

OUTLINE

Identifying Baseline

- Objective Measurements
- Risk Factors for Escalation of Challenging Behaviors
- Influence of Gender, Cultural and Societal Factors
- Environmental and Interactional Considerations
- Lifelong Patterns and Preferences

Differentiating Among Dementia, Delirium, and Depression

- Diagnostic Criteria
- Signs/Symptoms
- Management

Alzheimer’s Disease: Assessment and Management

- Various Types of Dementia
- Progression and Stages: Retrogenesis
- Pharmacological Treatment Options
- Problems Commonly Associated with Alzheimer’s Disease: Difficult Communication, Hallucinations, Resistance/Aggression, Wandering, Sundowning, Malnutrition
- Interventions to Provide a Positive Experience

Difficult Communications and Hallucinations

- Contributing Factors
- Verbal and Non-verbal Techniques
- Therapeutic Use of Self
- Reorientation, Reminiscence

Validation

- Problem Solving
- Entering Their Reality

Resistance to Care

- Routine Hygiene Needs
- Reasons for Resistance
- Successful Techniques

Physically Aggressive Behaviors

- Reverse Developmental Behavior
- Behaviors as a Way to Communicate
- Identify the Problem/Trigger
- Environmental and Interactional Factors
- Causes of Escalation

Wandering and Sundowning

- Contributing Factors
- Assessment
- Exercise and Activity
- Environmental Management
- Interactional Management

Food and Fluid Deficit/Malnutrition

- Reasons Why They May Not Eat
- Ways to Promote Nutritional Intake
- Tips for Persons Who Need Feeding Assistance
- The Eating Environment
- End of Life

The Family Caregiver as Part of the Team

- Family Dynamics: Role Change
- Emotions Expressed During Caregiving: Positive and Negative
- Positive Communication Among Staff, Family, and Older Adult
- Assisting the Caregiver to Meet the Needs of the Care Recipient
- Helpful Resources
- Ways to Help Reduce Stress for the Caregiver

OBJECTIVES

1. Critique assessment techniques that establish baseline behaviors in older adults.
2. Evaluate factors that contribute to challenging geriatric behaviors and relate them to prevention.
3. Characterize the differences in delirium, dementia and depression in the elderly.
4. Analyze the progression of Alzheimer’s disease and related treatment options.
5. Select appropriate environmental, interactional, behavioral, and/or physical/pharmacological interventions to prevent and/or manage challenging geriatric behaviors.
6. Categorize effective and ineffective strategies to manage difficult communications, hallucinations, aggressive behavior, wandering and Sundowning, food and fluid deficit/malnutrition.
7. Recommend resources that provide information or services for caregivers.

Target Audience: Nurses • Physical Therapists • Physical Therapist Assistants
Occupational Therapists • Occupational Therapy Assistants • Speech-Language Pathologists
Social Workers • Home Healthcare Providers • Nursing Home Administrators
Registered Dietitians & Dietetic Technicians • Recreation Therapists

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Challenging Geriatric Behaviors

Non-Pharmacological Approaches

ELLICOTT CITY, MD

Monday

March 18, 2019

SILVER SPRING, MD

Tuesday

March 19, 2019

FAIRFAX, VA

Wednesday

March 20, 2019

Challenging Geriatric Behaviors

Non-Pharmacological Approaches

- Difficult Communications
- Hallucinations
- Resistance to Care
- Aggressive Behavior
- Wandering
- Sundowning
- Food and Fluid Deficit/Malnutrition
- Family Involvement

ELLICOTT CITY, MD

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Challenging Geriatric Behaviors

Non-Pharmacological Approaches

Caregivers find many older adult behaviors to be challenging. Dementia and delirium are the most frequent contributing factors. Knowing what to expect and what to do related to specific behaviors can decrease frustration and increase satisfaction for everyone involved. A framework for rethinking challenging behaviors provides guidance for choosing management strategies. Assessment and management techniques are based on theory and evidence. Through interactive discussion, clinical examples, and videos, this program focuses on day-to-day strategies to prevent and/or manage challenging geriatric behaviors.

SPEAKER

Latasha Ellis, MSW, LCSW, is a psychotherapist, consultant, entrepreneur, and national speaker. She is owner of AHSAT Counseling and Consulting, PLLC and founder of AHSAT Center for Integrative Oncology. As a psychotherapist, Latasha's diverse clinical experience stretches over a multitude of settings; including the state of MD Department of Corrections, the VA School for the Deaf, Blind and Multi-disabled, community mental health clinics, inpatient and outpatient medical facilities. Though currently in private practice, Latasha works closely with area hospitals for the provision of psychological services to cardiopulmonary rehabilitation and oncology patients.

Latasha is also a certified clinical supervisor with the National Association of Social Workers, North Carolina Chapter and a certified trainer of Managing Aggressive Behaviors (MAB), through The University of Oklahoma OUTREACH; a program that emphasizes prevention and non-physical intervention strategies, and teaches non-pain producing physical intervention techniques.

Latasha's passion for the field of mental health and behavior management is exemplified by her role as Field Instructor for various universities. She holds a Bachelors of Social Work (BSW) degree from Morgan State University and a Master of Social Work (MSW) degree from the University of Maryland at Baltimore. Her MSW degree holds a concentration in Clinical Social Work with a primary specialization in Mental Health and a secondary specialization in Management and Community Organization. Latasha is currently pursuing her PhD.

Speaker Disclosures:

Financial: Latasha Ellis maintains a private practice. She receives a speaking honorarium from PESI, Inc.

Non-financial: Latasha Ellis has no relevant non-financial relationships to disclose.

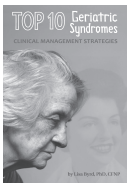
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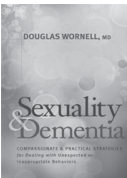
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TOP 10 Geriatric Syndromes - Clinical Management Strategies

By Lisa Byrd, PhD, CFNP

In addition to providing a guide to care within a structure of easy-to-use, age-appropriate treatment strategies, this book offers the author's compassionate, experienced discussions of the differing presentations of illnesses in elders. Topics include: falls, sleep, pain, eating problems, confusion (dementia/depression), incontinence, anxiety, living abilities (activities of daily living -ADLS), skin integrity issues and elminiation issues. (2011)



Sexuality & Dementia - Compassionate and Practical Strategies for Dealing with Unexpected or Inappropriate Behaviors

By Douglas Wornell, M.D.

It is common for a person with dementia to exhibit inappropriate and uncharacteristic sexual behavior, including promiscuity, verbal abuse, aggression, grabbing, exhibitionism, and jealous paranoia. This behavior puts a strain on spouses and partners, as well as other loved ones and caregivers. Now, for the first time, esteemed geriatric neuropsychiatrist, Douglas Wornell, MD, provides essential information and practical solutions to cope with these troubling and often embarrassing actions.

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7:30 Registration/Morning Coffee & Tea

8:00 Program begins

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