

**Dementia Care from an Occupational Therapy Perspective for CICOA: Aging & In-Home  
Solutions**

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**Author Note**

I have no conflicts of interest to disclose.

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### **Abstract**

Dementia is a growing condition among many seniors all over the world. This condition impacts not only individuals with the diagnosis but also their family caregivers. The numbers of seniors with dementia being cared for by family members within their homes are drastically increasing. Having the appropriate education and training about how to care for loved ones with dementia is crucial to the health and well-being of individuals with dementia and their caregivers. A literature review was conducted in order to explore the most current research regarding occupational therapy and how it relates to supporting individuals with dementia and their caregivers. This information was used to determine the gaps in caring for this population and to aid program development and implementation for a doctoral capstone project. Twenty articles were appraised and included in this review based on relevance to the project's purpose, focus, and goals. The occupational therapy student used the information collected throughout her literature review to create evidence-based material regarding dementia care for staff members at her capstone site placement to strengthen their knowledge regarding dementia care from an occupational therapy perspective to assist them in providing specialized education to caregivers. The acronym PWD was used to refer to people with dementia throughout this literature review.

*Keywords:* occupational therapy, dementia, caregiver, education, home, environment, modifications, behavior, activities, support, resources

### **Effects of Dementia**

There are many forms of dementia, Alzheimer's disease being the most common form. Currently, 6 million Americans live with Alzheimer's dementia; this number could grow to approximately 13 million by 2050 (as cited by Bresley et al., 2022). Livingston et al. (2013) reported the number of people living with dementia is rapidly rising due to increased longevity over the years. Elderly patients above 65 years of age with moderately severe dementia were included in a study between 2012-2016; findings from Harrison et al. (2019) reported 68.5% of individuals with moderately severe dementia who participated in the study were living at home and most were receiving assistance from family members. Authors from this study also reported that rates of nursing home use are declining because they are expensive and people generally prefer the familiarity of living in their homes, especially individuals with dementia.

The effects of dementia not only impact the individuals that have the condition, but it also impacts their families through the increase of dependence and challenging behaviors associated with this disease. The family caregivers are critical to the quality of life of those receiving care. Resciniti et al. (2020) reported evidence showing that caregivers who sustain high levels of caregiving are more likely to report poor health, poor sleep, and high levels of emotional stress. These negative impacts on one's health can predict the breakdown in quality of care provided by caregivers and could eventually lead to the need for placement into care homes which increases the financial burden on families caring for individuals with dementia. Decreasing the amount of stress that caregivers experience can improve their quality of life and the quality of care they provide to their loved ones, in turn, also improve the quality of life to those with dementia or a related condition.

Due to the rising rates of dementia and the increase of dependence on caregivers, there is a need for caregiver training to better prepare caregivers assisting their loved ones with dementia to ensure both individuals have a better quality of life. This doctoral capstone project focused on addressing the need for more education regarding caring for individuals with dementia in addition to program development for CICOA: Aging & In-Home Solutions. An occupational therapy capstone student created evidence-based resources for staff members at CICOA to utilize with caregivers to strengthen the caregivers' knowledge and ability to care for their loved ones. The intention of supplying additional caregiver education material was to support the organization in providing better quality services to caregivers and families they serve within the community.

### **Needs Assessment**

#### **Description**

CICOA is a nonprofit agency that serves to connect older adults, people with disabilities, and caregivers to better care. The main goal of this agency is to help seniors and people of any age with a disability remain safely in their own homes and out of institutional care. At-risk populations that are targeted by CICOA include low-income older adults, low-income minority older individuals, individuals with limited English proficiency, older adults in rural areas, persons 85 and older, women 85 and older living alone, individuals with dementia and their family caregivers, and people of any age with a disability. According to CICOA's Area Plan, current priority needs for the community they serve are transportation, access to home care services, home accessibility modifications, nutrition access, caregiver support, affordable housing, and translation services for persons with limited English proficiency. Specific areas of Indiana that receive services from CICOA are Boone, Hamilton, Hancock, Hendricks, Johnson,

Marion, Morgan, and Shelby Counties in Central Indiana (see CICOA: Aging & In-Home Solutions Area Plan, 2022, for additional information).

### **Background**

Most of the individuals that CICOA supports are older adults, with a great number of these adults being individuals with dementia. As previously mentioned, CICOA focuses on providing services to individuals in order for them to remain comfortably in their homes to avoid receiving residential care. There is a need for more education regarding appropriate ways for informal caregivers to provide care to their loved ones, especially for caregivers assisting individuals with dementia. Educating caregivers on how to properly care for someone with dementia can be used as a preventative measure for caregiver burden and to improve the quality of life of both family members with dementia and their caregivers.

Recent findings have identified that caregiver burden can occur in any caregivers; however, dementia caregivers are found to be significantly more stressed than non-dementia caregivers and experience more serious depressive symptoms and physical problems (Cheng, 2017). The reason for this is primarily due to the disruptive behaviors, delusions, and mood disturbances that can occur with this condition. Currently, there are limited options for safe and sufficiently effective pharmacological treatment to reduce symptoms associated with dementia and the correlated consequences placed on the family. Richardson et al. (2013) found that non-pharmacological interventions can reduce the negative impact of caregiver burden on caregiver health, reduce premature institutionalization of patients, and improve quality of life for patients, their families, and their caregivers.

Occupational therapists focus on providing non-pharmacological interventions, which includes caregiver and patient education. Piersol et al. (2017) looked at the effectiveness of

interventions for caregivers of major neurological disorders that facilitate the ability to maintain participation in the caregiver role. Findings from this study reported growing evidence to support caregiver interventions that are within the occupational therapy scope of practice. As mentioned by Piersol et al. (2017), caregiver education is a vital component of the therapy plan for people with dementia and is reimbursable. Other caregiver treatment approaches to incorporate based on evidence from this study include dementia education, behavior management strategies, communication skills, environmental modifications, stress management, and coping skills.

### **Interview**

When conducting the needs assessment, there are many steps that need to be taken into consideration. The capstone student started by contacting her primary site mentor to find a time that worked best for him and several other CICOA staff members to meet so they could have an initial interview for her to begin her needs assessment. The first interview focused on asking questions that helped her create a community profile and service profile. This was accomplished by obtaining background information about the company and their mission. Resources were provided to the expected capstone student to have more insight into the target populations and services CICOA provides.

After the initial interview, a second interview was scheduled for the capstone student to discover the focus of her doctoral capstone project. A series of questions were pre-selected and asked during the meeting to a panel of CICOA employees (see Appendix A). The person who was the most experienced with a topic answered the corresponding question. The second interview allowed the capstone student to collect data and analyze themes that were reported in response to the interview questions. After gaps were identified, the student formed a problem statement, a purpose for her project, and made a list of outcomes she wanted to achieve. Next, a

literature review was conducted to obtain evidence and identify methods for achieving the greatest outcomes for her doctoral capstone project.

To obtain additional information about the resources and support provided to caregivers for seniors with dementia, the primary site mentor for CICOA connected the student to additional CICOA staff members who were not present for either of the initial meetings; these staff members included the Dementia Programs Supervisor and the Dementia Care Coach. During this interview, the staff members were able to provide great insight and resources that were currently being used with caregivers (see Appendix B for interview questions). In addition, they provided recommendations for resources that could be beneficial for them to utilize to continue providing the best quality of services.

### **The Gap**

After speaking with employees at CICOA, one important gap that needed to be addressed was education regarding dementia care. With a few programs addressing dementia care already in place, the capstone student supported the care programs to help educate caregivers and individuals who have dementia from the perspective of an occupational therapist. In addition, the student collaborated with their home modification teams to become more knowledgeable about the modification services provided to families in order to create appropriate resources that catered to the target population.

CICOA currently has a Home Modifications team and a team called Safe-At-Home that both work to address physical barriers to create safer homes for all individuals within the general population that qualify for services. Staff on the dementia care team provide various forms of support and education. These supports include recommendations for various social environmental modifications, such as behavior management and communication strategies, as

well as general physical environment considerations specific to individuals with dementia. Currently, there is not as much education regarding specific cognitive environmental considerations to compensate for the progressive cognitive decline associated with dementia from either of these teams.

Throughout the capstone project, it was apparent to the student that many people view environmental modifications as the physical modifications that can be done to adjust or renovate an environment to make it safer. While this may be one important component to implementing environmental modifications, there are a wide range of environmental modifications that occupational therapists typically consider to remain client-centered and address specific needs for individuals they serve. As stated by Struckmeyer & Pickens (2015), it is important to use a range of environmental modifications, such as physical, cognitive, and social modifications, in order to improve the safety and function within the home. Once all of these forms of modifications are considered, CICOA will be able to provide a broader scope of services and education that can help caregivers for PWD to improve their role competence and well-being as well as the comfort and well-being of their loved ones.

During the search of the literature, the capstone student found research challenges in studying environmental modifications due to the large number of possible modifications and modification variations. In addition to the various types of modifications that could be made to positively impact individuals with this disease, the appropriate home modifications vary based on the needs of the person with dementia and the change in care throughout the disease process. The demands of caring for this population and their specific needs challenges research in the home environment, especially with the later stages of dementia.

### **Capstone Project Purpose**



Many individuals with dementia have impaired occupational performance in all areas of occupation due to memory loss, difficulty with communication, confusion, decreased safety awareness, disorientation, visual perception deficits, difficulty with coordination and motor planning, difficulty identifying objects or people, agitation, and changes in personality and behavior. This can lead to dependence on the caregiver to assist their loved one in completing daily occupations. Educating caregivers on how to properly care for someone with dementia can improve the quality of life of both the family member with dementia and their caregivers (Richardson et al., 2013).

After obtaining information from CICOA staff members during the interview process, the capstone student identified the focus of her project to be on education and assisting with program development. To provide education from an occupational therapy perspective, the student created resources for CICOA staff members to use with the caregivers they serve and tools caregivers can review to continue their training with dementia care. The occupational therapy student created resources regarding environmental modifications for individuals with dementia, behavioral triggers and preventative strategies, sensory stimulation as it relates to dementia, memory aids and compensatory strategies, and engaging activities distinguished by early, middle, and late-stage dementia. These specific resources were selected because they were not subjects CICOA already had exhaustive educational material for and they are topics that occupational therapists can provide specialized education for, as it is within their scope of practice.

### **Evidence Supporting Caregiver Education**

Caring for a person who has dementia can be especially challenging largely because few familial caregivers receive education about the skills needed to provide adequate care. As

previously discussed, with little to no training, caregivers typically experience the physical, psychological, social, and financial hardship for which they are unprepared for. Although a vast amount of research has been conducted in the area of caregiver burden, stress, and overall well-being, a lesser amount of research has been conducted regarding the impact of educating family caregivers to assist with care recipient daily activities and how to set up the environment appropriately to accommodate their loved one's needs.

Jensen & Padilla (2017) conducted a systematic review to evaluate the effectiveness of environment-based interventions that address behavior, perception, and falls in individuals with Alzheimer's disease (AD) and related neurocognitive disorders. Conclusions from this study provided strong evidence that indicates a person-centered approach can improve behavior. Moderate evidence from this research supports noise regulation, environmental design, unobtrusive visual barriers, and environmental relocation strategies to reduce problematic behaviors. In other research, Struckmeyer & Pickens (2015) completed a scoping review to gain insight into what is known from the literature about home modifications for individuals with AD and to identify gaps in the literature that could lead to further research opportunities. Struckmeyer & Pickens (2015) identified three major findings pertaining to (1) the caregiver role and caregiver training, (2) a client-centered collaborative approach to assessment and intervention, and (3) modifications for safety and function. The caregiver's role in home environment modifications was found to be a common theme throughout the literature due to caregivers being a part of the social environment and because they take on more responsibility to implement home modifications and strategies. As mentioned within this scoping review, barriers to implementing home modifications were related to caregivers' lack of knowledge about the disease process and a lack of available resources. When providing home modifications by using

a client-centered approach, improvement in caregiver self-efficacy and adherence to recommendations were frequent outcomes of training (as cited in Struckmeyer & Pickens, 2015). The third major finding from this review was the importance of using a range of environmental modifications to improve safety and function within the home, such as physical, cognitive, and social modifications. Physical environmental problems were related to safety. Home modifications designed to compensate for the progressive cognitive decline associated with dementia were made through both the physical and social environment. Social modifications found to be effective through this scope review included use of communication strategies, additional social support networks, and use of verbal cuing. According to evidence discovered by Struckmeyer & Pickens (2015), training caregivers in simplification of tasks and setup were cognitive home modifications that resulted in increased caregiver self-efficacy. This specific evidence was relevant to the student's capstone project, as select caregivers who receive services from CICOA completed a survey in 2022 in which they requested more education regarding helpful home modifications that accommodate PWD.

Behavioral symptoms such as agitation, apathy, and depression are often an expression of frustration or confusion. These behaviors can result from unsatisfying interactions with the environment, limited capacity to communicate, and unmet needs regarding loneliness, boredom, need for meaningful activity and social contact, too little or too much stimulation, and discomfort (as cited by Jakob & Collier, 2017). Care practice needs to support people with dementia in maintaining a good quality of life, dignity, and comfort by alleviating behavioral and psychological changes associated with the condition, especially in later stages of dementia. Understanding and responding to these needs appropriately through holistic, person-centered interventions can successfully mitigate these symptoms. Jakob & Collier (2017) conducted

design research that focused on sensory enrichment for people living with dementia to increase the benefits of multisensory environments in dementia care. From the research, they were able to establish new findings about user-centered design recommendations for PWD. Jakob & Collier (2017) found that design interventions fostering a person-centered approach within a loved one's environment should aim to provide a sense of familiarity, personalization, safety, and support a person's capacity and independence. In addition, a sensory enriched environment can be beneficial for PWD and should address all primary senses to support a person's ability to comprehend their surroundings. Selecting an array of sensory experiences within the environment allows caregivers to respond to an individual's preferences and needs, as well as have better control of the number, type, and intensity of stimuli to find the appropriate amount of stimulation for the user. Additionally, Cheng et al. (2019) completed a systematic review to provide an overview of types of multisensory stimulation (MSS) interventions used for treatment of major neurocognitive disorders. Results from this study found that there is growing support for the use of MSS interventions to improve mood, behavior, and quality of life in seniors with dementia. Additionally, noticeable improvements have been observed when using MSS to facilitate interactions and communication and reduce caregiver stress.

Meeting one of the most common needs, the need for stimulation, requires individualized, meaningful activities that are within a person's abilities (Jakob & Collier, 2017). As mentioned previously, one of the reasons disruptive behaviors can occur in PWD is due to a lack of engagement in activity. Activities are therapeutic not just to fill time but also to change negative emotions and promote feelings of purpose and accomplishment. Han et al. (2015) synthesized qualitative studies to describe the perspective of PWD regarding meaningful activities. Their analysis of the literature indicated that persons with dementia want to engage in

personally meaningful activities so they can connect with themselves, with others, and with their environment. Their findings identified that being connected is an important motivation for their engagement in daily activities and occupations. Being connected in personally meaningful ways promotes a sense of belonging along with physical, mental, and emotional health, self and social identity, independence, and life satisfaction in people with dementia (Han et al., 2015). As identified by Han et al. 's (2015) research, family caregivers had little awareness that reminiscence activity and music activity were important to their relatives with dementia, and families reported finding meaningful activities for their loved ones to be difficult. As dementia progresses, it may be that an individual is not able to engage in their valued activities even if they are using compensatory strategies or adaptive equipment. In these circumstances, it is best to find alternative activities that still provide a similar value or meaning to the activity the individual used to enjoy (Han et al., 2015). For this reason, it is important for a caregiver or person working with PWD to identify why a particular activity was important in order to help persons with dementia continue engaging in personally meaningful activities in various ways. In other research, Regier et al. (2016) conducted a secondary data analysis study to understand activity in dementia care and how it relates to disease stage. According to the study, engaging PWD in tailored, meaningful activities can reduce behavioral symptoms of dementia, as well as decrease caregiver burden. When tailoring activities to PWD, relate the activities to personal interests, previous habits, and occupations. Understanding the different stages of dementia and how individuals at each stage can be affected are additional factors to consider when making sure needs are being met by matching activities to their cognitive and functional capabilities. Results from Regier et al. (2016) indicated that activity categories and instructions for setup are significantly related to cognitive and functional levels; additionally, considerations identified for

reducing behavior symptoms through engagement in meaningful activities included cueing needs, help with initiation, and recommended engagement time.

Lastly, throughout the literature review, the evidence to support the effectiveness of caregiver education was examined. Piersol et al. (2017) conducted a systematic review and discussed the effect of educational and supportive strategies for caregivers of PWD on the ability to maintain participation in the caregiver role. Strong evidence from this systematic review showed that multicomponent psychoeducational interventions improved caregiver quality of life, confidence, self-efficacy, and reduced burden (Piersol et al., 2017). A number of the recommended caregiver treatment evidenced by this study included: (1) integration of dementia education, behavior management strategies, communication skills, environmental modification, stress management, anger management, and coping skills, (2) interaction with caregivers to explain, discuss, and practice educational content rather than just handing the caregiver a folder with educational materials (3) promotion of interaction between the caregiver and PWD through communication skills training and the use of memory books, photos of family members, and other memory aids (4) provision of caregiver training and practice using assistive devices with or for the persons with dementia (e.g., medication dispenser, raised toilet seat, monitoring system) to promote long-term use and carryover (Piersol et al., 2017).

### **Role of Occupational Therapy in Addressing Dementia Care and Caregiver Support**

Several articles provided evidence on the role of occupational therapy (OT) and how the profession relates to caring for individuals with dementia and supporting their caregivers. First, occupational therapists are specialized in caregiver training and education. Resciniti et al. (2020) found having adequate knowledge about dementia is associated with lower levels of caregiver burden, caregiver depression, and better quality of care for older adults with dementia. Bresley et

al. (2022) reported from their findings in the literature that occupational therapy programs demonstrated evidence of effective problem solving which included environmental modifications, caregiver education about dementia, its impacts, and how to address activities of daily living.

According to the American Occupational Therapy Association, the profession of occupational therapy is grounded in an understanding of the relationship between cognitive processes and performance of daily life occupations. The relationship between cognition and performance is a part of the occupational therapy perspective that emphasizes engagement in the client's desired occupations to promote cognitive functioning and occupational performance (Giles et al., 2019). Occupational therapists facilitate clients' cognitive functioning to enhance occupational performance, self-efficacy, participation, and perceived quality of life through the use of occupations and activities (Giles et al., 2019).

In research from Rhodus et al. (2021), community-dwelling, aging adults with either mild cognitive impairment or dementia require environmental modification and adaptation to achieve optimal behavior and functioning. Environmental adaptations can be enhanced using a sensory-based approach to meet the needs of these individuals who experience sensory processing difficulties. Rhodus et al. (2021) stated occupational therapists have unique skills in sensory and environmental assessment and intervention. Occupational therapists provide recommendations tailored to personal sensory preferences which can lead to less behavioral disruption. That being said, occupational therapists can help substantially improve behavior and function for those living with cognitive impairments, including individuals with dementia.

### **Guiding Theory and Model**

Two primary theories/models emerged to guide the program design of the occupational therapy student's capstone project. One important theory that helped guide this project is the adult learning theory, also considered as andragogy. This theory focuses on how adults learn as opposed to how children learn, and it addresses the unique needs and characteristics of adults in the learning process (Merriam & Bierema, 2013). One of the major tenets of Knowles's andragogy is that adults' life experiences not only define who they are as adults, but their life experiences are also a primary resource for learning (Merriam & Bierema, 2013). Adult learners have greater and more varied life experiences than those of children which impact their needs and interests when it comes to learning. As stated by Merriam & Bierema (2013), adults are motivated to improve situations in their adult life and their readiness to learn is closely related to the tasks of his or her social role(s). Andragogy is important because it is an essential part of evidence-based educational practice. Healthcare professional educators, including occupational therapists, need to understand the adult learning theories and use them to recognize why they are selecting and justifying the educational activities and materials they choose to apply so the activities have a solid theoretical foundation based on the learning environment and setting (Mukhalalati & Taylor, 2019). In this setting, the adult learners included staff members and caregivers who wanted to learn more about how to improve their quality of care and performance in their individual roles. The materials created by the occupational therapy student addressed the needs of the audience to help them gain a better understanding of how to more effectively assist people with dementia.

A second and equally important model that framed this project is the Person-Environment-Occupation (PEO) Model. The PEO model provides reasoning and recommendations behind the type of education and resources that will be provided to the staff



and caregivers as it relates to caring for individuals with dementia or related diseases. The interaction between the person, environment, and occupation is described by this model to help promote participation and provide quality care to individuals with dementia and their caregivers (Wong & Leland, 2018). Additionally, to best educate the families and staff on occupational therapy's role in addressing specific care considerations, it is critical to understand the external factors that may affect an individual with dementia, specifically how they impact engagement in occupations and the most effective ways to address barriers within one's surroundings.

### **Capstone Project Plan and Process**

The doctoral capstone student followed her initial project plan. She assessed the current resources and services CICOA provides, reviewed the latest research regarding dementia care as it relates to occupational therapy, and created materials that families and CICOA staff members would find beneficial to strengthen their approach to caring for the individuals with dementia. The student reviewed the project plan with the site mentor throughout the progression of the capstone experience and agreed to focus on program development for the first nine weeks of the capstone project and obtain clinical experience during the last five weeks by providing education to select families and staff members about resources the student created. By focusing on program development first, the student was able to become acquainted with the site's process of providing services to families, collaborate with various CICOA staff members, obtain recommendations and feedback from CICOA staff members, complete rough drafts of the evidence-based educational resources, and observe services provided to families within the community. The student focused on providing caregiver and staff education during the remaining weeks of the capstone project, which allowed her to gain clinical experience implementing the educational material she and the company graphic designer created. The remaining time of the capstone

project was spent reviewing survey results and feedback to measure the effectiveness of project outcomes. Throughout the process, the student updated goals and objectives, as seen in Table 1, to reflect the needs of the site.

### **Project Timeline**

#### ***Weeks One and Two***

Week one focused on orientation to the capstone site. During the first few weeks, the student became acquainted with other departments and staff members who were important to the project process. Once more oriented with the company, the student took time to review capstone materials and existing dementia care resources to plan the approach to continuing research regarding dementia care. Rough drafts of project design ideas and caregiver resources were created by reviewing the evidence gathered so far into the capstone project. In collaboration with the site mentor, goals and expectations for the experience were discussed and ideas concerning the project design were exchanged. Additionally, the site mentor helped the student connect with staff members regarding project design.

#### ***Weeks Three through Six***

The occupational therapy student continued to get a better understanding of the different departments and services CICOA provides to inform the development of educational resources during weeks three through six. There were meetings with additional stakeholders, including the CareAware Team and Dementia Care Team, to make adjustments to the needs assessment and inform key staff members about the available resources to come. The student collaborated with specific team members to observe care coaching sessions and analyze their approach to providing support and education. After the care coaching sessions were complete, there were discussions about barriers to providing services and care, the current resources being utilized,

and an occupational therapist's role in providing services regarding dementia care. Additionally, the capstone student observed home evaluations and safety home modifications to immerse herself in the culture of the site. These experiences influenced the production of educational resources to enhance current services and focus on a person-centered approach to care. The literature review resumed as the rough drafts of the educational material were finalized. Once the educational material information was compiled, the student connected with the company graphic designer who focused on creating resources that were more appealing and would represent the company. Communication with the graphic designer and staff from the marketing team continued throughout the editing process.

### ***Weeks Seven, Eight, & Nine***

During this portion of the capstone experience, the student connected with her site mentor to plan for the future home visits with caregivers and the Lunch and Learn event for the staff members at CICOA. The student created the presentation for the Lunch and Learn during week seven and week eight. At the end of week eight, a meeting took place with several nursing students from the University of Indianapolis and a staff member from the Community Health Worker Department. During this meeting, the participants were provided with a presentation focused on the purpose of the capstone project and the evidence found throughout the literature review. The educational materials that were finalized were also presented during the meeting. This collaboration assisted the nursing students in moving forward with their semester project regarding dementia and it helped them learn more about how occupational therapists approach caring for individuals with dementia and caregivers.

During weeks eight and nine, to ensure there were multiple forms of education issued prior to the completion of the capstone project, the occupational therapy student communicated

with the digital communication manager at CICOA to plan how they wanted to film educational videos about dementia care using information from the resources created. Filming was completed by the end of week nine. The videos were posted on the company website and made accessible to the public after the digital communications manager reviewed and edited the video footage.

Additionally, during week nine, the capstone student, her site mentor, and a care manager met with an outside organization, called Caregiver Homes, to coordinate how the student could potentially provide services for caregiver education in the near future. In the end, it was decided there was not enough time to collaborate and implement the resources with caregivers that Caregiver Homes serves. However, after the capstone student educated the staff regarding the information within her educational resources, the staff members agreed that having access to the resources would be valuable for them to utilize with caregivers in the future.

### ***Weeks Ten, Eleven, & Twelve***

During weeks ten and eleven, surveys and quizzes were created for the caregivers and staff using Microsoft Office Forms (<https://www.microsoft365.com/launch/forms?auth=2>). Additionally, the site mentor collected a list of potential participants to reach out to and schedule home visits with. Participants were selected from a list of informal caregivers within the local Indianapolis area who receive services from CICOA and care for a loved one with dementia. Once the list of potential caregivers was finalized, the student called each caregiver, explained her project purpose, and asked if they would be interested in receiving free caregiver education regarding dementia. After reaching out to the list of thirty six candidates, three caregivers were available within the presented time frame and agreed to receive a home visit for caregiver education from the occupational therapy student.

***Weeks Thirteen and Fourteen***

During the last few weeks of the capstone project, caregiver education was provided to the select families who agreed to participate in a home visit. During the home visits, the student gained experience implementing her resources and gathered feedback from the caregivers regarding the quality of the education and the resources provided. In addition to obtaining experience providing caregiver education, the occupational therapy student educated CICOA staff members about the resources during week thirteen through a virtual Lunch and Learn lecture. The main purpose of the presentation was to make sure the staff members at CICOA were aware of the new materials that were available and they were comfortable with implementing the material when providing services to family caregivers in the future. The student used her personal experience with providing caregiver education to influence recommendations for the staff members when utilizing the resources with the caregivers based on the caregivers' specific interests and needs. The data from the both surveys as well as the pre- and post-workshop quizzes were analyzed. The occupational therapy student used her experience with the home visits, the Lunch and Learn presentation, the data collected to finalize the literature review paper during week fourteen.

**Capstone Project Implementation**

The capstone project was implemented throughout the 14-week experience to assist with program development and to provide education to CICOA staff members and to select caregivers. The student adapted her plans based on the needs of her capstone site placement and the time remaining to complete her project. The student's site mentor, the dementia care team, and the marketing team were the main staff members and departments who were involved in assisting with the planning process for this project. At the beginning of the capstone project, the

student focused on completing the literature review to create evidence-based educational resources for CICOA. Throughout the capstone experience, the student educated various staff members, departments, and college students also interning with CICOA about the educational materials as they were created and the research to support the resources regarding dementia care. This educational experience included attending several care coaching sessions with caregivers for individuals with dementia. During these opportunities, the student attended conference calls with care coaches and caregivers, with the caregivers' approval, and analyzed how the care coaches addressed the caregivers' concerns and barriers. After shadowing the sessions, the capstone student discussed the sessions separately with the care coaches to reflect on the coaching sessions and uncover more information that might be beneficial to know about the families to assist the caregivers further from an occupational therapy perspective. The student used her background knowledge and the evidence discovered throughout her literature review to provide the care coaches with additional caregiver support suggestions to address the caregivers' wants and needs.

In addition to the mentioned opportunities, the student gained experience observing home modification services and educated the caregivers about how occupational therapists address home modifications as well. The student collaborated with a physical therapist, who was a home modifications contractor, and a CICOA staff member from the Save- At- Home Department, for these community opportunities. As there was a break with getting hands-on experience within the community, the capstone student created supplemental, educational videos with the marketing team to inform others about the information within her resources. These videos were intended for anyone who was interested in learning more about dementia care from an occupational therapy perspective and were posted on the company website.

Towards the end of the capstone experience, the student implemented the resources she created regarding dementia with select family caregivers by providing in-home caregiver education sessions. After each session, she had the caregivers complete a post education survey to obtain feedback about the quality of the resources and education provided. In addition, the occupational therapy student hosted a presentation for CICOA staff members to ensure everyone was aware of the new resources that were available and they were informed about the research findings that could help them provide caregiver education in the future. Prior to presenting, the student sent an email to all staff members at CICOA to invite them to the Lunch and Learn. This email included a brief pre-workshop quiz for the staff to complete prior to the Lunch and Learn and the caregiver resources the student would be reviewing for the staff to look at ahead of time if they desired. There were a total of 125 staff members who attended the Lunch and Learn. The capstone student started the presentation by reviewing the learning goals and objectives for the presentation as well as briefly discussing what occupational therapy is and how individuals who work in this profession address caring for people with dementia and their caregivers. Throughout her presentation, the student reviewed key points about the information within the resources and how it relates to the evidence that was obtained during the literature review. Once the presentation was complete, the staff members who attended were instructed to complete a post-presentation quiz and survey about the presentation to obtain one continuing education credit via email.

### **Capstone Project Evaluation**

#### **Caregiver Survey**

During the last few weeks of the occupational therapy student's capstone project, the student collaborated with select caregivers for individuals with dementia and provided caregiver

education based on their needs evaluated using the Canadian Occupational Performance Measure (COPM). The COPM assesses an individual's perceived occupational performance in the areas of self-care, productivity, and leisure (Shirley Ryan Ability Lab, 2013). This assessment was selected by the student because it entails a semi-structured interview that focuses on identifying activities within each performance domain that the client wants, needs, or is expected to perform. For the purpose of the student's project, parts of the COPM were used to interview the caregivers about their caregiving experiences and guide the caregiver education sessions. Based on their report of their loved ones performance in daily activities, their barriers with providing care, and their interests in learning new information regarding dementia and caregiving, the student selected the most important resources to review with the caregivers.

The student completed three home visits during the last few weeks of her capstone experience. Post-surveys were created by the capstone student and provided to family caregivers following each home visit to measure the effectiveness of the caregiving material and the education provided. An open-ended question was included to gather information about topics the caregivers would like to learn more about regarding dementia and caregiving. This information was used to get ideas about additional resources that could potentially be helpful for CICOA to develop and implement in the future. From the responses, caregivers were interested in learning more comprehensive information about how to manage impulsive and aggressive behaviors and the science behind memory loss with dementia. The caregiver survey also included a space to provide details about the specific educational resources used during each session to measure the frequency of the resources utilized. This information gave the student a better understanding about what the caregivers were most interested in learning about and what they found to be the most beneficial in order to improve the quality of their care. From the survey results, the



caregivers were most interested in learning about engaging activities for individuals with dementia, managing triggers and behaviors, and memory aids and strategies.

Overall, responses from the surveys determined the caregivers were in agreement that the resources were helpful and relevant to their caregiving duties, the content was presented in a clear and concise manner, and they were very likely to use the resources in the future. Additional feedback from the caregivers was very positive and they were very appreciative of the free resources and education the occupational therapy student provided. Survey questions and additional data points obtained from this survey can be reviewed in Appendix C.

### **Lunch and Learn Outcome Measurements**

Prior to the Lunch and Learn workshop with the CICOA staff, the occupational therapy student created a pre-workshop quiz and sent it to the staff members who planned on attending the presentation to evaluate their prior knowledge regarding dementia care as it relates to occupational therapy. Following the Lunch and Learn workshop, a post-quiz was completed by the CICOA staff so the student could compare outcomes from the pre- and post- quiz. Additionally, the student instructed that all the staff members who attended the workshop complete a post-workshop survey. To make completing the task easier for the staff members, the post-workshop quiz and survey were combined into one link and the outcome measurements were separated once data was gathered for easier interpretation.

Initially, there were 134 pre-workshop quiz submissions. Out of the 134 submissions, 125 participants were able to attend the Lunch and Learn. Of the 125 participants who attended the presentation, after a reminder email was sent by the student, 105 responses were submitted for the post-workshop quiz and post-workshop survey. 67 participants who attended the presentation and submitted a post survey and quiz were a part of Flourish, the care management team. This

team focuses on person-centered care to empower others to remain at home in better health, with better care, at a lower cost. Care managers assess an individual's eligibility for services, functional impairment and care needs, develop a customized plan of care, and coordinate all services required to extend independent living (Care Management | CICOA, 2019). The department with the second highest number of staff members who attended the presentation and completed the survey and post-quiz was the Aging & Disability Resource Center (ADRC) team, with 16 participants from this team. ADRC is a call center that provides information on local services for older adults, people with disabilities, and family caregivers in Central Indiana (Central Indiana Aging and Disability Resource Center | CICOA, 2019). The remaining 22 participants who attended the presentation and completed all the requirements were a part of other various company departments including Chronic Care Management, Community Programs, Compliance, Development, Education, Fiscal, Human Resources, Meals and More, and Other.

When comparing the results from both quizzes, it was apparent that the correct responses from the staff members for all five quiz questions improved from the pre-workshop quiz to the post-workshop quiz. The difference in incorrect responses were more drastic for the first two questions that addressed occupational therapy; however, there was significant improvement from the pre-workshop quiz to the post-workshop quiz. There was slight improvement in correct responses for the questions regarding dementia from the pre-quizzes to the post-quizzes (see Appendix D for pre quiz and post quiz results).

The post workshop survey responses demonstrated a common theme. A majority of the staff members found the topic relevant, enjoyed the presentation, found the information was presented in a clear and concise manner, and they found the Lunch and Learn session effective.

104 participants found the resources helpful and 97 staff members anticipated using the resources in the future with clients. Generally, the feedback regarding likes and dislikes about the presentation were positive. The student used the comments about the presentation to get a better understanding about what the staff thought went well and how the student could improve as a presenter and health educator. Additionally, the survey included an open-ended question for the staff members to provide suggestions for topics they are interested in learning more about regarding caregiver education or dementia and related conditions. This question was addressed to help collect details about potentially helpful information for CICOA to apply in the future. The survey responses from the staff likely depended on what department individuals were a part of and if the information was relevant to their job description and the services they provide (see Appendix E for post workshop survey questions and results).

### **Capstone Project Impact and Sustainability Plan**

By using the surveys and quizzes to measure outcomes, the student was able to obtain helpful information about the impact of her project. The results and feedback from the caregiver surveys suggested that the caregivers found value in the caregiver education sessions and the resources created. Resources the caregivers were most interested in learning more about and information that met their specific needs was the focus of education. Nevertheless, there was a folder provided to each family caregiver with all of the completed resources for the caregivers to review on their own time if they were interested in learning more about dementia care. Even though the student was not able to see an abundance of caregivers during the capstone experience, the opportunities that were available informed the caregiver education suggestions provided during the presentation with the CICOA staff members. The student found it very

beneficial to have personal experience to reflect on when discussing the caregiver resources with the staff.

When the results from both the workshop quizzes were compared, it was apparent that the Lunch and Learn helped the staff learn new information regarding occupational therapy and dementia care. The feedback from the surveys demonstrated that a majority of the staff members found the information helpful and beneficial to keep and utilize in the future. In addition, the presentation informed the staff members about the occupational therapy profession and how occupational therapists address working with individuals who have dementia and their caregivers. The quiz results confirmed that some individuals who attended the workshop may not have been familiar with this profession and the presentation educated these individuals to give them a better understanding of occupational therapy.

There were many ways the student was able to achieve the project purpose of providing education and assisting with program development during her time at CICOA. The caregiver resources were the main educational materials that CICOA staff could utilize in the future to sustain the application of the capstone project outcomes. The digital communications manager also created a resource page, called the Dementia Caregiver Resources, on the company website for the public to access. The webpage includes the caregiver resources the student created, her informative videos, links for caregiver support services provided by CICOA staff, and a link to register for Dementia Friends Indiana sessions. To review the Dementia Caregiver Resources website and content, follow <https://cicoa.org/resource-center/dementia-caregiver-resources/>. Additionally, the recording from the student's Lunch and Learn presentation, the presentation PowerPoint slides, the post-workshop quiz, and the educational resources were all posted on Lessonly, one of CICOA's training platforms, and CICOA's training and education page for staff

to review for training purposes. It is anticipated that the staff will continue to utilize the educational material and resources with caregivers and refer back to the additional content on their training platforms as needed.

### **Conclusion**

The capstone student accomplished the capstone project goals and objectives in order to achieve the project purpose of creating additional dementia care tools and resources for CICOA staff to utilize with caregivers in the future. The student was able to identify important areas for development, research best practices regarding dementia care as it relates to occupational therapy, and collaborate with other staff members to assist with providing education and program development. By providing education and giving CICOA staff access to new tools regarding dementia care, it is hopeful that the staff members are prepared to inform the caregivers about the useful information that can improve the quality of life of both caregivers and their loved ones. Through this capstone experience and project outcomes, advancements are being made to ensure dementia caregivers are well-educated in new strategies to help care for their loved ones.

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**Table 1**

*Dementia Care from an Occupational Therapy Perspective: Project Goals and Objectives*

**Project Goals and Objectives**

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1. The student will identify areas of improvement for COCOA's current dementia programs in order to help guide the capstone project to fit the needs of the organization to better serve individuals with dementia and their caregivers.
  - a. Objective 1: Student will interview dementia care coaches who work at CICOA to determine areas of improvement in the services currently being provided to individuals within this population.
  - b. Objective 2: Student will review and assess the current resources provided to caregivers who care for individuals with dementia.
  - c. Objective 3: Student will research best practices for working with this population after determining areas of improvement to provide appropriate recommendations for program development.

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2. The student will collaborate with CICOA staff members and caregivers they serve to assist with program development regarding current dementia services.
  - a. Objective 1: After reviewing current resources, student will create supplemental resources regarding dementia care to provide to caregivers and for staff to use in the future with caregivers.
  - b. Objective 2: Student will connect with select families who care for individuals

with dementia, assess their needs, and provide specialized caregiver education that will help them care for their loved ones with dementia.

- c. Objective 3: The student will create videos regarding resources with CICOA's Marketing Team for staff members, families, and community members to gain further education about dementia care.
- 

3. The student will ensure sustainability of program development initiatives by week 14 to promote long-term health and well-being of this population.

- a. Objective 1: Student will create and provide a survey for staff members and caregivers to complete to measure the effectiveness of education and tools.
- b. Objective 2: The student will educate the staff on resources created to ensure the care managers and other staff members are aware of the new resources available for families and how to implement these resources in the future.
- c. Objective 3: The student will educate and advocate for this population through all future personal and professional encounters.

## **Appendix A**

### **Interview Questions**

1. How would you describe the purpose (i.e., the mission and philosophy) of your organization in your own words?
2. What group of individuals (i.e., your targeted population and others served by this organization) do you serve?
3. What are some of the characteristics (i.e., their ages, abilities, and so on) of this population?
4. How do the services differ between the different populations you service?
5. Who is most in need of help?
6. What are their primary needs? Is there anything that is currently in place to address these needs?
7. What types of barriers are you experiencing with serving individuals within the target population?
8. What specific goals would you like to achieve this year as a company?
9. What kinds of services do you offer? Do you feel that these services are effective?
10. How are you measuring your company's service outcomes currently?
11. What area of Indianapolis tends to have the most need for services?
12. What resources are currently available?

13. Are you working in collaboration with any other companies? If so, what companies?

a. Do you feel that the relationship with the companies you collaborate with allows you to provide effective services?

14. Would you like me to continue the work of previous capstone projects or would you like me to start a new project to address another area of concern?

15. Are there additional programming services you are interested in? Are there additional components you would like to add to existing services?

## **Appendix B**

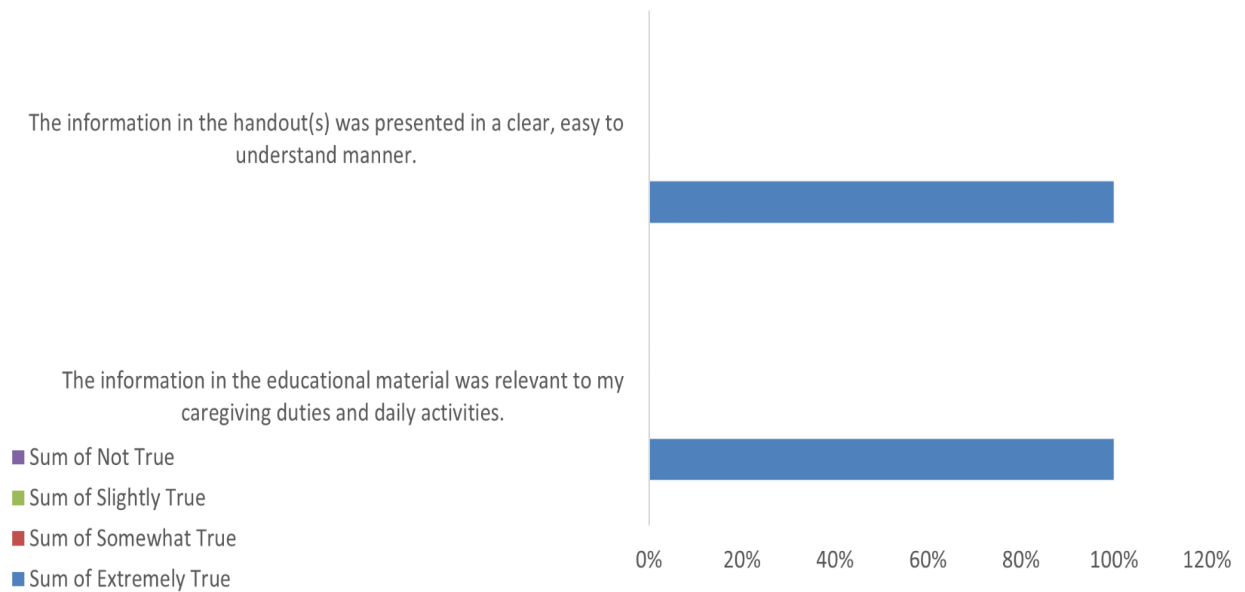
### **Dementia Care Team Interview Questions**

1. What barriers do caregivers report having frequently when caring for individuals with dementia?
2. What barrier do you currently experience with assisting caregivers who care for individuals with dementia?
3. What resources/services are currently provided to caregivers who assist individuals with dementia?
4. What is the current approach to providing care to caregivers who assist individuals with dementia?

**Appendix C**

**Caregiver Education Post Survey Questions and Results**

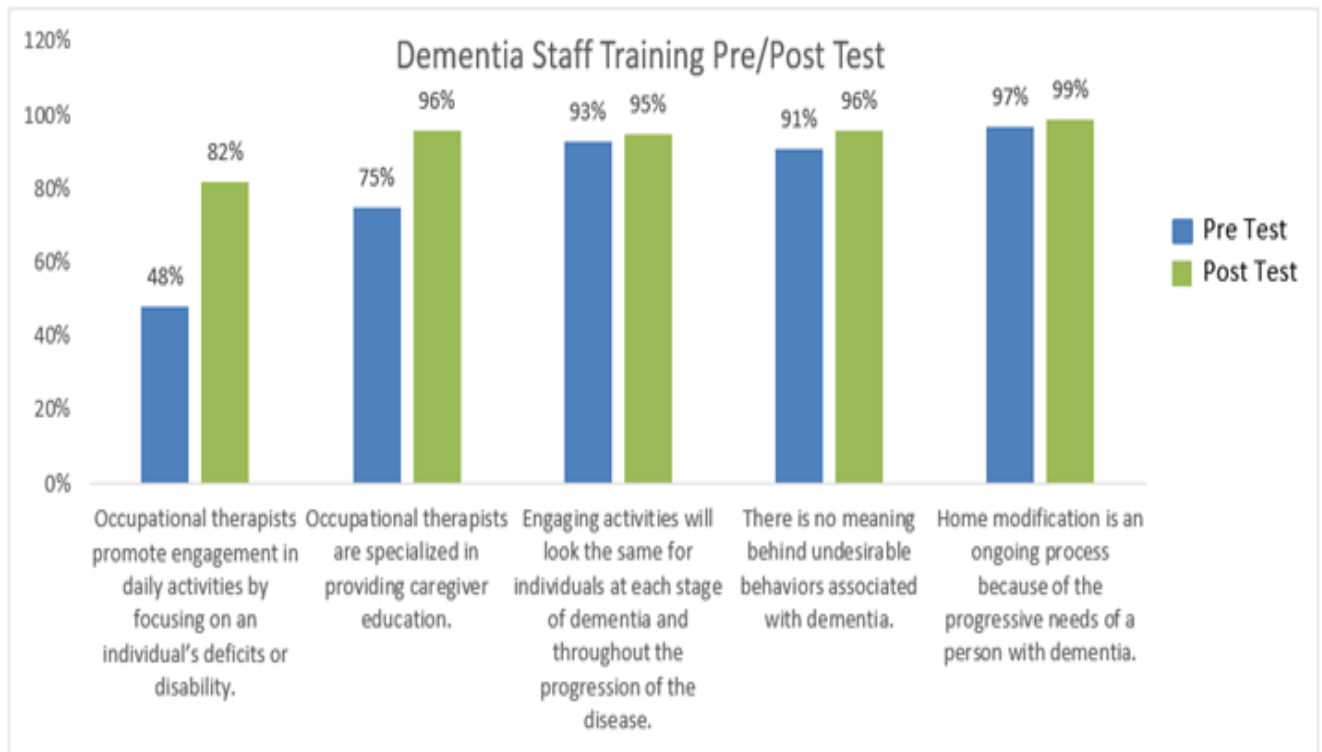
1. Did you find that the information provided was helpful?
2. How likely are you to use the information provided?
3. What other topics would you like to learn more about regarding dementia or the role of caregiving?
4. Which handouts were implemented during this caregiver education session?
5. Please provide any additional comments about the education and resources provided.





**Appendix D**

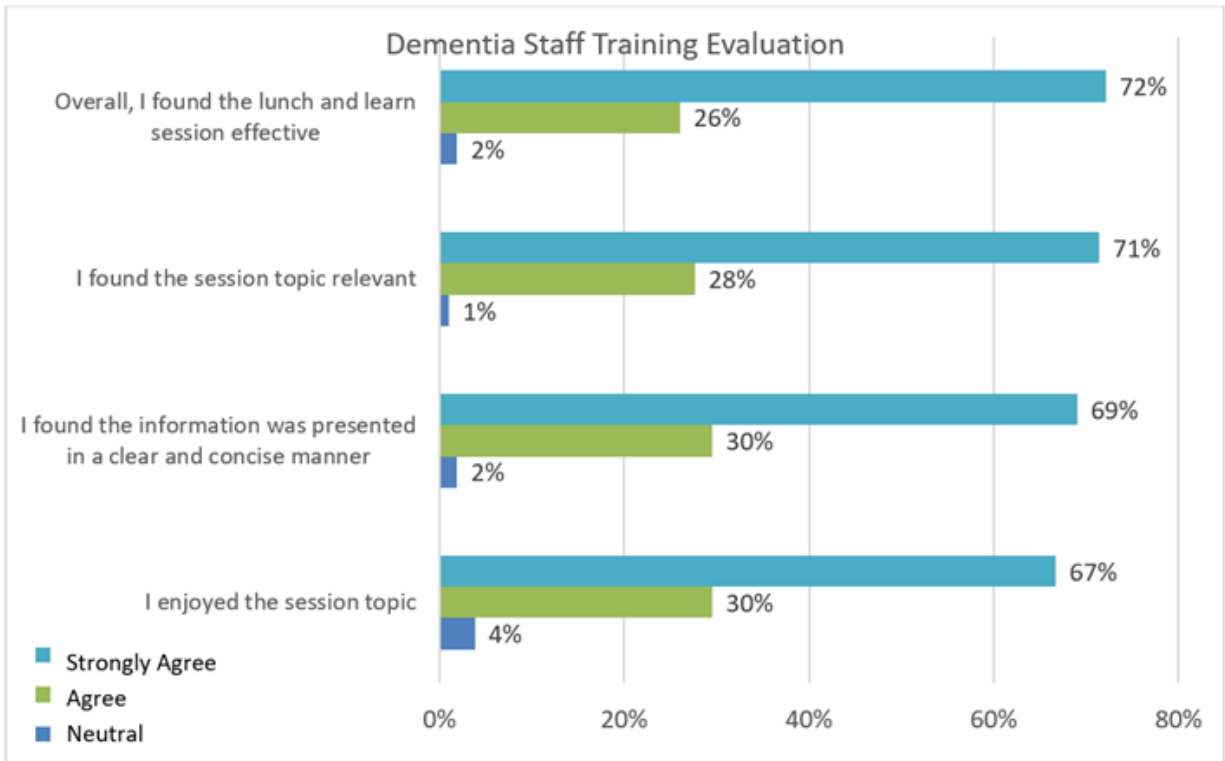
**Dementia Care Pre and Post Workshop Quiz Results**



\*The bar graph above shows the percentage of correct responses from the staff members for the pre and post workshop quiz.

**Appendix E**

**Dementia Staff Training Post Survey Results**



Additional questions addressed in the post workshop survey:

1. Did you find the resources helpful?
2. Do you foresee yourself sharing the resources with your clients?
3. What did you like or dislike about the Lunch and Learn?
4. What would you like to learn more about regarding caregiver education or dementia and related conditions?
5. Do you have any other comments about this presentation?