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## **The Therapists' Role Working With People With Dementia Using Ability Centered Care**

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**Learning Objectives:** Participants will:

1. Understand the role of rehabilitation / therapy for the person with dementia
2. Select appropriate ADL, IADL , mobility & transfer compensatory/ facilitative/ safety techniques that are specific to this population.
3. Use effective communication with the person with dementia to increase effectiveness of interventions.
4. Effectively use and teach identification of former roles and successfully demonstrate activities for caregivers that therapeutically integrates therapy and care.

**Time required:** 1.5 hours

**Teaching Methods:** Lecture, Discussion, Experiential

**Number of participants:** Unlimited

The principals of rehabilitation, physical fitness, emotional well being, social health and achievement of self-care are as important for the person with dementia as with any elderly person. ADLs and IADLs are often the main source of activity for people with dementia. Restoration and maintenance of these functions are crucial in maintaining dignity and helping people retain some control over their own lives.

In this presentation we will discuss areas of occupational therapy involvement including the ADLs, IADLs and the living situations, environmental considerations, communication barriers and barriers to social participation that affect the functional abilities of the individuals. We will also present interventions for difficult behaviors which will include the environmental modifications, possible causative factors or antecedents of the behaviors, suggestions for interventions, ability centered care and appropriate activity. Therapists need to participate in instruction of caregivers and staff as a part of the therapist's daily treatment and goals. Ensuring carryover of best practice techniques allows for maximum independent functioning in the everyday life of the person with dementia

In the speakers' many years of experience working with therapists that treat elderly people, it has been observed that the problems of dementia are either under addressed or not addressed at all. In fact duration and frequency of treatment is often shortened due to a therapist's inability to deal with the dementia and to identify appropriate goal.