



Emerald Crest Memory Care Model

The Emerald Crest philosophy is rooted in the belief that individuals with dementia are unique and can flourish in an environment that provides them with opportunities for positive relationships, participation in their daily care and meaningful activities that promote success. Emerald Crest is solely dedicated to memory care and offers unique programming to meet residents' needs:

- •Serene environments that are easy to navigate
 •12-15 residents per house; 2-5 houses per location
 •Rooms surround common space, no long hallways
- •Focus on ability rather than disability
 •Houses are designated by stages to provide specific programming and socialization
- •Personalized care plan tailored to residents' unique needs
 - •Developed by Registered Nurses and Occupational Therapists
- •Comprehensive employee training program with qualified professional staff; those with direct care duties must undergo even further training and staff also receives on-going education annually















Call any of our communities to set up a video tour for a safe virtual visit!



© cassia We are here to help!

...we've got this.

There are so many reasons why you can live safer and healthier at a Senior Living Community.

Stay out of the Crowds. There is no need to go out as we have so much inside including a salon/barber, church services and three delicious meals each day, freshly-made by our chef.

We don't cut corners, we clean them, and everything else, with our virus-fighting tactics.

Stay healthy. Health screening for staff and residents happens several times each day. Our emergency response systems will give you peace of mind. Plus, safe exercise and enriching activities will help you stay sharp and fit.

Get Social. Good conversations with friends and staff are right nearby, but not too close!

SPEAKERS

Their role as the Occupational Therapist at Emerald Crest is to work with the housing director, nurse, direct caregivers, and families to identify what challenges or gaps our residents may be experiencing due to their dementia. I then work with the team to identify and develop strategies and techniques to fill in those gaps so that we can maximize the residents' abilities and level of function. Sarah and Jenny focus on cognitive assessments, behavior management, staff training, and finding opportunities for residents to participate in daily care and meaningful activities that promote success and self worth.





Jennifer LaVoi, OTR/L **Director of Cognitive Care** 18 Years at Emerald Crest



Sarah Zeigler, OTR/L Occupational Therapist 12 Years at Emerald Crest



Normal Forgetting vs. Dementia

Normal

- Sporadic
- Occurs with stress and fatigue
- Does not affect overall day to day functioning

Dementia

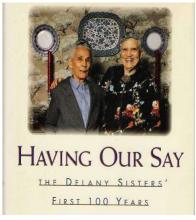
- Constant
- Occurs daily
- Does affect overall day to day functioning



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Dementia is NOT a normal part of aging



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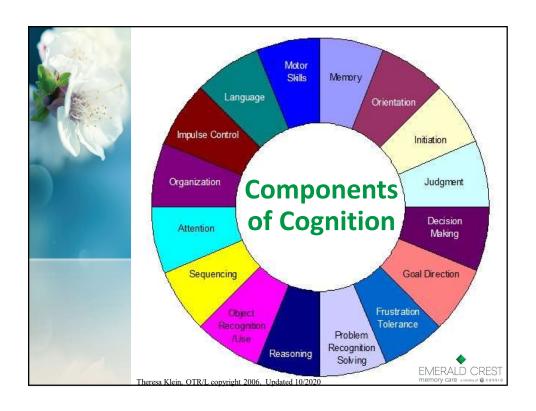
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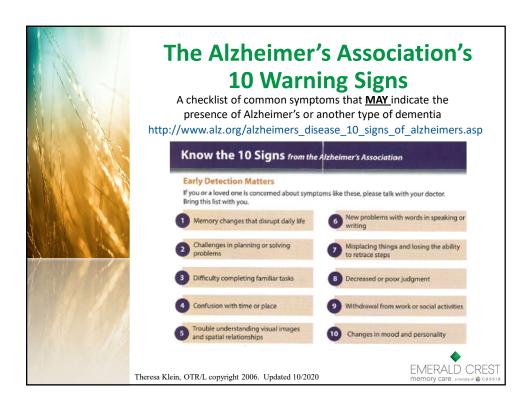


What is Dementia?

- A syndrome that affects an individual's thinking skills
- Begins with subtle changes in ability to organize house/job, manage finances, driving
- First sign/symptom noticed by others is memory loss
- By time admitted to an Assisted Living or Long Term Care Facility they display decreased ability to consistently complete cares (i.e. dressing, grooming, meals, etc.)

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Communicate With Your Doctor

- Medical journal
- Record/relay observations and experiences
- Understand/discuss medications and related side effects
- Ask questions



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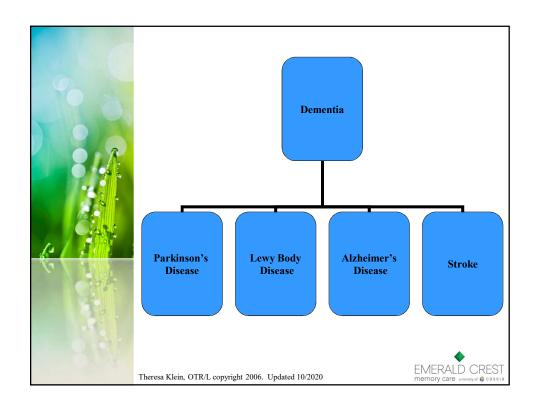


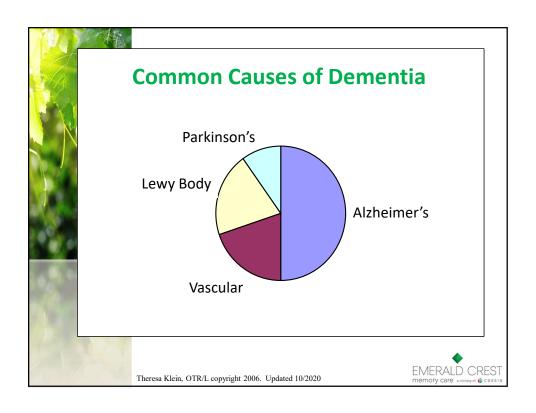
When an individual shows possible signs of dementia what should be done?

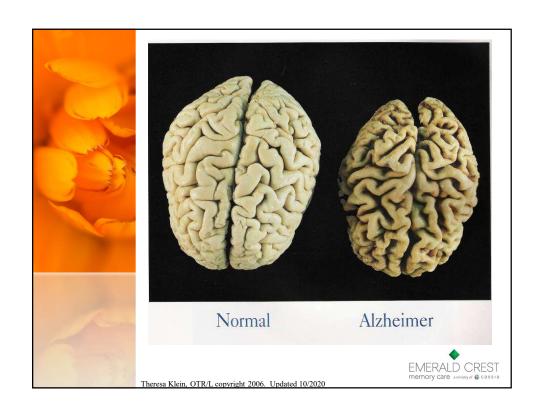
- Visit the doctor to determine what is causing the cognitive changes
- · Rule out medical conditions such as:
 - ➤ Hearing or vision deficits
 - > Hypothyroidism
 - ➤ Vitamin B12 deficiency
 - ➤ Oxygen deficiency
 - ➤ Uncontrolled diabetes
 - ➤ Depression
 - ➤ Medications
 - ➤ Infection

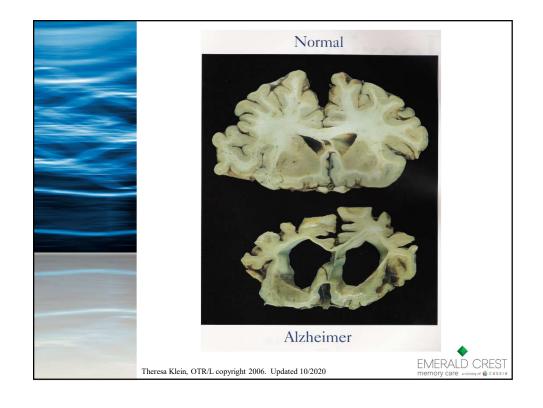




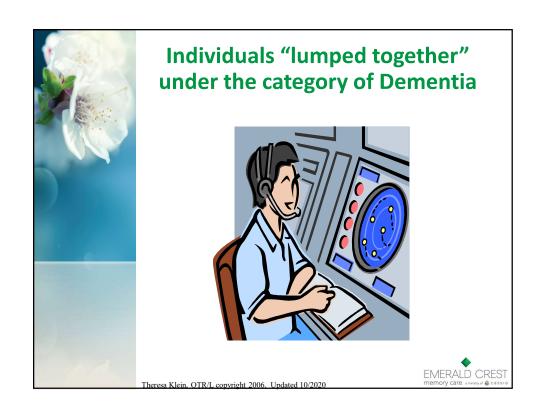


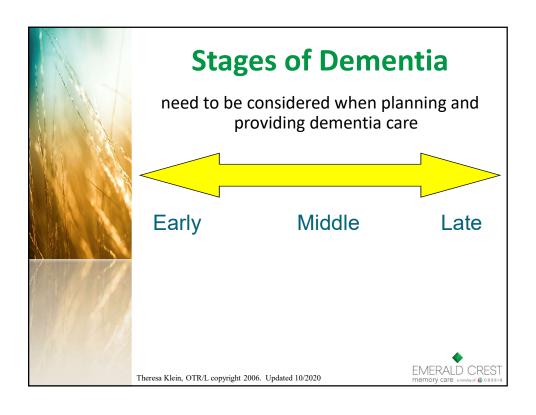


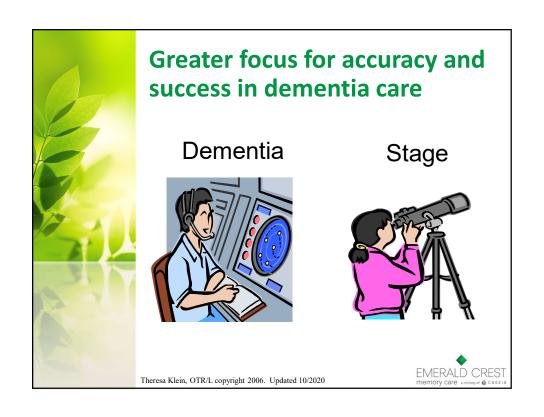












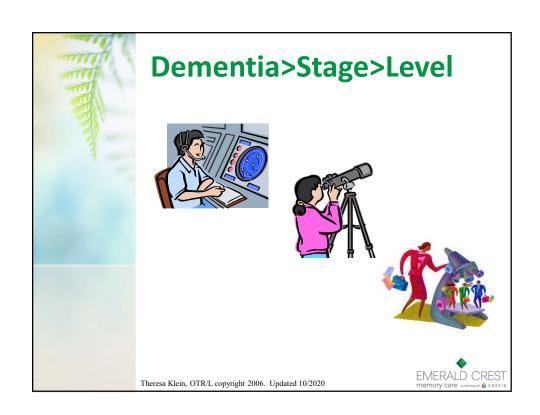


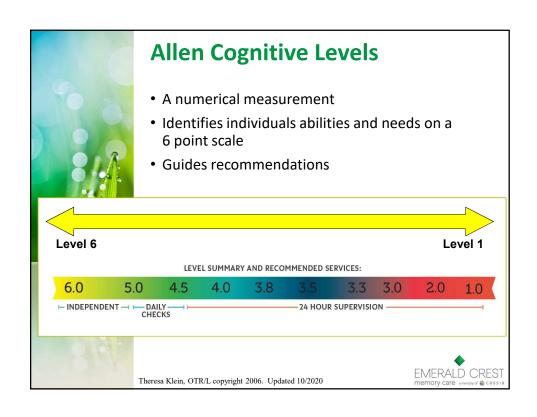
Resources for Dementia Care

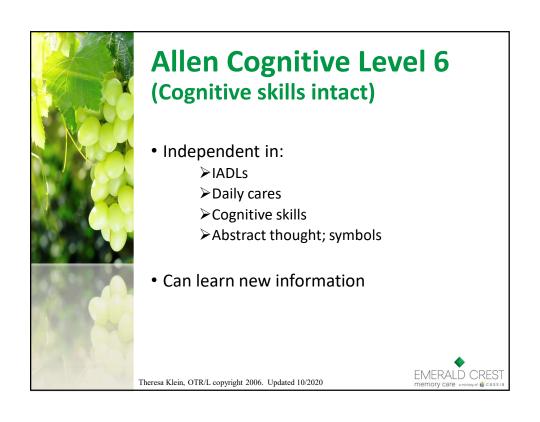
- Educational organizations
- Support Groups
- Adult Day Programs
- Home Companions
- Home Care
- Memory Care Facilities













Maintain Your Brain Eat Healthy

- Eat foods that offer antioxidants (i.e. spinach, kale, broccoli, romaine lettuce)
- Limit bad fatty acids; increase input of good fatty acids
- Eat foods rich in folic acid (i.e. blueberries, OJ)
- Limit alcohol
- Drink water and fruit juices; limit caffeine



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Maintain Your Brain Stay Active

- Exercise
- Learn new skills
- Use your non-dominant hand to complete activities





Maintain Your Brain Maintain Relationships

Socialize





• Clubs/groups, regular events



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Maintain Your Brain Rest and Relaxation

- Sleep replenishes body and brain; May assist in maintaining brain function
- "Slow down"; Limit/balance stress
- Find a hobby
- Meditate; time alone



- Listen to music
- Journal





Allen Cognitive Level 5

(Mild Cognitive Impairment/Early Stage Dementia)

- Independent in daily cares
- Subtle problems with memory may be noted.
- Assistance may be needed with:
 - > IADLs; finances, driving
 - >Select cognitive skills require increased attention
 - ➤organizational skills, decision making
- Can learn new information



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Early Stage Dementia Interventions and Recommendations

- Community resources and interventions
- Plan for future
- Regular monitoring (i.e. finances, driving, medications, nutrition)
- Modify environment (i.e. remove/secure throw rugs)
- Offer techniques for decreased memory (i.e. medication box, calendar, lists, memory book, etc)
- Provide extra time to complete daily activities/learn new information

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Allen Cognitive Level 4 (Middle Stage Dementia)

- · Transitional stage
- · Physically independent with daily cares
- Increased assistance needed with all cognitive skills
- · Assistance needed to initiate/monitor quality of cares
- · Notable memory loss is observed
- New information can be retained only after much repetition
- By the end of this level, most individuals' will require continuous supervision to assure safety

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Middle Stage Dementia Interventions and Recommendations

- · Community resources and interventions
- Daily monitoring to promote safety and completion of daily cares
- Assistance of another to initiate and complete daily activities (i.e. medication administration, meals, transportation, set up supplies so visible, demonstration, etc)
- Repetition of and extra time to retain and apply new information
- Continued participation in daily routine (i.e. daily care completion, social interactions, opportunity for choice, trail and error problem solving)
- Modify environment (i.e. bath bench, downsize)

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Allen Cognitive Level 3 (Middle Stage Dementia)

- · Assistance with all daily cares is needed
- Full assistance required with all cognitive skills is required
- Significant memory impairment is noted
- Unable to learn new information
- · Difficulty with language skills is observed
- 24 hour supervision is required

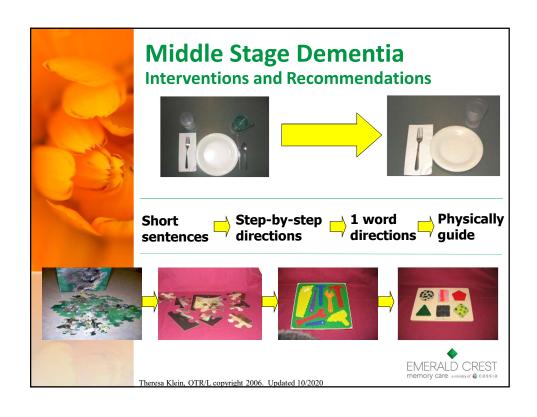


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Middle Stage Dementia Interventions and Recommendations

- 24 hour based care in home or within a facility
- Partner with the individual to complete cares
- Caregiver fills in the missing pieces or gaps
- Allow individual to assist with as much of the daily activities as able







Middle Stage Dementia Interventions and Recommendations

8:30 am - 9:15 am	Breakfast
9:30 am - 9:45 am	Morning Greeting
9:45 am - 10:15 am	Movin' and Groovin'
10:15 am - 10:45 am	Choir Time
10:45 am - 11:00 pm	Coffee Time
11:00 am - 12:00 pm	Time to Rest the Eyes or Plenty O' Puzzles
12:00 pm - 1:00 pm	Lunch
1:00 pm - 1:30 pm	Pumping Iron
1:30 pm - 2:00 pm	Music In The Round
2:00 pm - 2:30 pm	Food, Facts, and Fun
2:30 pm - 2:45 pm	Bible Stories
2:45 pm - 3:00 pm	Coffee Time
3:15 pm - 3:45 pm	Around the World
3:45 pm - 5:00 pm	Time to Rest The Eyes or A Little Bit of Paradise
5:00 pm - 6:00 pm	Dinner
6:00 pm - 6:30 pm	Movin' and Groovin'
6:30 pm - 6:45 pm	50 Nifty United States
6:45 pm - 7:00 pm	Choir Time
7:00 pm - 7:30 pm	Old Time Games
7:30 pm - 7:45 pm	Evening Snack and Blessing
7:45 pm - 9:30 pm	Time to Rest the Eyes or Back to Nature Videos

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Allen Cognitive Level 2 Late Stage Dementia

- Dependent in cares, but can assist
- Significant impairment of all cognitive skills
- Loss of language skills
- Decrease in motor and visual/perceptual skills
- No longer recognize familiar people or objects
- 24 hour supervision is required







Allen Cognitive Level 1 (End Stage Dementia)

- Limited time spent in this level
- Totally dependent in all cares; All basic needs met by caregiver
- Generally spend more time in room/bed than in common area
- Limited verbal or social interactions

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End Stage DementiaInterventions and Recommendations

- Hospice Services
- Comfort Care



• Support to family and friends



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Where to start...

- Become educated
- Seek evaluation
- Obtain Support



- Utilize community resources
- "Maintain your brain"





