real aspect of living with and working with dementia for everyone concerned. Highlight how, despite—and even because—of these feelings, it’s crucial for homecare workers to stay calm and positive in order to have the best experiences with people with dementia, and to reduce the health and safety risks for both the client and the worker.

3. Discuss challenging behaviors

Show slides 9, 10, and 11, reviewing the points and highlighting examples from the earlier discussion. Again, emphasize that it’s important to have compassion for clients and themselves, because dementia can be so challenging. Discuss any additional questions or concerns participants express.

4. Review health and safety risks of working with people with dementia. Show slide 12 to wrap up this discussion. Invite questions or comments.

5. Introduce strategies to enhance health and safety when working with clients with dementia

Show slide 13 and note that responding to the health and safety risks just covered tends to fall into three categories:

1. Keeping the physical environment as safe as possible.
2. Physically interacting with people with dementia in ways most likely to keep them calm.
3. Helping restore calm when they become agitated, and trying to ensure through verbal interactions an emotional environment that is as calm and positive as possible.

Explain that you’ll begin with the physical environment.

Activity 3: Keeping the Physical Environment and Activities as Safe as Possible

Materials: Handouts, PowerPoint slides

Time required: 20 minutes

1. Conduct Large-group Activity.

Introduce the importance of the physical environment, being sensitive to how changing it can be hard for clients with dementia.

Say:

“As you can imagine, the home environment can hold many more risks for people with dementia than it does for people with normal cognitive abilities. We’re going to review tips for keeping the home environment safe. First, I will point out that—as much as possible—we want to minimize change in the environment of a person with dementia. Why is that important?”

Invite a volunteer to answer your question and discuss. You will want to emphasize, given how much confusion some people with dementia have—and how stressful this can be for them— that adding change can be more stress that you want to avoid. Display slide 14 and review the overall purposes of keeping the environment safe.

Say:

“In spite of changes being potentially stressful for a client, you will want everyone to be as safe as possible. So, you, your agency, or the client’s family members or caregivers may decide that some aspects of the environment need to change. You will want to draw upon your understanding of the person with dementia to introduce these changes and make them in ways likely to reduce their agitation.

“Now, let’s look at the tips. Please turn to page 3 of your handouts. I’d like a volunteer to read tips 1 and 2, and then explain why they may be important.”

Call on a volunteer to read the first two tips and explain their importance. Affirm or reframe the volunteer’s explanation regarding why these tips are important, adding any information necessary to ensure participants’ understanding. The next

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participant will read tips 3 and 4, and explain their importance. Continue until all the points have been reviewed.

2. Review safe approaches to activities

Display slide 15 and introduce the topic of doing activities with clients as safely as possible. Note that it's important to support clients in doing all that they can, for their physical health—but also for their cognitive and emotional health. Supporting them in doing as much as possible takes great patience and careful attention to communication. Ask participants to turn to page 4 of the handouts and review the safe activities tips and tools, engaging participants in reading and discussing them as time allows.

3. Wrap up this activity by thanking participants for their great contributions.

Ask for any questions or concerns participants have, and discuss as necessary. Say that you will now move on to a discussion of how to physically interact with people with dementia in ways that are likely to keep them calm.

Activity 4: Physically Interacting With People With Dementia in Ways That Are Likely to Keep Them Calm

Materials: Prepared flip chart page, handouts, PowerPoint slides

Time required: 15 minutes

1. Conduct Demonstration Role Plays and Debrief.

Invite a volunteer to come to the front of the room to demonstrate physical approaches. Explain that you will ask this person to play the role of a person with dementia. Invite her or him to recall one of the concerns you had read earlier in the vision activity, share it with others, and then to use it to imagine the frame of mind of the person in the role plays. If the person has difficulty remembering one, give one for them to use, such as, “**Imagine that you are having difficulty remembering who I (your caregiver) am, and you’re worrying why I’m even with you and in your house.**” Ask the person to take a seat at the front of the room.

Say:

“I’m going to role play a number of ways a homecare worker might physically interact with a person with dementia. Your job is to decide if you think the approach I’m using is likely to be safe and positive or not, and then to identify why you think what you do. Are there any questions?”

Discuss any questions participants may have.

Role Play 1:

Begin the role play.

Trainer: Walk up to volunteer from behind, clamping your hand on his or her shoulder and saying loudly, “Mary (or Tom), it’s time for your bath.”

Volunteer: Flinches or jumps a little in response.

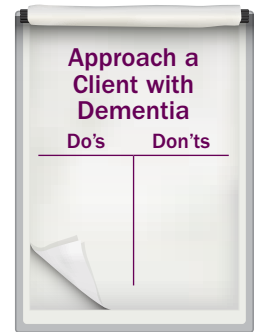
Stop action and turn to participants, asking them if how you’ve approached the client

Tips for Trainers

Make arrangements with a volunteer in advance, explain the role plays, and discuss his or her role as a person with dementia. Include Role Play 4, in which you want him or her to get up when you request.

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is good or not good. Invite them to identify any “Don’ts” they saw or heard, and what they would suggest as better ways for approaching a client. Write responses on the flip chart and point out that page 5 of the handouts has room for them to take notes.



Try to draw out that approaching a person with dementia from behind and heavily touching the client could easily startle him or her. Participants may also say that talking too loudly might be negative. Ask for their suggested “Do’s,” and add them to the flip chart. These may include: approaching the person from the front, not touching him or her right away, and speaking in a normal tone. If participants are experienced in working with clients with dementia, they may also suggest bending down at the knees to be eye-to-eye with the client. If so, add this point to the flip chart.

Role Play 2:

Conduct the next role play, using all of the “Do’s.” If they do not mention speaking to the client at eye level, conduct this role play:

Trainer: Stand over the volunteer and look down at him or her, saying, “Time to go! You need to take a bath!” Do not touch the person.

Debrief again, reaffirming that the “Do’s” cited after the last role play work well. Ask for any new “Do’s” and “Don’ts,” and add them to the flip chart. If no one mentions that you might want to get down to the person’s eye level, ask participants: “How do you feel when you are sitting and someone talks to you while standing above you?” Lead the discussion so that “Don’t talk down at them” is added to the “Don’ts” and “Speak to them eye-to-eye” is added to the “Do’s.”

Alternative Role Play 2:

If, after Role Play 1, a participant had added the idea that the worker will want to bend down to the client’s eye level, do this role play.

Trainer: Walk up to the client, bend down at your knees so that you are at eye level, and say, “Time to go! You need to take a bath!” Do not touch the person.

Stop the role play. Debrief and add any new “Do’s” and “Don’ts” to the flip chart.

Explain that you are now going to continue your approach to the client.

Role Play 3:

Trainer: Walk up to the client quickly, bend down and say, “Come on honey, it’s time for your bath.” Grab the client by his or her hand and start to pull up to move him or her into a standing position.

Volunteer: Appear startled when grabbed by the trainer, and pull back a little.

Stop the role play. Ask participants, “What “Do’s” and “Don’ts” did you see this time?” Discuss their responses, and be sure to lead discussion so you can add these “Don’ts” to the flip chart: don’t come toward the person fast, don’t grab at the person or touch him or her without warning, don’t call the person names other than his or her own. “Do’s” will include: approach a person slowly, offer your hand for them to take, and call them “Miss” or “Mister” or by the name you learn they prefer and easily recognize.

Role Play 4:

Say that you are now going to do the last role play.

Trainer: Offer the volunteer your hand. Say, “Can you please come with me? I’ve run your bath with the salts you like, and it’s nice and warm. I think you’re going to enjoy how it feels.” As you speak and the client rises, move to his or her side and gently take an elbow, walking with him or her slowly to the side of the space.

Volunteer: Rise and take the trainer’s hand, allowing the client to slowly walk with him or her to the side of the space.

Stop the role play and debrief again. Draw out the following “Do’s” and add to the flip chart: move to the side so person can move, offer gentle support, speak reassuringly. Discuss any comments or other ideas that arise.

2. Wrap up activity by reviewing listed tips.

Thank the volunteer, and lead participants in a round of applause for him or her. Show slide 16, and review the tips listed, highlighting ideas that have and haven’t already been mentioned. Give additional details presented on page 6 that you want to stress. Let participants know that page 6 of their handouts has the tips and additional details. Invite questions before moving on to the next topic: tips for interacting verbally in ways that will help avoid health and safety risks with people with dementia.

Activity 5: Promoting Calm and Positive Verbal

Interactions With People With Dementia

Materials: Prepared flip chart page, handouts, PowerPoint slides

Time required: 45 minutes

1. Draw out the themes from the workshop to this point (3 minutes).

Ask:

“What are the common themes you see in our discussions to this point?”

Ask for a volunteer to contribute one idea and thank him or her. Continue gathering a few more ideas and thank participants for their thoughtful responses. Themes you are hoping for include these: stay calm, manage your own frustration, understand how confusing and challenging it is for them, come to know them well so you see signs quickly, adjust to their current needs, be patient, don't crowd them, don't rush them, and don't take it personally when they lash out at you. Also mention that compassion for both workers and clients as they manage living with dementia is important.

2. Introduce the 3Rs Strategy: Respond, Reassure, and Redirect (7 minutes).

Show slide 17 and introduce the “3Rs Strategy” that is designed to help homecare workers remember how to effectively talk with people with dementia, particularly when they become upset or agitated. Note that “talking it over” with people with dementia requires very special skills. Ask participants to turn to page 7 of the handouts, and review the points, using the examples to illustrate the strategy. Invite questions and other examples from participants and discuss any challenges they present, demonstrating how they might apply the strategies in various situations.

Tip for Trainers

You may want to have participants work with people they don't know as well. If so, have them call out 1 to 4 as many times as necessary, and then form groups with others who called out the same number. You can also have them just meet with others sitting next to them.

3. Set up small-group activity (15 minutes).

Show slide 18, and explain you will have participants use the 3Rs Strategy in real situations. Break participants into four groups. Ask the groups to turn to page 8 in their handouts, and assign each group one of the four scenarios. Let them know they will have 5–10 minutes to develop an interaction between the homecare worker and the client. Their job is to imagine what the worker might say to respond, then imagine a client’s answer to that response, and then do the same for a reassurance and redirection. Present this scenario as an example.

Say:

“For example, consider the scenario that you are cleaning the bathroom after helping Mr. Fike into his easy chair. You hear a crash and rush into the next room, seeing that he has dropped a china figurine. The family had insisted the figurine stay with him because it had sentimental value to him. He is distressed and trying to get up and away. ‘Oh no! I’m going to be in so much trouble!’ he says.

“Your response: ‘It’s OK, Mr. Fike. Please sit down, and I’ll clean it up and maybe we can fix it. No one’s going to be upset with you.’

“He answers: ‘What do you know? My mother will be furious that I broke her dog!’

“Your reassurance: ‘She’s not here right now, and we’ll have this cleaned up before she gets back. I’ll glue it back together. You don’t have to worry.’

He answers: ‘I don’t know. She’ll see. She’s going to be upset.’

Your redirection: ‘Look, I’m picking it up, and I’ll fix it. She’ll never know. How about if I put on the radio so you can listen to some music?’”

Note that you want participants to create a realistic interaction, though real ones are likely to be much more complicated than the exercise is asking for. They just need to come up with the three exchanges.

4. Conduct small-group activity.

Circulate among the groups as they work, offering to answer questions and give help as necessary. At 5 minutes, ask all groups how they are doing and give them 2–5 minutes as

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needed for them to complete their scenarios. Give them a 1-minute warning, and ask them to wrap up and be ready to present their scenario.

5. Facilitate small-group reports (20 minutes).

Ask for a group to volunteer to go first and to read or role play their scenario. Discuss how the group applied the 3Rs Strategy, and invite feedback from others in the room. Continue until all groups have presented.

6. Wrap up activity.

Thank the participants for their good work on the scenarios and ask if there are any questions or concerns about using the 3Rs Strategy. Lead participants in a round of applause for themselves. Explain that, as hard as they try to keep a safe and healthy home for people with dementia, clients may become agitated enough that they strike out and create a danger to themselves and others. We'll look at what to do if that happens next.

Activity 6: Responding When a Person With Dementia Poses a Danger to You, Him or Herself, or Others

Materials: Handouts, prepared flip chart pages.

Time required: 10 minutes

1. Explain how to handle situations when the client poses a danger to the homecare worker, him or herself, or others.

Emphasize that there may be times when a client becomes upset and physically aggressive, despite a homecare worker's best efforts. Show slide 19 and discuss the reasons listed there, giving details from the top of page 9 of the handouts, which you can invite participants to turn to. Invite any quick discussion, and emphasize that it's important to assess the cause of aggressive behavior—but in the moment when aggressive behavior occurs, workers need to understand how to respond most effectively.

Stress the importance of knowing their agencies' policies and practices regarding how to handle these kinds of situations. It's also important to understand the expectations of clients' families and other caregivers. Discuss this if participants have questions.

Display slide 20 and review the bullets on how to handle situations that have become unsafe. You may want to demonstrate the physical stance instructions with a volunteer as time allows. Again, invite questions and comments.

Tip for Trainers

You may want to hand out and review your agency's own policy.

2. Wrap up the Workshop.

Thank the participants for their great participation throughout the workshop and for their commitment to working with people with dementia, which is hard and very important work. Offer your hope that the session has been helpful to them, and wish them the best in their future work. Offer any additional assistance you have available, and give details of any more sessions you plan to offer.