Brain Health & Dementia Awareness in Our Communities

Training Manual:

A Guide to Help BDAC Trainers Lead Workshops

Remember to bring this with you to each training session!

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Training at a Glance

SUMMARY

This resource is designed to guide trusted messengers from community and faith-based organizations in facilitating 90–120-minute group conversations about brain health, potentially modifiable risk factors, the benefits of early dementia detection, and available supports and resources for people living with dementia.

LEARNING OBJECTIVES

Participants will be able to...

- Learn about and reflect on brain health and dementia in our communities
- Understand potentially modifiable risk factors and the benefits of early detection for dementia
- Explore resources for further learning, action, and support around brain health and dementia

TRAINING OUTLINE

TIME	TOPIC	CONTENT	ACTIVITIES/MATERIALS
10 min	Opening : Welcome & Introductions	 Welcome participants & facilitate introductions Share learning objectives & expectations 	 Activity: Introductions (Participant Handout)
15 min	Section 1: Dementia in our Communities	 Living with dementia has its challenges, and a supportive community can help Define dementia and illustrate the many ways it can present Share stories of dementia in our own lives and communities 	• Activity : Think-Pair-Share (Participant Handout)
20 min	Section 2: Benefits of Early Detection	 Early dementia diagnosis can increase quality of life Outline benefits of early detection Explore how to talk about dementia 	Activity: Practice Talking to My Medical Provider (Activity Handout)
35 min	Section 3: Potentially Modifiable Risk Factors	 It is never too early or too late to improve brain health; Small lifestyle changes can make a big difference Discover potentially modifiable risk factors Identify and consider committing to reasonable and meaningful lifestyle changes 	• Activity: Choose to Make Change (Red, Yellow, Green Rate Cards)
10 min	Wrap-Up: Thank You & Next Steps	 We are committed to connecting with you and to connecting you with resources Review key takeaways, revisit learning objectives & highlight resources Thank participants for attending and engaging 	• Activity: Final Reflection (Wallet Card)



Training Prep

BEFORE THE WORKSHOP

Confirm Training Logistics

Confirm training location, projector/screen access, and the number of participants.

• Review Resources

 Review training manual to make sure you remember the flow of content. Think about how to customize to your community.

• Check Workshop Kit

Make sure you have all the necessary materials to facilitate the workshop. The kit includes:

Brain Health & Dementia Awareness in Our Communities







- Clicker
- Pens
- Sticky Notes
- Sharpie Markers

Assemble Participant Materials

o Bring enough materials for the largest possible group. To print more handouts, use the USB or the trainer portal: https://waportal.org/partners/brain-health-dementia-awareness-grant.

Participant Handout



'How to Talk to My Medical Provider' Handout



Final Reflection Wallet Cards



Red-Yellow-Green



DAY-OF SET-UP

• Explore Training Space

Familiarize yourself with the workshop space, including restrooms and emergency plan.

Arrange Training Space

Rearrange the desks/tables/chairs based on what would work best for your community.

Set Up Technology

Set up projector and screen and connect computer. Open PowerPoint to slide one.

• Place Participant Resources

o Set up sign in and name tag station. Put participant handouts and pens on each table.

• Prepare Trainer Station

Place the training manual, handouts, and clicker in a central location near the front.



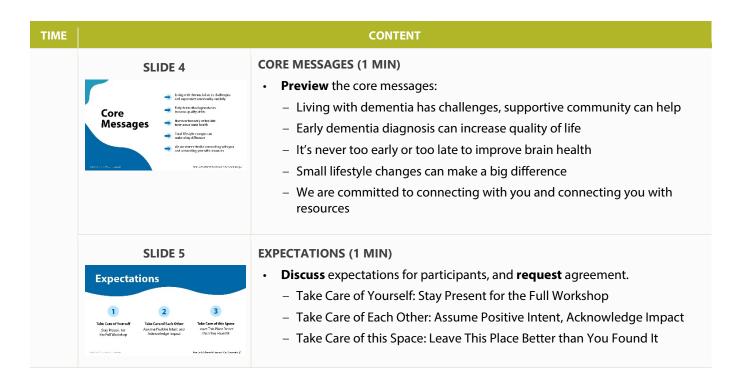
Training Plan

Opening: Welcome & Introductions

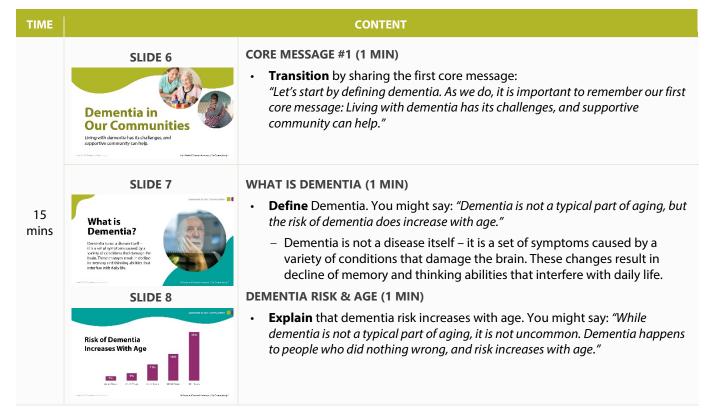
TIME CONTENT SLIDE 1 WELCOME/FRAMING (2 MIN) **MATERIALS:** Brain Health & Dementia Awareness in Our Communi **Welcome** participants to workshop and thank them & Dementia Awareness in Our Communities for coming. Particular Inscience of Partic Control of the Contro **Explain** why we are here. You might say: "We are here to increase awareness around brain health and Studenthing Comment of the Comment o dementia in our communities." Pass out the **Clarify** this training is not counseling or a medical **Participant** consultation. You might say: "During this workshop, Handout you are going to hear about brain health and dementia. It might bring up questions about your own health and experiences. Any medical, mental health, legal, or financial questions are best answered by your own provider. What I can do is direct you to support and resources about brain health and dementia." **Orient** participants to their materials. You might say: "A lot of the information we will go over today is on the handout you received when you arrived. Throughout the workshop, we will give you other handouts that are yours to keep, and we encourage you to write on them to reinforce your learning. The one tool we will ask you to return is the red/yellow/green cards we will hand out near the end 10 of the workshop." mins SLIDE 2 **INTRODUCTIONS: TRUSTED MESSENGER & PARTICIPANTS (5 MIN) Introduce** yourself and explain why increasing brain health and dementia awareness is important to you. Welcome & Introductions **Explain** why you are here. Share your role as a BDAC trainer and why you're leading this session. **Ask** participants to share their names and why they are attending. Note: For groups larger than 12, ask participants to introduce themselves to the person next to them. SLIDE 3 **LEARNING OBJECTIVES (1 MIN) Read** aloud the learning objectives: Learn about and reflect on brain health and dementia in our Learning Objectives communities Understand potentially modifiable risk factors and the benefits of early detection for dementia Explore resources for further learning, action, and support around brain

health and dementia





Section 1: Dementia in Our Communities





TIME CONTENT

Alzheimer's is a Type of Dementia Alzheimer's is a Type of Dementia Alzheimer's ha teoric be should be a company to the comp

ALZHEIMER'S V. DEMENTIA (1 MIN)

• **Differentiate** Alzheimer's from Dementia. You might say: "Alzheimer's is different from dementia. Alzheimer's is a specific brain disease and is the most common cause of dementia. In fact. Alzheimer's accounts for 60-80% of dementia cases."

SLIDE 10

How Dementia is Experienced in the US 10% American Anthrop A

SLIDE 11

How Dementia is

Experienced in Washington

HOW DEMENTIA IS EXPERIENCED IN THIS COMMUNITY (1 MIN)

- **Share** health disparities. You might say: "Let's explore how dementia shows up in our communities."
 - National Statistics
 - > Starting at 65, the risk of dementia increases significantly with age.
 - Around 10% or 1 in every 10 adults over 65 in the US have Alzheimer's disease, a form of dementia.
 - > Black/African Americans are 2 times more likely to have Alzheimer's disease than non-Hispanic whites.
 - > Hispanic/Latino adults are 1.5 times more likely to develop Alzheimer's disease.
 - Washington Statistics
 - > In WA, around 125,000 people are living with dementia. That number is expected to double in the next twenty years.
 - > Black/African American, Hispanic/Latino, & American Indian/Alaska Native communities experience dementia at higher rates.

SLIDE 12



ACTIVITY: GROUP DISCUSSION (THINK-PAIR-SHARE) (8 MIN)

- **Explain** the activity. You might say: "You will think for one minute, share with a partner for two minutes, then share out with the group. Here is the question we will be thinking and talking about: How has dementia touched my life and/or the lives of those I know?"
- Debrief the activity. Say: Please raise your hand if:
 - ...you have ever known someone who is living with dementia.
 - ...someone in your family or community is living with dementia now.
 - ...based on your family history, you are concerned you might develop dementia.

SLIDE 13



RESOURCES & SUPPORT: WHAT IS DEMENTIA (2 MIN)

- **Highlight** Dementia Resources & Support. You might say: "This QR code and URL lead to a page of digital resources that is organized to make it easy for you to find what you need to learn more about brain health and dementia. There are three resources we recommend:"
 - 1. CDC | About Dementia
 - 2. WA State Department of Health | Dementia
 - 3. WA State Department of Social & Health Services | 'Let's Talk Dementia' Mini Videos



Section 2: Benefits of Early Detection

TIME CONTENT SLIDE 14 **CORE MESSAGE #2 (1 MIN) Transition** by sharing the second core message: "The good news is: Early dementia diagnosis can improve quality of life. For example, it can allow people who may be living with dementia to participate in their own legal and Benefits of healthcare planning. It also gives individuals and their families time to find **Early Detection** resources and build a strong support network." HOW DO I KNOW IF I OR SOMEONE CLOSE TO ME MAY BE EXPERIENCING SLIDE 15 **DEMENTIA? (1 MIN)** How Can I **Frame** the conversation. You might say: "If you are wondering if you or Recognize someone in your life is experiencing dementia, we encourage you to look for Dementia? signs of change in behavior or ability to do things. For example, if your mom Signs of Dementia was amazing at math and all of the sudden can't do math anymore, that might be a sign of dementia. However, if you were never good at math and still can't do math, that would not be a sign of dementia. Now, let's look at ten possible signs of dementia. Remember, they are not in any particular order, and any one of the signs could mean you or someone close to you may be experiencing dementia. It is also important to keep in mind that these signs do not always mean you have dementia. Changes in memory or thinking may be due to another condition that could be addressed." **Review** the Ten Signs of Dementia 20 mins **SLIDE 16** MEMORY LOSS THAT DISRUPTS DAILY LIFE (1 MIN) Possible Sign of Dementia: Asking for the same information over and over. Possible Sign of Dementia Not able to recall recently learned information. Asking for the same infor over and over. Memory Loss that Disrupts Not able to recall rec learned information. *Typical Aging*: Temporarily forgetting names or appointments. **Daily Life** SLIDE 17 **CHALLENGES IN PLANNING OR SOLVING PROBLEMS (1 MIN) Possible Sign of Dementia:** It's harder to work with numbers, follow a sible Sian of De recipe or keep track of bills. Difficulty concentrating. Challenges in It's harder to work with numbers, follow a recipe or keep track of bill Planning or *Typical Aging*: Making mistakes managing bills once in a while. Solving Problems SLIDE 18 **DIFFICULTY COMPLETING FAMILIAR TASKS (1 MIN) Possible Sign of Dementia:** Trouble driving to a familiar location, making a grocery list or remembering rules to a game you have played many times Difficulty before. Completing Familiar Tasks *Typical Aging*: Needing help recording a TV show once in a while.



TIME **CONTENT**

SLIDE 19



CONFUSION WITH TIME OR PLACE (1 MIN)

- **Possible Sign of Dementia:** Losing track of dates and seasons. Forgetting where you are or how you got there.
- *Typical Aging*: Forgetting the day of the week but figuring it out later.

SLIDE 20



TROUBLE UNDERSTANDING VISUAL IMAGES AND SPATIAL RELATIONSHIPS (1 MIN)

- *Possible Sign of Dementia*: Trouble judging distance or determining color. Vision issues may cause balance or reading problems.
- *Typical Aging*: Vision changes related to cataracts or to typical aging.

SLIDE 21



NEW PROBLEMS WITH WORDS IN SPEAKING OR WRITING (1 MIN)

- Possible Sign of Dementia: Trouble following or joining a conversation or naming familiar objects. Stopping mid-conversation and being unable to continue or repeating yourself.
- *Typical Aging*: Sometimes having trouble finding the right word.

SLIDE 22



LOSING THINGS WITHOUT BEING ABLE TO RETRACE STEPS TO FIND THEM (1 MIN)

- Possible Sign of Dementia: Putting objects in unusual places.
- *Typical Aging*: Misplacing things, but retracing steps to find them.

SLIDE 23



DECREASED OR POOR JUDGMENT (1 MIN)

- Possible Sign of Dementia: Changes in decision-making. Paying less attention to personal hygiene.
- *Typical Aging*: Making a bad decision or mistake once in a while.

SLIDE 24



WITHDRAWAL FROM WORK OR SOCIAL ACTIVITIES (1 MIN)

- Possible Sign of Dementia: Changes in participation in previously enjoyed
- Typical Aging: Sometimes feeling uninterested in family or social obligations.



SLIDE 25



CHANGES IN MOOD OR PERSONALITY (1 MIN)

- *Possible Sign of Dementia*: Confusion, suspicion, depression, fear or anxiety. Easily upset at home, with friends or outside comfort zone.
- *Typical Aging*: Developing ways of doing things, becoming irritable when a routine is disrupted.

SLIDE 26



ACTIVITY: TALKING TO MY MEDICAL PROVIDER ABOUT DEMENTIA CONCERNS (1 MIN)

• **Explain** the activity. You might say: "It can be hard to talk about our concerns about dementia. With our families. With our medical providers. We are going to learn how to have courageous conversations about dementia so we are prepared."

SLIDE 27



ACTIVITY: TALKING TO MY MEDICAL PROVIDER ABOUT DEMENTIA CONCERNS (1 MIN)

- **Discuss** what to do before a dementia-related visit to a medical provider.
 - Before: Write down your signs. List your medications. Plan to bring a friend. Choose your questions.

SLIDE 28



ACTIVITY: TALKING TO MY MEDICAL PROVIDER ABOUT DEMENTIA CONCERNS (1 MIN)

- **Discuss** what to do during a dementia-related visit to a medical provider.
 - During: Share health concerns. Be completely open. Ask for a diagnosis.
 Talk about next steps.

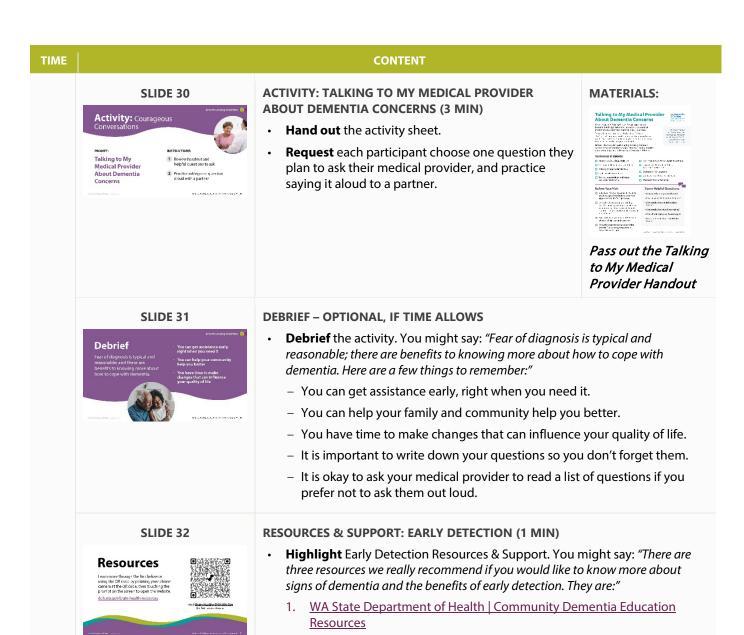
SLIDE 29



ACTIVITY: TALKING TO MY MEDICAL PROVIDER ABOUT DEMENTIA CONCERNS (1 MIN)

- Discuss what to do after a dementia-related visit to a medical provider.
 - After: Acknowledge your feelings. Review your notes. Write down new questions. Identify your resources.









Aging Disability Services (ADS) | Self-Management Flags & Plans

Alzheimer's Association | Why Get Checked?

TIME CONTENT

SLIDE 34



INTRODUCE POTENTIALLY MODIFIABLE RISK FACTORS (1 MIN)

• **Define terms.** You might say: "Potentially modifiable means things in your life you can choose to change, either as individuals or as a community. We will start by defining each of ten factors, then we will discuss some changes you can make for each one to improve your brain health. Some will be easier to change than others. Changing any of them can make your life and brain health better, so we encourage you to focus on the ones that are easiest for you."

SLIDE 35



POTENTIALLY MODIFIABLE RISK FACTORS (1 MIN)

Review the entire list of Potentially Modifiable Risk Factors. You might say:
 "Let's take a look at ten risk factors. After we define each one, we will ask you to
 use your cards to rate how hard each one of them would be for you to change."

SLIDE 36



POTENTIALLY MODIFIABLE RISK FACTOR: DEPRESSION (1 MIN)

- *Depression*: A low mood or loss of pleasure or interest in activities for long periods of time.
 - Depression is a common mental health condition that can happen to anyone. It is different from regular mood changes and feelings about everyday life. Depressive episodes last most of the day, nearly every day, for at least two weeks.

SLIDE 37



POTENTIALLY MODIFIABLE RISK FACTOR: DIABETES (1 MIN)

- Diabetes: A disease that occurs when your blood sugar is too high or too low.
 - Diabetes happens when your body either cannot produce or cannot use insulin, the hormone that helps glucose get into cells to be used as energy. Over time diabetes can damage your brain, heart, kidneys, feet, and eyes.

SLIDE 38



POTENTIALLY MODIFIABLE RISK FACTOR: EXCESS ALCOHOL USE (1 MIN)

- Excess Alcohol Use: How much alcohol you drink.
 - It is recommended we drink alcohol only in moderation or not at all, which means no more than around 1 alcoholic drink per day. Drinking alcohol makes your brain work more slowly. Drinking no or less alcohol is better for your health than drinking more alcohol.

SLIDE 39



POTENTIALLY MODIFIABLE RISK FACTOR: HEARING LOSS (1 MIN)

- *Hearing Loss*: Having trouble hearing due to a problem in your ears.
 - Hearing loss can be mild or severe, and the worse it gets the louder sounds need to be for you to hear them. Many people lose their hearing as they get older, which can keep them from engaging with others and lead to isolation. Hearing aids can help people hear better and improve brain health.



TIME CONTENT



POTENTIALLY MODIFIABLE RISK FACTOR: HIGH BLOOD PRESSURE (1 MIN)

- *High Blood Pressure*: The force of your blood pushing against the walls of your blood vessels is too high.
 - People with high blood pressure at midlife have a greater decline in key thinking skills later in life than those with typical blood pressure. People with high blood pressure may not feel symptoms. The only way to know for sure if your blood pressure is high is to get it checked.

SLIDE 41

Physical

Inactivity

Not moving your body for long periods of time



POTENTIALLY MODIFIABLE RISK FACTOR: PHYSICAL INACTIVITY (1 MIN)

- Physical Inactivity: Not moving your body for long periods of time.
 - Regular exercise strengthens the body and changes the brain to improve memory and thinking skills. The opposite is also true: Not moving our bodies for long periods of time can harm your body and your brain. There are lots of ways to move our bodies more, including walking, gardening, golfing, pickle ball, running, swimming, hiking, biking, and dancing. Consistency is key.

SLIDE 42



POTENTIALLY MODIFIABLE RISK FACTOR: POOR DIET QUALITY (1 MIN)

- Poor Diet Quality: Not eating healthy foods.
 - A good diet varies by culture, locally available foods, and individual needs.
 Consistently eating lots of fruit, vegetables, legumes, nuts, and whole grains; and limiting sugar and salt can help keep your body and brain healthy.

SLIDE 43



POTENTIALLY MODIFIABLE RISK FACTOR: POOR SLEEP QUALITY AND SLEEP DISORDERS (1 MIN)

- Poor Sleep Quality and Sleep Disorders: You are having a lot of trouble sleeping.
 - Not sleeping can affect your health and safety. Having trouble falling asleep at night, staying asleep, or being very sleepy during the daytime could be due to sleep disorders like insomnia or sleep apnea. Many sleep disorders can be treated if they are diagnosed. Better sleep means better brain health, so talk with your medical provider.

SLIDE 44



POTENTIALLY MODIFIABLE RISK FACTOR: TOBACCO USE (1 MIN)

- **Tobacco Use:** Smoking cigarettes, cigars, pipes or using other products like chewing tobacco or snuff.
 - Smoking tobacco can make it harder to process information, remember things, and concentrate. People who smoke are also 30% more likely to develop dementia than people who do not smoke. Even if you cannot stop smoking, smoking less can help your brain work better.



SLIDE 45 Traumatic **Brain Injury**

POTENTIALLY MODIFIABLE RISK FACTOR: TRAUMATIC BRAIN INJURY (1 MIN)

- Traumatic Brain Injury: Traumatic brain injury can happen in many ways, such as a fall, a car or biking accident, or when you hit your head during a sporting activity.
 - Traumatic brain injury can cause temporary or long-term problems with how you think, understand, move, communicate, and act, and can contribute to risk for dementia. While many causes of traumatic brain injury are outside of your control, there are some strategies like wearing a helmet or using a walking aid that will lessen your risk.

SLIDE 46



ACTIVITY: CHOOSE TO MAKE CHANGE (3 MIN)

- **Discuss** the value of small changes. You might say: "Small changes to the way we live our lives can improve our brain health. Some changes will be harder to make than others; any change in these areas can make a big difference. Some lifestyle changes are good for more than one reason. For example, what is good for your brain is also good for your heart, your gut, and your muscles."
- **Identify** more easily modified risk factors.
 - Hand out color cards and ask participants to use them to rate each risk factor by how hard it might be for them to modify.
 - > High (Red) This would be really hard and I'd struggle to do it at all.
 - > Medium (Yellow) This would be somewhat hard, but I could do it with a little bit of help.
 - > Low (Green) I could do this right now
- **Write down** and further discuss strategies for the risk factors participants think might be low or medium difficulty. Start with this list of strategies for modifying each risk factor:

MATERIALS:



Pass out the Green-Yellow-Red Cards

SLIDE 47



STRATEGIES TO MAKE CHANGE: DEPRESSION (1 MIN)

- **Depression**: Talk To a Professional Medical Provider, Counselor, Minister
 - Find a counselor or support group. Stay involved, even when you don't feel like it. Ask for help participating in enjoyable activities.

SLIDE 48



STRATEGIES TO MAKE CHANGE: DIABETES (1 MIN)

- **Diabetes:** Monitor Blood Sugar
 - Get tested for diabetes. Limit processed foods and sugars in the home. Keep healthy snacks available and easy to access.



TIME CONTENT

SLIDE 49



STRATEGIES TO MAKE CHANGE: EXCESS ALCOHOL USE (1 MIN)

- Excess Alcohol Use: Drink Less Alcohol
 - Limit the number of drinks you consume. Keep less alcohol in the home.
 Plan social events without alcohol.

SLIDE 50



STRATEGIES TO MAKE CHANGE: HEARING LOSS (1 MIN)

- Hearing Loss: Get & Use Hearing Aids
 - Check your hearing regularly. Ask people to speak up if you cannot hear them. Seek out state/community hearing aid resources.
 - Note: There is no standard recommended age at which to get a hearing test. If symptoms arise, get checked out.

SLIDE 51



STRATEGIES TO MAKE CHANGE: HIGH BLOOD PRESSURE (1 MIN)

- High Blood Pressure: Talk To Your Medical Provider, Take Prescribed Medications
 - Get a blood pressure test. Ask your medical provider about medication.
 Make healthier food choices at family gatherings.

SLIDE 52



STRATEGIES TO MAKE CHANGE: PHYSICAL INACTIVITY (1 MIN)

- Physical Inactivity: Move Your Body More
 - Move your body at least 15 minutes per day. Do chair exercises/chair yoga. Use a walker or cane for safer movement.

SLIDE 53



STRATEGIES TO MAKE CHANGE: POOR DIET QUALITY (1 MIN)

- Poor Diet Quality: Improve Diet Quality
 - Talk with your medical provider about your diet. Use single-serving containers for portion control. Buy and freeze seasonal fruits.

SLIDE 54



STRATEGIES TO MAKE CHANGE: POOR SLEEP QUALITY AND SLEEP DISORDERS (1 MIN)

- Poor Sleep Quality and Sleep Disorders: Diagnose & Treat Sleep Disorders
 - Consult a sleep professional. Set and keep a defined bedtime routine.
 Remove distractions from the sleeping area.



TIME **CONTENT**

SLIDE 55 Stop or Reduce Smoking and/or Tobacco Use

STRATEGIES TO MAKE CHANGE: TOBACCO USE (1 MIN)

- **Tobacco Use**: Stop or Reduce Smoking/Tobacco Use
 - Find an achievable stop-smoking program. Talk with your medical provider about options. Ask for help limiting tobacco use.

SLIDE 56



STRATEGIES TO MAKE CHANGE: TRAUMATIC BRAIN INJURY (1 MIN)

- **Traumatic Brain Injury**: Take Precautions to Avoid Injury
 - Plan your space to avoid trip and fall hazards. Place items you use regularly on low shelves. Wear your seatbelt and/or helmet.

SLIDE 57



DEBRIEF (5 MIN)

- Ask:
 - Which small change would be easiest for you to make?
 - What are the barriers to making changes?
 - How will you make this change?
 - When will you make this change?
 - What supports would you need?

SLIDE 58



DEBRIEF, PART 2 (3 MIN)

DEBRIEF (1 MIN)

- **Discuss** what it would take to make some of these changes in your life.
 - If you do not have a medical provider to consult about changing one or more of these risk factors, you can reach out to the Center for Multicultural Health.

SLIDE 59



RESOURCES & SUPPORT: POTENTIALLY MODIFIABLE RISK FACTORS

- **Highlight** Risk-Factor-Related Resources and Support. You might say: "As we mentioned before, this QR code and URL lead to a page of digital resources that is organized to make it easy for you to find what you need to learn more about brain health and dementia. There are three resources we really recommend if you would like to know more about potentially modifiable risk factors. They are:"
 - 1. CDC | Dementia Risk Reduction
 - Alzheimer's Association | Promote Brain Health
 - 3. <u>Lancet Commission | Modifiable Risk Factors for Dementia Infographic</u>



Conclusion: Wrap-Up

TIME CONTENT

SLIDE 60



CORE MESSAGE #4 (1 MIN)

• **Transition** by sharing the fourth and final core message: "As we wrap up our workshop, we want to share our fifth and final core message. We are committed to connecting with you and to connecting you with resources."

SLIDE 61



FINAL REFLECTION (2 MIN)

- Ask participants to write down a commitment as an exit ticket:
 - What is one change I will make or action I will take based on our learning together today?

MATERIALS:



Pass out Wallet Card

SLIDE 62

10 mins



REINFORCE CORE MESSAGES (1 MIN)

- **Review** the core messages:
 - Living with dementia has challenges; supportive community can help
 - Early dementia diagnosis can increase quality of life
 - It is never too early or too late to improve brain health
 - Small lifestyle changes can make a big difference
 - We are committed to connecting with you and connecting you with resources

SLIDE 63



ADDITIONAL DEMENTIA-AWARENESS RESOURCES AND SUPPORT (1 MIN)

- **Highlight** Dementia-Awareness Resources & Support. You might say: "There are more digital resources that are organized to make it easy for you to find what you need to learn more about brain health and dementia."
 - 1. Washington Community Living Connections | Dementia Road Map
 - 2. <u>Dementia Legal Planning Project Toolkit | Get Connected to a Legal</u> Professional
 - 3. Memory & Brain Wellness Center | Dementia Friends Washington
 - 4. <u>Us Against Alzheimer's | Prevention, Early Detection & Diagnosis, Access to Treatments</u>
 - 5. <u>Balm of Gilead | Culturally Tailored Brain Health Resources</u>
- **Direct** participants to other resources, events, or opportunities available in your own community.



TIME **CONTENT**

SLIDE 64



REVISIT LEARNING OBJECTIVES (1 MIN)

- **Ask** participants if they feel we have met each learning objective:
 - Learn about and reflect on brain health and dementia in our communities
 - Understand potentially modifiable risk factors and the benefits of early detection for dementia
 - Explore resources for further learning, action, and support around brain health and dementia

SLIDE 65



TRAINING EVALUATION (3 MIN)

Ask participants to scan the QR code or follow the URL to complete the digital workshop evaluation. If needed, hand out paper copies of the workshop evaluation for participants to complete. You might say: "BDAC is a new program. Completing the evaluation is really important to help us improve and continue to offer this to your community. We appreciate your time and input."

MATERIALS:



Pass out the Post-Workshop **Evaluation Forms**

SLIDE 66



THANK YOU & QUESTION/ANSWER SESSION (1 MIN)

- **Thank** each participant for attending.
- **Offer** to stay a few extra minutes to answer any questions.
- **Optional:** Hand out or send out digital Certificates of Completion.

MATERIALS:



Pass out the Certificate(s) of Completion



Appendices

Appendix 1: Materials List

Name of Training:	BDAC Training
Location:	
Time & Date:	
Trainer(s):	
Number of Participants/Groups:	

GENERAL TRAINING SUPPLIES

QTY	ITEM	/
1	Sign-In Sheet	
2 Sheets	Nametags	
2	Sharpie Markers	
1/Participant	Certificates of Completion (Optional)	
1/Participant	Pens/Pencils	
1/Participant	Participant Handout	
1/Participant	Talking to my Medical Provider about Dementia Concerns Handout	
1 Set/Participant	Red/Yellow/Green Rating Cards for Potentially Modifiable Risk Factors Activity	
1/Participant	Final Reflection Wallet Cards	
1	USB – Printable Materials (As Needed)	



Appendix 2: Potentially Modifiable Risk Factor Suggestions

SUGGESTIONS FOR MODIFYING RISK FACTORS

RISK FACTOR	STRATEGIES
DEPRESSION: Talk to a professional – medical provider, counselor, minister	Person Worried They May Develop Dementia: Talk with others about how you are feeling. Stay involved, even when you don't feel like it. Regular participation keeps you active; having scheduled meetings or events makes it harder not to be involved. Learn about transportation options to help you get to and from your group.
	Person Currently Living with Dementia: Find a support group or online network for people with memory loss or dementia so you can talk about what you are feeling. Ask for help participating in activities you enjoy like church or social events. Ask a family member to accompany you. Ask your loved one or trusted partner (pastor, etc.) for help finding transportation options.
	Family Member of Someone Living with Dementia: Try to make transportation as easy as possible; look for outside resources within the community to help with keeping your loved one engaged. Recruit family or community support to accompany your loved one to social events, even when your loved one can't fully participate anymore. Family members may also experience depression and benefit from talking with other caregivers or professionals.
DIABETES : Monitor blood sugar	Person Worried They May Develop Dementia : Get tested for diabetes to see if this might be a dementia risk factor for you. The only way to find out for sure if you or a loved one has diabetes is from blood tests that measure your blood glucose (sugar) levels. These tests can be arranged through your medical provider.
	Person Currently Living with Dementia : Ask your loved ones to help you limit processed foods and sugars in the home. Keep healthy snacks available and easy to access. Ask for help packaging snacks in single servings.
	Family Member of Someone Living with Dementia: Shop for healthier snacks consistent with your loved one's medical provider's advice. Package them in single servings and make them readily accessible at the times your loved one can/should eat them. Learn about healthy restaurant options. Sign your loved one up for community meal programs. Pre-make healthier food options and stock them in your loved one's pantry, refrigerator, etc.
EXCESS ALCOHOL USE: Drink less alcohol	Person Worried They May Develop Dementia : Self limit your intake to a number of drinks at social gatherings or at home. Create a system for counting and/or limiting. Consider single serving containers. Limit what you buy.
	Person Currently Living with Dementia: Understand that alcohol clouds judgement and makes it harder to process information. Ask your loved ones to limit serving alcohol at social events or gatherings; ask to have alcohol limited in the home. Acknowledge that when you are drinking, it's more difficult to make good decisions about how much you are drinking. Take steps early to limit what's available to you.
	Family Member of Someone Living with Dementia: Limit alcohol in the home. Plan social events without alcohol. Serve fun non-alcoholic drinks. Integrate non-alcoholic wines/beers into use.



HEARING LOSS: Get & use hearing aids	Person Worried They May Develop Dementia : Check your hearing with your medical provider on a regular basis. If you notice you are having difficulty, ask your medical provider about available resources for hearing aids or assistive devices.
	Person Currently Living with Dementia: Talk to your medical provider about your options for hearing support. Ask for help from your loved ones to attend community hearing clinics. Ask people to speak up. Ask your loved one to make a sign you can post in your home for people to speak up and speak clearly.
	Family Member of Someone Living with Dementia: Practice speaking up and speaking clearly. Look toward your loved one when speaking. Remind others to speak up when speaking to your loved one. Seek out community and state resources for hearing aids and other supportive devices (special telephones, etc.).
HIGH BLOOD PRESSURE: Talk to your medical provider, take prescribed medications	Person Worried They May Develop Dementia: Ask your medical provider whether or not you should get tested for high blood pressure. Talk to your medical provider about any suggested dietary changes.
	Person Currently Living with Dementia : Get tested for high blood pressure, and if needed, get a prescription for blood pressure medication. Ask your loved ones to get you a medication manager and/or call you with daily medication reminders.
	Family Member of Someone Living with Dementia: Use a medication manager (pill box) for daily medications. Use daily or more frequent calls with your loved ones for medication reminders. Consider healthier food choices for family gatherings.
PHYSICAL INACTIVITY: Move your body	Person Worried They May Develop Dementia: Stay active or try to get more active. Join walking groups (even with a walker). Keep an exercise log so you can get 15 minutes of activity each day. Do chair exercises when you watch television.
	Person Currently Living with Dementia: Talk with your medical provider about appropriate exercise, walking programs and/or precautions for you. Try to maintain or improve your flexibility, strength, and mobility, as possible.
	Family Member of Someone Living with Dementia: Take your loved one to community exercise programs. Do chair exercises with them. Get education on walker safety. Keep an exercise log for your loved one. Stay active yourself; taking care of yourself is critical!
POOR DIET QUALITY: Improve diet quality	Person Worried They May Develop Dementia: Work with your medical provider or health professional to find healthy alternatives. Buy and freeze seasonal fruits and vegetables.
	Person Currently Living with Dementia: Ask for help with healthier foods and portion control. Ask for help stocking healthier foods in your pantry/refrigerator. Ask for help to keep healthy snacks available.
	Family Member of Someone Living with Dementia: Seek out healthier alternatives for traditional foods for meals and snacks. Use single serving containers for portion control and easier preparation. Link your loved one to community resources for healthy foods such as community food banks, food delivery, etc. Buy and freeze seasonal fruits and vegetables.



	Person Worried They May Develop Dementia : Set a defined bedtime and sleep routine. Consult a sleep professional to see if you experience sleep apnea or insomnia.
POOR SLEEP QUALITY AND SLEEP DISORDERS: Diagnose & treat sleep disorders	Person Currently Living with Dementia: Consult a sleep professional to see if you experience sleep apnea or insomnia. Ask for help creating a sleep routine. This could include setting a consistent bedtime and covering up any lights on devices in your home like televisions, computers, or clocks.
	Family Member of Someone Living with Dementia: Consult a sleep professional to see if you experience sleep apnea or insomnia. Set and keep a defined bedtime routine. Remove sleep distractions from the sleeping area, including televisions and any device that emits light.
TOBACCO USE : Stop or reduce smoking/tobacco use	Person Worried They May Develop Dementia : Work with your medical provider to find an achievable stop smoking program. If that does not sound like it would work for you, try to limit your tobacco use.
	Person Currently Living with Dementia: Ask for help limiting tobacco, including using assistive tools (patches, etc.). Work with your health professional to help you ease off of tobacco products in a way that is doable for you and your lifestyle. Ask others not to smoke/use tobacco around you.
	Family Member of Someone Living with Dementia: Consider your loved one's safety risk from smoking (fires, etc.); reduce temptation by limiting access to tobacco.
TRAUMATIC BRAIN INJURY: Take precautions to avoid injury	Person Worried They May Develop Dementia : Plan your space to avoid trip and fall hazards. Place items you use regularly on shelves that are not too high to avoid over-reaching. Avoid risky behaviors like riding motorcycles. Always wear a helmet when riding a bicycle, skiing, ice skating, or engaging in other fast-paced physical activities.
	Person Currently Living with Dementia: Ask for help from people you trust to identify and avoid tripping hazards in your home and the places you regularly visit, like grocery stores or parks. Wear a seatbelt, use assistive devices and adaptive safety equipment like grab bars.
	Family Member of Someone Living with Dementia: Remove trip and fall hazards from your loved one's home such as cords, carpets, etc. Make sure your loved one's walker/cane, etc. are in good working order. Ask for community support for modifying the living space to minimize risks. Make sure commonly needed foods, devices, supplies are easy to access and can be gotten to safely. Remove things from high shelves.



Brain Health & Dementia Awareness in Our Communities

Training Manual

