

dementia-friendly communities

A dementia-friendly community is a place where people living with dementia are supported to live a high quality life with meaning, purpose, and value.

For people with younger onset dementia, this also means being given the opportunity and support to stay at work or volunteer.

Kylie WatkinsAlzheimer's Australia

What is a Dementia-Friendly Community?

A dementia-friendly community is a place where individuals with dementia:

- · Are able to live good lives.
- Have the ability to live as independently as possible.
- Continue to be part of their communities.
- Are met with understanding.
- Are given support where necessary.

According to Innovations in Dementia (2012), individuals with dementia described a dementia-friendly community as one that enabled them to:

- Find their way around and be safe.
- Access local facilities they are used to and where they are known (such as banks, shops, cafés, cinemas and post offices).
- Maintain their social networks so they feel they continue to belong.

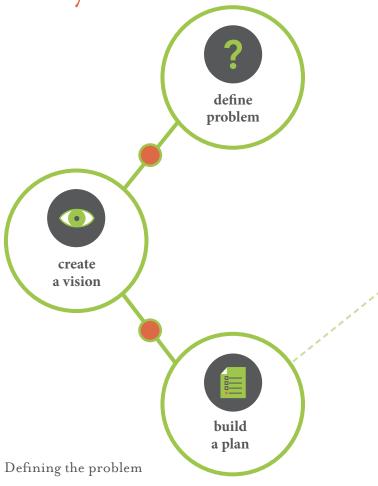
Dementia-friendly communities build infrastructure to support and take responsibility for enlarging the beneficial effect of services for individuals with dementia and their caregivers. To accomplish these goals, communities can develop new models of collaborative service delivery and advocacy.

Areas of need to be addressed include:

- Public awareness
- Promotion of early detection
- Creation of environments that calm and support the reduction of anxiety for those with dementia
- · Crisis capacity for mobile crisis teams
- Development of emergency placement facilities
- · Successful care transition management between settings
- · Voluntary sheriff registry and wandering programs
- · Dementia-friendly businesses

Steps to Building a Dementia-Friendly

Community



Step One:

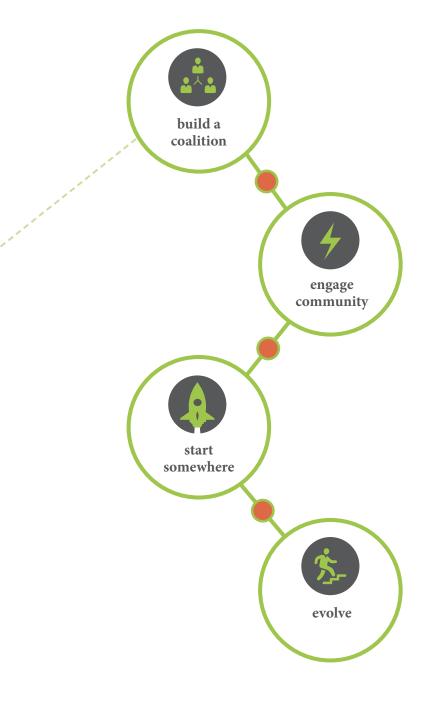
Step Two: Creating a vision Step Three: Building a plan

Step Four: Building a coalition or network

Step Five: Engaging a community

Step Six: Starting somewhere

Step Seven: Evolving the initiative The process for building a dementia-friendly community includes these recommended steps. However, a new initiative may start anywhere within the process to accommodate the uniqueness within a community. Communities should ask specific questions that are relevant to their individual needs and ascertain resources that are available and/or needed to create a successful and effective dementia-friendly initiative.





Step One: Defining the Problem

This step includes asking questions that will help define the problem and assist in finding the data and resources to move forward in a community initiative. These questions may include:

- What community issues exist related to Alzheimer's disease and other dementias?
- What are the immediate issues and community needs?
- What data exist that will help define the number of individuals in the community living with dementia?



Step Two: Creating a Vision

This step includes developing a vision and/or mission statement for the initiative that creates the bigger picture of the dementiafriendly initiative. It defines a timeline and goal and helps to answer the question of what the initiative means to the community and why the community is engaging in this effort.

Example of a vision or mission statement:

Within 18 months, our community will create a sustainable dementia-friendly community that includes an effective and sustainable infrastructure to support individuals with dementia and their caregivers.



Step Three: Building a Plan

This step includes the assessment of existing resources within a community and the engagement of key leaders, stakeholders and partners to build a plan that is unique to a community. The views and opinions of the individuals with dementia and their caregivers must be at the center of any consideration or decision. This engagement provides for a sense of ownership, investment, responsibility and connectedness to the community for individuals with dementia and their caregivers.

Assessment activities may include:

- Individual interviews with potential partners and members of the project.
- Group meetings with key community leaders and members to identify the issues and assess current strengths and gaps.
- Organized events specifically to address dementia-friendly issues.

Sample questions or types of information may include:

- What issues motivate stakeholders to take action?
- Who are the individuals directly involved and affected by a dementia-friendly community initiative?
- What services does the community already have for individuals with dementia and their caregivers?
- Who is currently providing these services for individuals with dementia and their caregivers?

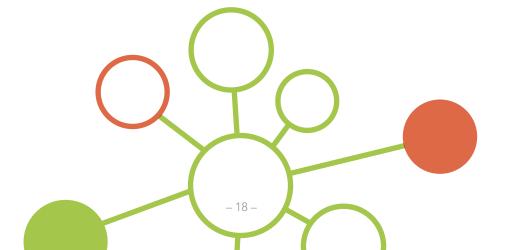
STEP THREE: BUILDING A PLAN continued...

- What is working within the community related to dementiafriendly activities?
- What is not working within the community related to dementiafriendly activities?
- What are the key issues as defined by interviews with key stakeholders and partners?
- What one activity for each identified issue could be implemented first or immediately?

Assessment of current existing networks in the community may include the following for communication, education and volunteers:

- Aging and Disability Resource Centers (ADRC)
- Local Public Health Departments
- Hospitals
- Health Care Clinics
- Faith-Based Organizations and Churches
- Senior Centers
- Nutrition Sites
- Businesses
- Clubs, Service Organizations or other Voluntary Groups

- Chambers of Commerce
- Banks
- Shops
- Libraries
- Restaurants
- Cinemas
- Post Offices
- Law Enforcement
- First Responders
- Fire Departments
- Emergency Medical Technicians



Several dementia-friendly community initiatives in Wisconsin began with a community event to engage leaders, stakeholders and potential partners. The following example is from the Jefferson County Aging and Disability Resource Center (ADRC):



The Jefferson County ADRC collaborated with the Alzheimer's Association of Southeastern Wisconsin to plan and implement a dementia summit in August 2013. The summit was held at the local hospital and brought together community stakeholders who had a vested interest in providing the resources needed for a sustainable infrastructure for those individuals with Alzheimer's disease and other dementias and their caregivers in Jefferson County. Attendees included caregivers of those with dementia and professionals from assisted living facilities, nursing homes, day centers, ADRCs, media, law enforcement, faith-based organizations, emergency room personnel and many others. During the summit, all participants were asked to share issues they had experienced with dementia in their individual sectors. The issues were then organized into nine categories. Nine task groups were formed to determine projects for each identified issue and bring back results for a follow-up summit that was held in May 2014. After the second summit, an-ongoing Dementia Network (coalition) was formed. The network, called "Living Well with Dementia in Jefferson County," continues to meet monthly and utilizes a Facebook page for communication and outreach.



Step Four: Building a Coalition or Network

This step includes building a coalition or network to plan, implement, evaluate and sustain the efforts of a dementia-friendly community initiative. Coalitions that implement best practices consist of mutually engaged creative partnerships that honor each other's individual talents, ideas and resources and clearly communicate needs, abilities and desires. Several Wisconsin dementia-friendly coalitions began with dementia-friendly activities, such as memory cafés and dementia-friendly businesses, rather than a more formal coalition building process.

Coalition building activities may include:

- Checking with all local organizations and agencies to assess interest.
- Recruiting potential partners from local community groups, agencies or organizations, such as aging and disability resource centers, local public health departments, managed care organizations, hospitals, first responders, local government leaders, individuals with dementia and their caregivers, advocacy organization staff, assisted living or nursing home facilities, volunteer agencies and service organizations or agencies.
- Building small ad-hoc task groups or subcommittees and assigning activities from each identified issue.

Additional information on coalition building is available on the following websites:

- www.countyhealthrankings.org/resources/communityhealth-partnerships-tools-and-information-developmentsupport (County Health Rankings & Roadmaps)
- www.countyhealthrankings.org/sites/default/files/eightstep.
 pdf (Developing Effective Coalitions: An Eight Step Guide)



Step Five: Engaging a Community

This step includes implementing activities that reach out to, educate and engage community members in dementia-friendly community initiatives through personal stories, events and other communication activities. Several Wisconsin dementia-friendly initiatives have implemented these types of activities, including those in Chippewa Falls, Jefferson County and Waukesha County.

Suggested community outreach activities include:

- Finding and sharing personal stories with the media from individuals with dementia and their caregivers.
- Planning and implementing an event focused on educating the public and local leadership on the importance and need for a dementia-friendly community initiative. Events can include a community meeting, listening session or press conference with personal testimony or data relating to the need for dementia-friendly activities.
- Utilizing social media for the project, such as a Facebook page, website or Twitter. The following is a website example: www.foxvalleymemoryproject.org.
- Developing and distributing dementia-friendly community brochures, flyers or letters, such as the Fox Valley Memory Project brochure, Living Well with Dementia.
- Contacting a local radio program for a story or interview.
- Developing a collaborative partnership with a local newspaper.
- Securing presentations for service clubs such as rotaries, chambers of commerce and other organizations and groups.
- Creating and hosting displays at local events, such as health fairs.

- Creating and delivering informational packets for local businesses that include:
 - An introductory letter explaining the initiative and available resources to help in becoming a dementiafriendly business.
 - Contact information for the local aging and disability resource center and the dementia care specialist, if one is available.
 - A brochure, brief explanation or one-page information sheet with:
 - The definition of a dementia-friendly community.
 - The role of a dementia-friendly business.
 - The advantages in becoming a dementia-friendly business.
 - The components of a dementia-friendly business environment.
 - Information about how a business can become dementia-friendly.
 - · A training outline for employees.





Step Six: Starting Somewhere

This step focuses on selecting and implementing activities as first steps to creating a dementia-friendly initiative. Many communities began with a single project or activity that engaged the interest of individuals and organizations and created momentum and success for the projects. Building upon existing activities that are already working is a first step. Learning is key, along with trying and following the examples of other successful dementia-friendly communities. Examples of possible activities include starting with one dementia-friendly business, hosting memory cafés, implementing community events and conducting memory screenings.



Step Seven: Evolving the Initiative

This step emphasizes the importance of evaluating your efforts, adding enhancements and creating opportunities for sustaining a dementia-friendly community initiative. As each dementia-friendly activity is implemented, communities should assess their next steps.

Questions that may assist in this process include:

- What activities have been conducted?
- What activities are working?
- What activities are not working?
- What is the next step needed to move the initiative forward?

Sustainability

The elements for sustaining dementia-friendly community initiatives may include the following:

I. Coalitions

The establishment of a coalition of key partners working collaboratively within an existing organization, such as a local public health department or an aging and disability resource center, provides stability and an organizational structure for a dementia-friendly community.

2. Membership Diversity

A more diverse coalition composed of many different members who represent all facets of the community creates a higher capacity for effective functioning and sustainability.

3. Funding

Some dementia-friendly community initiatives have been successful with no funding. Others have secured resources through grant writing, local fundraising events and in-kind support through existing organizations that have similar missions.

4. Nonprofit Status

A dementia-friendly community initiative may consider pursuing nonprofit status.

5 Other Elements

- · Community awareness and buy-in
- Local business support
- · Communication and marketing
- Engaged local officials
- · Engaged individuals with dementia and their caregivers
- A local champion who is passionate for the cause and serves as an active advocate

Chippewa Falls Businesses Go Dementia-Friendly



Chippewa Falls accomplished this program within three months and other communities can too. A dementia-friendly community is one that shows a high level of public awareness and understanding of dementia.

Recommended steps:

- $oldsymbol{I}$. Survey local businesses for interest in the project.
- 2 Engage key partners such as the Alzheimer's Association, the Aging and Disability Resource Center, local hospitals, clinics and nursing homes.
- $oldsymbol{3}$. Each organization takes a piece of the puzzle.
- $m{4}$. Meet regularly for updates and refining the program.
- 5 Notify local media.

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Dementia-Friendly Businesses

Enhancing hospitality and positive experiences for customers and employees can be considered good business practices, including respectful and responsive services for individuals with Alzheimer's disease and other dementias and their caregivers. A business that is dementia-friendly becomes a stakeholder in the well-being of the community.

As there is a financial cost for a business to have its employees engaged in activities other than their normal work functions, it is critical that dementia-friendly business training be conducted in a manner that considers the business's schedule, timing and distinct needs. Initial training can raise awareness and is usually implemented in 30 minutes or less, allowing questions and time to discuss specific issues relevant to an individual business.

The following topics are important considerations when training businesses to become dementia-friendly.

WHY IS IT IMPORTANT FOR BUSINESSES TO BE DEMENTIA-FRIENDLY?

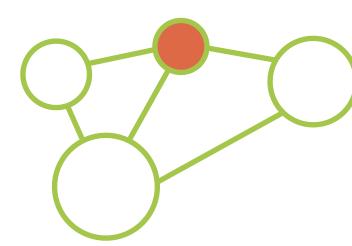
- They may have customers with dementia or customers who are caregivers of individuals with dementia.
- They may have employees in the beginning stages of dementia or caregivers of individuals with dementia as employees.

A DEMENTIA-FRIENDLY BUSINESS IS A BUSINESS THAT:

- Is able to recognize the signs of dementia.
- · Can communicate effectively with individuals with dementia.
- Knows how to locate resources and assistance for themselves and for individuals with dementia.

COMPONENTS FOR TRAINING BUSINESSES TO BE DEMENTIA-FRIENDLY INCLUDE:

- Effective training materials that address the needs of individual businesses.
- A time frame that meets the businesses' schedules (usually 20-30 minutes).
- · A training protocol for maintaining a dementia-friendly status.
- · A sticker with the dementia-friendly community symbol.
- Materials for evaluating the business's physical environment for safety and ease of navigation for an individual with dementia.



TRAINING MATERIALS AND TOPICS FOR EMPLOYEE EDUCATION INCLUDE:

- What is a dementia-friendly community and how can it enable individuals with dementia to continue to safely access resources and services?
- How and why a dementia-friendly business fits into the larger picture of a dementia-friendly community?
- · The viewpoint of the individual with dementia.
- · Signs and symptoms of an individual with dementia.
- How to approach and interact successfully with an individual with dementia.
- Responses that might be helpful in communicating with an individual with dementia.
- Discussion of possible issues that have or may have occurred in a particular business and appropriate strategies to address them.
- What is a dementia-friendly physical environment?

PROTOCOL FOR MAINTAINING A DEMENTIA-FRIENDLY BUSINESS

Once a business has received the designation as a dementia -friendly business, best practice recommends that a protocol be instituted to maintain this status. Typically, businesses completing satisfactory training for dementia-friendly efforts are provided with the dementia-friendly community symbol to communicate this status to individuals with dementia and their caregivers.



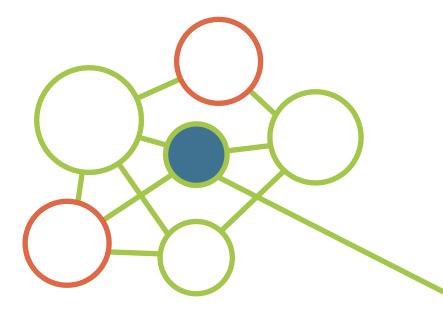
The dementia-friendly community symbol is the universal symbol for dementia and is available at no cost at www.purpleangel.org.uk/downloads.htm.

A protocol used by the Middleton, Wisconsin and other dementia -friendly communities that are sponsored by the Alzheimer's & Dementia Alliance includes the following requirements before a business can receive the purple angel status.

- At least 50 percent of frontline staff participates in training.
- · Management is required to attend the training.
- · A team leader must be appointed as a liaison.
- The business is open to discussion regarding environmental changes to enhance safety.
- The business commits to share training with new hires and those who weren't able to attend the original training.
- The business agrees to an annual on-site follow-up visit.

The following Wisconsin dementia-friendly community initiatives have developed PowerPoint presentations for training dementia-friendly businesses and are willing to share with other communities.

- Waukesha County Aging and Disability Resource Center dementia care specialist at 262-548-7848
- Greater Wisconsin Alzheimer's Association at www.alz.org/gwwi
- Alzheimer's & Dementia Alliance of Wisconsin at www.alzwisc.org





Easy-to-Navigate Environments

The way individuals live in communities today directly relates to their chances of developing chronic diseases later in life. People's health, well-being and resilience are affected by the quality of their community environment. Individuals with Alzheimer's and other dementias benefit from environments that are easy to navigate when they are in the community engaging in daily activities.

Terms that are associated with communities that are safer and more engaging include livability, age-friendly and dementia-friendly. What these terms have in common is that they enhance the participation of residents with varying needs and capacities to remain healthy, active and engaged in their community, thus improving the quality of their life.

A business that knows an individual with dementia who is a customer or client should consider asking them what their experience has been dealing with their business. Individuals will often tell you directly if there are difficulties in navigating in the business environment.

It doesn't matter where they live — in a big city, a suburb or a rural town, the vast majority of older adults want to remain in their homes for as long as possible. — AARP

LIVABILITY

Livability is a term used to describe a community's quality of life for all individuals, including built and natural environments, economic prosperity, social stability and equity, educational opportunity and cultural, entertainment and recreation possibilities. Livable communities generally have walkable neighborhoods, public transportation options, affordable housing, safe streets, easy access to shopping, green spaces and indoor and outdoor places for people to gather and stay connected.

Healthy aging is most likely to be achieved in safe physical environments and communities that support adopting attitudes and behaviors known to promote the health and well-being of the community.

- The National Association of Chronic Disease Directors

AGE-FRIENDLY COMMUNITIES

In an age-friendly community, policies, services and structures are set up to assist senior citizens to live safely, enjoy good health and stay involved. Age-friendly indicates that a community includes special elements that are conducive to older adults.

The World Health Organization's Global age-friendly checklist provided by AARP is an effective checklist to assess a community's strengths and deficiencies for older adults. This checklist includes eight domains: outdoor spaces and buildings, transportation, housing, social participation, respect and social inclusion, civic participation and employment, communication and information and community and health services.

Additional information can be found at the AARP website.

 www.aarp.org/agefriendly
 (AARP Network of Age-Friendly Communities and the Checklist of Essential Features of Age-Friendly Cities)

DEMENTIA-FRIENDLY ENVIRONMENTS

Dementia-friendly environments enable individuals with dementia to engage in daily activities within their communities, such as shopping, trips to the library, dining out, attending church, going to movies, attending sporting events or concerts, and taking walks. An ideal community includes features designed for individuals with dementia so their use is obvious, unambiguous and includes attention to signage, lighting, flooring, seating and navigation.

Signage provides clues to help individuals with dementia understand where they are, what is expected of them in a particular space and the direction they need to proceed.

Signs should:

- Be clear in bold typeface with good color contrast between text and background.
- Have contrast between the sign and the surface it is mounted on.
- · Be fixed to the doors they refer to, not on adjacent surfaces.
- Be at eye level and well lit.
- Avoid the use of highly stylized or abstract images or icons as representations.
- Be placed at key decision points for someone who is trying to navigate premises for the first time.
- Indicate the locations of bathrooms and exits.
- Ensure that glass doors are clearly marked.

Lighting for entrances should be well lit and make as much use of natural light as possible. Pools of bright light and deep shadows should be avoided.

Flooring should avoid highly reflective and slippery floor surfaces, and all changes in floor finish should be flush.

Seating should be provided in larger premises, especially in areas where individuals are waiting. Individuals with dementia prefer seating that looks like seating, for example, a wooden bench rather than an abstract metal Z-shaped bench.

NAVIGATION

Research shows that individuals with dementia use landmarks to navigate, at both inside and outside locations. The more attractive and interesting the landmark, the easier it is for an individual with dementia to use it.

Additional information can be found at: http://innovationsindementia.org.uk (Developing Dementia-Friendly Communities)

Alzheimer's & Dementia Alliance of Wisconsin



The Alzheimer's & Dementia Alliance of Wisconsin (ADAW) started a pilot program in Middleton, Wisconsin with the goal of helping communities become dementia-friendly throughout Dane County and South Central Wisconsin. They gathered a group of citizens, business members and city staff to meet monthly to plan the best approach.

Business trainings and flip charts developed by ADAW are now used to offer "train the trainer" sessions for volunteers. ADAW created information that managers can use to train new hires. Procedures were put in place to establish criteria and to review businesses annually. Informational cards were created to engage new businesses with Quick Reference guides to help employees better understand concepts.

The group is working to create a memory trail on yet to be developed public lands. All city management departments are involved, including first responders. Specific training was created. ADAW is now working with other communities to support them as they become dementia-friendly.

Components utilized by ADAW to build dementia-friendly communities include:

Business trainings

First responders

Business trainings
Flip charts
Flip charts
Park/memory trail
Informational meetings
Business promotions
Evaluation criteria
Quick reference guides
Annual review

ADAW is currently supporting more dementia-friendly community Initiatives in Dane County. For more information: Alzheimer's & Dementia Alliance of Wisconsin: www.alzwisc.org • 608-232-3400 or 888-308-6251



Specific Strategies for Community Members

A dementia-friendly community initiative is an opportunity for people in all walks of life to learn about dementia and share their experiences of living with or caring for someone with dementia.

This section contains special challenges and specific strategies for community members to support a dementia-friendly community initiative in the following sectors: business, community organizations, health care and public services. This is not an all-inclusive list, but a collection of recommendations for the places and people that most commonly interact with individuals with dementia and/or play an important role in supporting these efforts in the community.

The suggestions described here are derived from best practices in effective communication with individuals with dementia and from consultation with a representative from each setting. Some areas include a description of what the special challenges may be in a particular setting, along with suggestions on how to address those challenges.

Business Sector

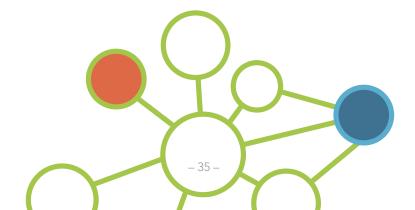
LOCAL CHAMBER OF COMMERCE

A chamber of commerce can provide leadership in a dementia-friendly community initiative by encouraging its business members to participate in training staff on how to best serve an individual with dementia as their customer. Providing opportunities for discussion at chamber meetings and providing meeting space or materials for the initiative can greatly enhance the reach and effectiveness of a dementia-friendly community effort.

GENERAL BUSINESS SETTING

dementia make it difficult for individuals to carry out daily activities such as shopping, banking and moving throughout the community. Misunderstanding prices and sales, forgetting to pay prior to leaving the store, difficulty with debit or credit cards and being unable to find the desired item or even come up with the name of the item are common problems that can result from dementia.

WHAT TO DO If an individual with dementia is having difficulty in a store or other business, having trained employees can greatly assist the situation. If an individual appears confused or is having trouble, employees can approach them and ask if they need any assistance. Speaking clearly and slowly and giving enough time for the customer to respond, helping them to find items, and helping them to complete their tasks one at a time are all very helpful approaches. Other strategies include providing easy-to-follow maps at key locations in the store, ensuring signage that is easy to see and unambiguous, and minimizing the number of questions asked at checkout. The Building Dementia-Friendly Communities Tool Kit has examples of training for businesses on how to provide dementia-friendly customer service.



BANKS AND CREDIT UNIONS

role in assisting customers with dementia. Individuals with dementia are more vulnerable to scams and other types of financial exploitation. Financial abuse can come from

family members or others close to the person, as well as typical online or telephone-based scams.

WHAT TO DO Being aware of a customer's spending habits can be very helpful in protecting the individual with dementia. Signs to look for can include frequent overdrafts, bounced checks, atypical mathematical errors, sudden changes in spending that are either significantly higher or lower each month and large sums of money being withdrawn or transferred to another person.

It is helpful to develop protocols for employees to handle situations that may arise regarding concerns about a customer who may no longer be able to manage their finances or may be the victim of financial abuse. The protocol may include speaking with the individual directly to determine an explanation for the behavior or to contact the local adult protective services agency to report a concern of financial abuse. Adult protective services agencies have the authority to investigate allegations of abuse, including financial abuse, and will look into possible abuse even when the amount of money involved may not rise to the level that law enforcement would investigate.

Bank and credit union staff can also attend county interdisciplinary team (I-Team) meetings, which are typically convened by adult protective services staff and include law enforcement, crisis workers and others. These meetings provide an opportunity for discussion of concerns and for various county services and stakeholders to assess how local systems could work more effectively to address community needs.

GROCERY STORES

individuals with dementia because shopping for groceries is a complex task that requires memory for what is needed, what each item is called and where it is located in the store. Self-service can

be overwhelming as bulk food items must be labeled with the proper code and/or weighed and packaged prior to checkout. Having to recall special customer numbers or other discount code information can also cause anxiety at the checkout. It can be difficult for individuals with dementia to follow sets of instructions or directions containing multiple steps. Using debit or credit cards to pay often requires answering five or more questions on the payment keypad, which can be overwhelming and frustrating for someone with dementia.

WHAT TO DO The Middleton, Wisconsin dementia-friendly initiative promotes the concept of a relaxed lane for checkout. This lane is designated as one that provides additional time and assistance to customers. Other ways to assist individuals with dementia at grocery stores include the following:

- Clear signage with basic black letters on a light background in large font at the end of each aisle.
- · Limiting how often items change locations in the store.
- Providing staff to assist and accompany customers to complete their tasks.
- Offering an order and delivery component.

RESTAURANTS

for many people. Difficulty with memory can make ordering food, casual social conversation and finding and returning from the restroom challenging. Restroom signs in different themes, such as roosters and hens rather than men and women, can be confusing. The size and scope of the menu can be overwhelming, and individuals with dementia may forget what they have ordered. Difficulty in ordering and repeating questions and requests of wait staff can be frustrating for both staff and customers.

WHAT TO DO Training staff to provide dementia-friendly customer service and to understand the challenges facing individuals with dementia will help alleviate many issues. Wait staff can assist individuals with dementia by asking questions about the kinds of food they like to narrow possible options in ordering. Directional signage for the restrooms should be clearly placed in key visual areas and be easily understood. Restroom doors need to be clearly labeled with a sign placed directly on the door.

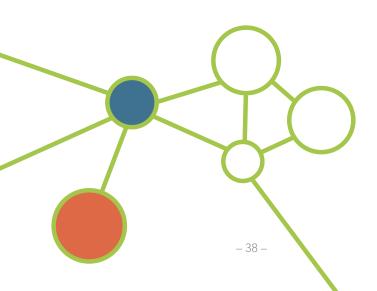
Community Organizations Sector

COMMUNITY, CIVIC AND OTHER ORGANIZATIONS

Any community-based organization can become involved with a dementia-friendly community initiative. The Jaycees, Lions, Kiwanis, Elks, Rotary, YMCA, parent-teacher organizations, United Way chapters, AARP chapters and neighborhood associations are all examples of groups that would add value to any initiative. These organizations can assist with recruiting volunteers to assist the initiative, providing space for meetings, filling leadership roles for committees and volunteering to help individuals with dementia.

Community organizations may be able to provide a structure for fundraising, offer channels for communication and marketing to the community and donate materials and resources, such as binders for training.

They may also experience benefits from involvement in the dementia-friendly community effort through promotion of their agency as a supportive member. Dementia-friendly community efforts should include education and training for community organizations.



FAITH COMMUNITIES

for the individual with dementia and their caregiver. Individuals may have difficulty finding selected pieces within larger books, such as hymns or scriptures, reading the signs that contain the references to each piece, and following the service, even if it has been a familiar service. A trip to the restroom may also be difficult for individuals with dementia as they may be searching for the correct door to use or have trouble finding the way back to their seats.

Individuals with dementia may say and do things that are not appropriate during a service, such as talking loudly during times of quiet and disturbing others around them. This behavior can be embarrassing for the family member who accompanies them and may prompt the family member to stop attending services. Finding transportation to a service may be an obstacle for those individuals who no longer drive, which may lead to isolation and a loss of connection with their faith community.

WHAT TO DO Dementia-friendly faith communities can improve the quality of life for those with dementia. Recognizing when someone stops attending services and asking why is the first step to helping individuals with dementia maintain a connection to their faith. Activities can include educating members about dementia, carrying out a review of changes that can be made in buildings, and holding a Dementia Day service of worship focused around those with dementia and their caregivers. When members of faith communities are educated on dementia, behaviors of individuals with dementia can be better accepted, and less stigmatization can result for the individual and his/her family.

A dementia-friendly worship is one that is inclusive and engaging for the individual with dementia. The service is short and simple and has a structure with a clear beginning and end. It is helpful if written materials, such as weekly bulletins, are in large print with black letters on white paper and are not overwhelming in content. Signs should be large enough to be easily seen with large black letters on a white background.

Volunteers can assist as buddies in the pew for members who may have difficulty in following the service or finding the proper passages in books. If someone is struggling, simply sitting near them and offering to let them follow along can be very helpful. The buddy can assist with finding and returning from the restroom. To address transportation issues for individuals with dementia, faith communities can identify volunteers who are willing to provide rides to services, or if a community owns a van or bus, it could be used for rides as well.

Restrooms that are close by and indicated by obvious signs can alleviate difficulty for individuals with dementia. If someone is unable to sit quietly, access to outside or garden space can be used to go for a walk or to converse. Aisles and walkways should be well lit and devoid of small rugs or complex patterns, as these may be perceived as holes or other obstacles by an individual with dementia.

Faith communities can play an important role in bringing joy to the lives of their members with dementia through engagement in music and art. A special chorus consisting of individuals with dementia and their caregivers or friends can be a way to allow these members to actively participate in services. The following link provides an example of a special chorus with individuals with dementia and their caregivers:

http://aging.med.nyu.edu/research/chorus.

Starting a memory café is another way to provide opportunities for joy. Memory cafés can take place in any comfortable setting where people can gather to have fun. They can include food and drink as well as someone knowledgeable about dementia to provide assistance and answer questions. A memory café is not a support group or educational program, but a safe place where individuals with dementia and their caregivers can go to engage socially without fear of embarrassment. Memory cafés can include music, art, games or anything of interest to the attendees.

Additional information and tips for faith communities are available on the following website: www.dementiafriendlychurches.com.

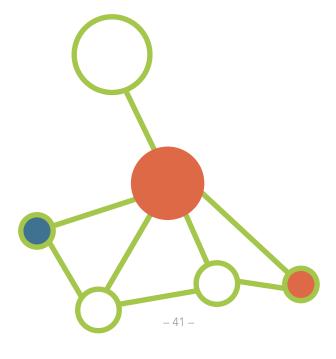
SPORTS AND RECREATIONAL PROGRAMS

Staying active and socially engaged is very important for individuals with dementia to maintain their abilities as long as possible. Aerobic exercise increases blood

flow to the brain and has been shown to increase the size of the part of the brain responsible for memory. Engaging in conversation and other recreational activities helps individuals with dementia to avoid isolation. Sports leagues, fitness centers, bowling alleys, as well as card clubs, bird watching clubs, book clubs, knitting clubs and other recreational groups can support members within a dementia-friendly community.

Creating league play that is less competitive and more supportive can help individuals with dementia continue to play the game they love while getting exercise and staying socially connected. At golf courses, tennis clubs and other venues, providing a partner who is willing to

provide support and encouragement to an individual with dementia will help that individual enjoy continued participation. This partner can help the individual with dementia navigate a course, keep track of the score and assist in other parts of the game where short-term memory may fail them.



Health Care Sector

HOSPITALS

places for individuals with dementia. Bright lights, noise and many people talking at once can be overwhelming. When individuals with dementia become overwhelmed, it can be very difficult to understand and follow directions. They may become upset and may not cooperate with medical personnel.

Memory loss may cause individuals with dementia to wander and not stay in their hospital beds. They may not remember why they are in the hospital and may try to leave. Infections and untreated pain may be difficult to assess in individuals with dementia as they may cause delirium, agitation and a refusal to cooperate. However, these conditions must be assessed to determine appropriate treatment.



WHAT TO DO When working with someone with dementia, hospitals can calm their environments by eliminating unnecessary noise, conversation, flashing lights or buzzers and unnecessary personnel. Moving to a quiet location and, if possible, including a family member or other familiar person in the assessment process can help. When the person with dementia does not remember, someone who is living with the individual with dementia can be a critical source of information to provide answers to questions about the condition and circumstances that led to the hospital visit. They can also help the individual remain calm and help in understanding what is happening. When individuals with dementia refuse needed tests and other diagnostic procedures, be aware of the many options available for obtaining samples and gathering the information needed to make a diagnostic determination.

Wandering is one of the most common symptoms for individuals with dementia. When someone with dementia is admitted to the hospital, they will likely be bored and not stay in bed, and may wander. Depending on their condition, allowing individuals with dementia to go for walks will help alleviate many potential challenges in providing care. Engaging family, friends or volunteers to stay with the person can be very helpful.

PRIMARY CARE CLINICS

Patients may be reluctant to discuss their concerns about memory loss or other cognitive issues due to the stigma and fear of dementia. If someone has a dementia, it will complicate all other aspects of their care and inhibit the person's ability to follow through with treatment plans, properly take medications, manage chronic conditions and even recognize the need to seek medical treatment.

WHAT TO DO Making the diagnosis of dementia as early in the disease process as possible is critical. The goal of a dementia-friendly community is to assure that individuals who receive a diagnosis of dementia can continue to enjoy life. Primary care providers should encourage connections with community resources and programs so individuals can stay physically and socially active. To support the individual with dementia, providers should be aware of his/her limited ability to follow instructions and provide or connect him/her with additional support through family members or other professionals who can continue to provide support in the home.

PHARMACISTS

memory and ability to follow instructions independently and, as a result, create difficulty in taking medications as directed. Many older adults see more than one physician who prescribes medications, which can result in medication interactions and unintended side effects. Having diabetes also increases an individual's risk of developing dementia.

WHAT TO DO Pharmacists have a unique opportunity to observe changes in someone who may have an unrecognized dementia. Possible signs of dementia include not properly managing chronic conditions such as diabetes, erratic compliance in taking medications, repeated contacts to the pharmacy for the same issue and failure to pick up important prescriptions in a timely manner. Contacting the local adult protective services staff can serve as a means to alert others in a position to help the individual with dementia.

PHYSICAL THERAPY, OCCUPATIONAL THERAPY AND HOME HEALTH

special challenges Memory loss can make it difficult to remember appointments. Individuals with dementia may not come to therapy appointments or be home for home health visits. Dementia makes it difficult to independently follow an exercise or other therapy plan and to arrive at goals within a specific time frame. Appointments in the home of an individual

with dementia can provide insight into other challenges the person may be facing and may make it easier to identify what to do with concerns outside of home health or therapy.

WHAT TO DO Calling ahead to remind an individual with dementia of appointments only works if it happens very close to the time of the appointment. A call the day before or even several hours earlier may be forgotten. Therapists and home health staff should (I) be aware of whether the individual with dementia has a caregiver, (2) ascertain if the caregiver lives with the individual or provides transportation, and (3) if necessary, obtain the proper permission to communicate with the caregiver directly about appointments and care plans. If an individual is having difficulty following an exercise plan or other instructions, the therapist or staff should suggest a recorded video to follow or provide a written guide with the exercises and instructions that can be shared with the caregiver or family members. For individuals with dementia, it is important to keep the exercise program and instructions short and simple. Occasional follow-up telephone calls can be

helpful to check in regarding any questions or concerns and as a reminder to individuals to view the video or written instructions.

When in the home of an individual with dementia, the therapist or home health staff should contact the local adult protective services unit to share any concerns regarding abuse. If other unmet needs or special challenges are observed, ask if the individual with dementia or their caregiver shares the concern and provide a referral to the aging and disability resource center in the county to provide information and assistance.

DENTISTS

maintaining good oral health due to changes with their cognitive status and functional ability. Older adults have additional oral health challenges that put them at higher risk for dental conditions, such as dry mouth making a person more susceptible for dental caries/cavities, poor nutritional intake that lessen a person's ability to fight infection and bone loss, and gingival tissue/gum infection from periodontal disease. Cognitive issues can make it difficult for the individual to remember the tasks needed to accomplish oral health care tasks. Decreased dexterity from conditions like arthritis may require adaptive aids to facilitate the ability to perform oral health care tasks. People in more advanced stages of disease may not be able to communicate their needs and are at higher risk of experiencing pain and oral disease.

WHAT TO DO Caregivers who have firsthand knowledge on the preferences and personality of the individual with dementia can provide vital information to the oral health care provider on strategies for a successful dental care experience. Every individual with dementia should be screened daily or weekly for oral health changes with plans provided to address these changes. When the individual with dementia seeks dental care in an unfamiliar setting, the oral health care provider should allow a family member or friend to sit by the person to maintain eye contact or hold his/her hand as a calming influence. As long periods sitting in a dental chair may be more difficult for individuals with dementia, limiting the time length of appointments is helpful.

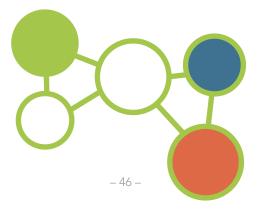
Creating a calm environment where noise and other stimulation are kept to a minimum will help an individual with dementia remain calm and cooperative. Practicing good chairside manner and always alerting the individual to what is about to happen will help to maintain his/her cooperation. It is very important for the individual with dementia, the caregiver and the oral health care provider to work together. When performing dental procedures on an individual with dementia, all caregivers and oral health care providers should remember to explain the experience to the individual, let the family be involved and allow the individual to set the pace.

RESIDENTIAL CARE PROVIDERS

Residential care facilities support dementia-friendly community efforts in several ways. As members of the community with special knowledge of dementia, they can provide training to increase awareness and understanding of dementia as well as the needs of individuals with dementia. As business owners, they can reach out to other businesses to engage them in the initiative, offer meeting spaces and other materials and initiate dementia-friendly community efforts.

DEMENTIA AGENCIES AND PROGRAMS

The Alzheimer's Association and the Alzheimer's & Dementia Alliance of Wisconsin are leaders in the development of dementia-friendly communities and are critical to the success of any initiative. These organizations have experts in the field of dementia care with a wide variety of information and educational materials and programs to support families and caregivers of individuals with dementia. Inviting these entities to participate in local dementia-friendly community efforts is an important component of any effort. They can provide leadership, meeting space and informational presentations to a variety of audiences.



Public Services Sector

COUNTY AGENCIES

Office on Aging/Aging and Disability Resource Centers (ADRC)

Offices on Aging and ADRCs have a substantial role to play in the development of dementia-friendly communities. They can partner with local public health departments to support dementia-friendly community development. A dementia-capable Office on Aging or ADRC has staff who are knowledgeable about dementia, offers cognitive screens and family caregiver supports and has information about all resources and programs available in the community for individuals with dementia and their families.

Offices on Aging and ADRCs can provide (I) meeting space and leadership, (2) support for coalition

building with dementia service agencies, other local agencies, businesses and citizens and (3) important health promotion and falls prevention programs to the community. ADRCs with dementia care specialists act as catalysts in sparking interest and support for the development of dementia-friendly communities.



ADULT PROTECTIVE SERVICES (APS)

Adult protective services programs play a critical role in the community in helping both individuals with dementia and their caregivers. Often, APS workers become involved in cases with individuals with dementia after they have experienced a crisis. Other times, they may receive calls from concerned family or

friends about someone they feel is at risk of harm. In many APS cases, law enforcement, care facilities, hospitals and county crisis staff have been involved with the individual in question. Creating partnerships with these entities can help everyone understand and address concerns with how these services interact and, more importantly, how this interaction affects individuals with dementia and their families.

APS programs become dementia capable through educational programming for staff, assessing the outcomes for individuals with dementia and working to improve outcomes as needed. Development of policies and procedures that are dementia specific and ensuring that staff know when and how to use those policies will improve dementia capability.

COUNTY CRISIS RESPONSE

County crisis units respond to the immediate needs of anyone in their county at imminent risk of harm. There are a wide variety of situations where crisis workers must be able to navigate, from abuse to mental health issues to dementia. Understanding the special needs of individuals with dementia will improve the effectiveness of a crisis response program and will help identify the appropriate root cause of the crisis.

There are several things county crisis units can do to become dementia capable. The first is to ensure that all staff complete the required training that satisfies Chapter DHS 34,

Wisconsin Administrative Code, requirements with an emphasis on dementia. Another way is to access regular and ongoing clinical supervision with a psychologist who can review medications and provide immediate feedback to the crisis team when working with someone they suspect has dementia. Regular attendance at the crisis network and regional crisis meetings where dementia issues are discussed can increase knowledge and lessons learned from others in the field.

It is important for crisis programs to connect with the other agencies serving individuals with dementia in the community. Regular participation in the county I-Team improves dementia capability, as this venue allows for different agencies to discuss issues and cases in common. These meetings typically include the aging and disability resource center and aging office, adult protective services, law enforcement, hospitals and other care facilities, the county attorney and other community agencies or businesses involved in supporting people in crisis or at increased risk for crisis. Developing referral and communication protocols with dementia services organizations is helpful, as they are familiar with the unique characteristics and needs of the dementia population.

SENIOR NUTRITION PROGRAMS

Most communities have senior nutrition programs that consist of Meals on Wheels programs to the homebound and locations in the community where meals are served to older adults on a donation basis. These programs provide a friendly face for the homebound or a chance to socialize and meet other people in the community.

Volunteers with Meals on Wheels programs have the opportunity to ensure individuals who receive meals are safe and provide a connection to help if needed. A training resource for Meals on Wheels volunteer drivers that provides tips and how to help is available on: http://gwaar.org/for-professionals/transportation3/10-articles/aging-programs-and-services/219-for-home-delivered-meal-drivers.html. Staff at senior dining centers should have an understanding of dementia and how to support the individual with dementia and his/her caregiver.

Dining centers are natural places to hold a memory café. Memory cafés are places in the community where individuals with dementia and their families and friends can gather for conversation and fun activities in a nonjudgmental social atmosphere. At the café, information and resources are available on dementia, with the focus being purely social and fun.

LAW ENFORCEMENT/FIRST RESPONDERS

Individuals with dementia can easily become lost and unable to remember how to get home on foot, using public transportation or driving in a car. When someone with dementia is lost, they may be anxious, afraid, agitated and aggressive toward anyone unfamiliar who approaches them. Individuals with dementia may leave a place of business and forget to pay for their purchases. Store security or employees may detain them or call law enforcement to report a theft. When arriving at the scene, it may be difficult to determine whether someone may have a dementia or other condition, making it difficult to determine the best response.

WHAT TO DO Law enforcement officers and other first responders should be encouraged to receive dementia-specific training. There are many opportunities for training from local dementia agencies and online programs and through law enforcement associations. To prevent recurring incidents, communities should promote the existence of Silver Alert and connect with the aging and disability resource center, adult protective services agency and county crisis response agency to determine a follow-up protocol once an individual has been located and returned home.

Programs such as Project Lifesaver and Project Safe Return can be housed in the sheriff's office or local police department. These programs offer a means for faster recovery of someone with dementia who has been reported missing. A transmitter is provided for the person to wear that can be traced and located by mobile equipment housed with law enforcement.

Law enforcement can create a voluntary registry for individuals with dementia. The registry provides the name, home address and contact information for family members should the individual with dementia become involved with law enforcement.

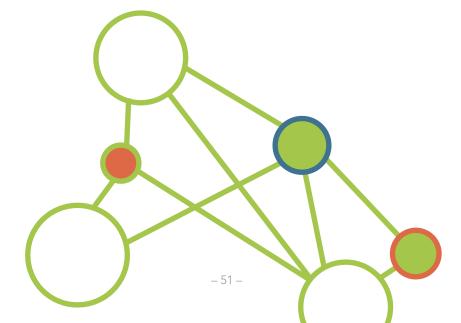
File of Life is a program that places a packet of information intended for use by first responders and other emergency personnel inside or outside the door of a residence or prominently displayed on the refrigerator. This file contains information critical to crisis response, including emergency contacts and important medical information. Individuals can also contact their 9II center and have information added to their residential file indicating to first responders that there is someone living at that residence with dementia or memory loss.

Additional information is available on the following websites:

- Law Enforcement Training from the Alzheimer's Association www.alz.org/care/alzheimers-dementia-safety.asp
- Project Lifesaver Home Page www.projectlifesaver.org
- Safe Return Program www.alz.org/care/dementia-medic-alert-safe-return.asp
- File of Life www.folife.org/about.htm

COMMUNITY ENVIRONMENTS

Individuals with dementia may suddenly feel lost when traveling to a familiar place whether on foot or by car. Signs can be difficult to understand, especially if they are highly stylized or designed to match the surrounding environment. Complex and non-standard intersections and one-way streets can be especially challenging.



CITY PLANNER/ARCHITECT

WHAT TO DO When looking to create something new or renovate an existing structure, it is important to keep age-friendly and dementia-friendly design in mind. A dementia-friendly community includes places and buildings that are established with obvious functions, changes that are small in scale and incremental, and designs for architectural features and street furniture that are familiar or easily understood by older adults. The environment also includes latent cues positioned where visual access ends, especially at decision points, such as junctions and turnings with entrances to places and buildings that are clearly visible and obvious. Dementia-friendly community design ensures that urban and building form is varied; there is a variety of landmarks, including historic and civic buildings,

and there are distinctive structures and places of activity. In these communities, there is a variety of welcoming open spaces, including squares, parks and playgrounds, architectural features in a variety of styles, colors and materials, and a variety of aesthetic and practical features, such as trees and street furniture.

PUBLIC SIGNAGE

WHAT TO DO Being able to navigate in public areas can be difficult for individuals with dementia. In a dementia-friendly environment, signage is minimal, giving simple, essential information at decision points with large graphics and realistic symbols in clear color contrast to the background,

preferably dark lettering on a light background. It is helpful if directional signs are on single pointers, signs locating important places and buildings are perpendicular to the wall, and signs have non-glare lighting and non-reflective coverings.

STREETS AND SIDEWALKS

WHAT TO DO Becoming lost in familiar surroundings is a common symptom of Alzheimer's disease and dementia. Street and sidewalk design that is dementia-friendly can help reduce confusion about current location and the route toward an individual's destination. In a dementia-friendly community, there is a hierarchy of street types, such as main streets, side streets, alleyways and passages. Blocks are small and laid out on an irregular grid based on an adapted perimeter block pattern that has buildings on all sides surrounding an open central area with short and fairly narrow streets. In dementia-friendly design, streets are well connected and gently winding with open-ended bends to enable visual continuity. Forked and T-junctions are more common than crossroads.

Additional information is available on the following websites:

- Neighborhoods for Life www.housinglin.org.uk/_library/Resources/Housing/ Support_materials/Other_reports_and_guidance/ Neighbourhoods_for_Life_Findings_Leaflet.pdf
- Age-Friendly Cities
 www.who.int/ageing/publications/Age_friendly_cities_
 checklist.pdf
- Global Age-friendly Cities: A Guide http://apps.who.int/iris/bitstream/10665/43755/1 /9789241547307_eng.pdf

MAYOR

The mayor of a city, town or other community is an important leader to include in dementia-friendly community initiatives. His/her support increases the opportunities for local public services to become dementia-friendly. These services include parks, public transit, libraries, senior centers, museums, community gardens and public events. The mayor can also assist in publicizing the initiative and creating awareness in the community.

PARKS

Including circular walking paths clearly marked with easy-to-understand directional signs can be a first step toward creating a dementia-friendly park. Providing maps in multiple places, ensuring walking paths are smooth and free from obstacles and providing multiple places to sit are other ways to incorporate dementia-friendly concepts. Shelters, restrooms and sports fields should be clearly delineated and marked with signs to be easily recognized and located. When developing programming for the park, include multi-generational events that engage individuals of all ages.

PUBLIC TRANSPORTATION

Public transportation is critical for adults who do not drive to carry out the necessary tasks of day-to-day living. For individuals with dementia, navigating public transportation can be very challenging. Operators and drivers need to be aware of the special challenges faced by individuals with dementia, as well as how to recognize the signs that someone may need help. A small amount of assistance can be the difference between someone getting lost or arriving safely at their destination. Individuals with dementia may need assistance in determining if they are on the correct route for their trip. Individuals with memory loss may forget their destination or the purpose of their trip and may need assistance.

LIBRARIES

Libraries are part of the heart of many communities and can provide support for dementia-friendly community initiatives. Libraries offer meeting spaces, a venue for public education and channels of communication with the larger community. They are locations for holding public awareness events, memory cafés and other events specifically for individuals with dementia and their caregivers and can help in the recruitment of volunteers and interested parties to join the initiative.

SENIOR CENTERS

Senior centers are places that provide communities with information and activities geared toward older adults. They are a natural partner in the development of dementia-friendly communities and can provide meeting space and materials, committee leadership and opportunities to share information on the initiative.

MUSEUMS

Special programs have been created to assist museums in the development of dementia-friendly programming for visitors. These programs provide an opportunity for arts appreciation and socialization for people with dementia who may not otherwise attend the museum.

Additional information on how a museum can develop a dementia-friendly program is available on the following websites:

- www.moma.org/meetme
- www.alz.org/sewi/in_my_ community_19695.asp
- www.mpm.edu/plan-visit/calendar /spark-programs

COMMUNITY GARDENS

A community garden can be dementia-friendly by ensuring the garden is physically accessible and has opportunities for individuals with dementia to contribute to the garden. Individuals with dementia are capable of doing many garden tasks and may bring experience and insight. Holding dementia-friendly community events

can showcase the benefits of a community garden.

SCHOOLS AND HIGHER EDUCATION

Providing dementia education in middle and high school health classes can help children understand how to have a meaningful and loving relationship with a family member who has dementia and can improve the quality of life for both the child and the individual with dementia. A curriculum on dementia will be available from the Wisconsin Department of Public Instruction for use in middle and high school health classes beginning in fall of 2015. Encouraging students to participate in dementia-friendly community

initiatives can provide required service hours, offers the opportunity to learn more about dementia and makes a connection with the older generation.