Dementia trainings targeting Primary Care Physicians and allied health professionals are being offered in 2016-2018, sponsored by the partnership of two grants: 1) from the Administration for Community Living (ACL) awarded to University of Hawaii Center on Aging – the Hawaii Alzheimer’s Disease Initiative, and 2) from Health Resources and Services Administration (HRSA) awarded to the John A Burns School of Medicine (JABSOM) Department of Geriatric Medicine and Pacific Islands Geriatric Education Center (PIGEC) Geriatrics Workforce Enhancement Program.

The following curriculum modules are available for CME Grand Rounds, health and aging conferences, and other venues targeting healthcare professionals, particularly in primary care.

Another aspect of the two grant objectives is to build a better connection between the clinical and aging network services and resources in the community. Because of this, a strong component of the trainings will be to provide recommended resources to improve the lives of patients with memory loss and their caregivers and to optimize care for this population.

Target trainees are 1) primary care physicians 2) primary care allied health professionals 3) other healthcare professionals. CMEs would be provided through the requesting and partnering venues and organizations.

To schedule or for questions, please contact Jody Mishan, Hawaii Alzheimer’s Disease Initiative, UH Center on Aging at (808) 295-2624 or jmishan@hawaii.rr.com

<table>
<thead>
<tr>
<th>Module Topics</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Module 1</strong> EARLY DETECTION OF DEMENTIA</td>
<td>Kamal Masaki, MD, Chair JABSOM Dept. of Geriatrics, Co-Principal Investigator, Pacific Islands Geriatric Education Center</td>
</tr>
<tr>
<td><strong>Module 2</strong> BRAIN HEALTH AND RISK FACTORS FOR DEMENTIA</td>
<td>Kamal Masaki, MD, Chair JABSOM Dept. of Geriatrics, Co-Principal Investigator, Pacific Islands Geriatric Education Center</td>
</tr>
<tr>
<td><strong>Module 3</strong> NON-PHARMACOLOGICAL STRATEGIES FOR ADDRESSING BEHAVIOR AND PSYCHOLOGICAL SYMPTOMS OF DEMENTIA</td>
<td>Aida Wen, MD, Director, Pacific Islands Geriatric Education Center</td>
</tr>
<tr>
<td><strong>Module 4</strong> PHARMACOLOGICAL MANAGEMENT OF DEMENTIA-RELATED BEHAVIORS: WHEN AND HOW</td>
<td>Brett Lu, MD, Associate Professor, Dept. of Psychiatry, JABSOM</td>
</tr>
<tr>
<td><strong>Module 5</strong> CLINICAL PROVIDER PRACTICE TOOLS: BEST PRACTICES FOR OPTIMIZING DEMENTIA CARE</td>
<td>Ritabelle Fernandes, MD, Associate Professor Dept. of Geriatric Medicine, JABSOM</td>
</tr>
<tr>
<td><strong>Module 6</strong> PALLIATIVE CARE FOR PERSONS WITH ADVANCED DEMENTIA</td>
<td>Laurel Coleman, MD, Geriatric Physician, Kauai Medical Clinic and Medical Director, Supportive Care, HMSA</td>
</tr>
<tr>
<td><strong>Module 7</strong> GERIATRIC DEPRESSION AND DEMENTIA</td>
<td>Aida Wen, MD, Director, Pacific Islands Geriatric Education Center, JABSOM Dept. of Geriatric Medicine</td>
</tr>
<tr>
<td><strong>Module 8</strong> DELIRIUM PREVENTION, DIAGNOSIS AND MANAGEMENT</td>
<td>Cody Takenaka, MD, Assistant Professor, Dept. of Geriatric Medicine, UH-JABSOM; Associate Program Director, Geriatric Medicine Fellowship Program</td>
</tr>
</tbody>
</table>
Module 9
*available in early 2017*

**INTELLECTUAL & DEVELOPMENTAL DISABILITIES AND DEMENTIA**

Ritabelle Fernandes MD, Associate Professor, Department of Geriatric Medicine and Jeff Okamoto, MD, Medical Director, Developmental Disabilities Division

Module 10

**CARE COORDINATION TRAINING: BEST PRACTICES: SIMPLIFY AND OPTIMIZE DEMENTIA CARE**

Ritabelle Fernandes, MD, Associate Professor Dept. of Geriatric Medicine, JABSOM

**MODULE 1: Early Detection of Dementia**

Learning objectives: At the completion of this module the trainee will be able to:

1. Identify the clinical and scientific basis of Alzheimer’s disease and related dementias
2. Recognize the benefits and challenges of early detection of dementia
3. Recognize the early symptoms of dementia
4. Discuss possible causes and risk factors of dementia
5. Identify the diagnostic workup for dementia
6. Discuss currently available treatment options
7. Relate how the Alzheimer’s Association – Aloha Chapter can assist patients once a diagnosis is made

Core Content:
- Public health crisis of dementia
- Common myths about dementia
- Dementia basics: definition, history, changes in the brain, stages and symptoms
- Delirium vs. dementia
- Depression vs. dementia
- Mild cognitive impairment
- Causes of dementia
- Reversible causes of dementia
- Risk factors and protective factors
- Rationale for early detection and barriers to it
- Honolulu Asia Aging Study findings on dementia
- Neuropsychiatric and behavioral disturbances
- Dementia diagnosis, cognitive screening tools
- Medicare Annual Wellness visit and diagnostic work-up
- Treatment options and strategies
- Goals of care
- Alzheimer’s Association – Aloha Chapter resources

Teaching Methods:
- Didactic presentation with PowerPoint
- Large group discussion and questions and answers
- Case studies

Materials, Handouts and Teaching Resources:
- Curriculum PowerPoint slides, list of resources
Module 2: Brain Health and Risk Factors for Dementia

Learning objectives: At the completion of this module the trainee will be able to:

1. Identify factors associated with maintaining brain health
2. Learn about local research on brain health
3. Discuss possible causes and risk factors for dementia
4. Relate how the Alzheimer's Association – Aloha Chapter can assist patients once a diagnosis is made

Core Content:
- Factors associated with brain health, including physical, social and mental activity, dietary factors, cardiovascular risk factors
- Risk factors and protective factors for dementia
- Causes of dementia
- Reversible causes of dementia
- Honolulu Asia Aging Study findings on brain health and dementia
- Public health crisis of dementia
- Goals of care
- Alzheimer’s Association – Aloha Chapter resources

Teaching Methods:
- Didactic presentation with PowerPoint
- Large group discussion and questions and answers
- Case studies

Materials, Handouts and Teaching Resources:
- Curriculum PowerPoint slides, list of resources
- Brain health handout
- Mini-Cog printout
- Alzheimer’s Association & Dept. of Health and Human Resources materials

Time Period: 1 hour

Evaluation Method:
- Feedback trainee evaluation form
- CME evaluation form
Module 3: Non-pharmacological Strategies for Addressing Behavior and Psychological Symptoms of Dementia

Learning objectives: At the completion of this module the trainee will be able to:

1. Characterize and identify triggers for challenging behaviors
2. Develop a systematic approach to medical evaluation for behavioral changes
3. Provide counseling and resources to caregivers regarding changes in approach and environment, including evidence-based non-pharmacological interventions
4. Discuss evidence based non-pharmacologic interventions
5. Identify treatment targets and monitoring for antipsychotic dose reduction

Core content
- Identify common behavioral and psychological symptoms of dementia
- Characterizing and identification of triggers of Challenging Behaviors
- Recognition of Delirium
- Determining underlying etiology- physical, psychological, pharmacological, medical
- Basic approach to communication with persons with dementia
- Person-centered approach
- Environmental factors
- Selection of evidence based non-pharmacologic interventions
- Provide documentation that justifies the use of antipsychotics
- Identify treatment targets and monitoring for antipsychotic dose reduction
- Community resources for caregiver support

Teaching Methods:
- Didactic presentation with PowerPoint
- Large group discussion and questions and answers
- Case studies

Materials, Handouts and Teaching Resources:
- Curriculum PowerPoint slides, list of resources
- “Dementia – Caring for People with Challenging Behaviors: A Step-by-Step Evidence-Based Approach: (Mountain Pacific Quality Health)
- Alzheimer’s Association resource materials
- EOA public awareness materials on Memory Loss

Time Period: 1 hour

Evaluation Method:
- Feedback trainee evaluation forms (from GEC, EOA)
- CME evaluation form

Time Period: 1 hour

Evaluation Method:
Module 4: Pharmacological Management of Dementia-related Behaviors: When and How

Learning objectives: At the completion of this module the trainee will be able to:

1. Recognize specific symptoms in dementia appropriate for medication management
2. Cite examples of evidence-based pharmacological treatments of dementia-related behaviors
3. Develop a treatment algorithm based on benefit-to-risk ratios and involving surrogate consent

Core content
- Modifiable clusters of dementia-related neuropsychological symptoms
- Goals and limitations of managing difficult dementia-related behaviors using medications
- Review of current evidence-based medication options

Teaching Methods:
- Didactic presentation with PowerPoint
- Large group discussion and questions and answers
- Case studies

Materials, Handouts and Teaching Resources:
- Curriculum PowerPoint slides, list of resources
- “Dementia – Caring for People with Challenging Behaviors: A Step-by-Step Evidence-Based Approach: (Mountain Pacific Quality Health)
- Alzheimer’s Association resource materials
- EOA public awareness materials on Memory Loss

Time Period: 1 hour (40 min talk, 20 mins Q&A)

Evaluation Method:
- Feedback trainee evaluation form
- CME evaluation form

Module 5: Clinical Provider Practice Tools: Best Practices for Optimizing Dementia Care

Learning objectives: At the completion of this module the trainee will be able to:

1. Discuss rationale for timely detection of Alzheimer’s disease and related dementias
2. Review ACT on Alzheimer’s evidence and consensus based practice tools for providers and review adaption for Hawaii
3. Recognize key management priorities throughout the dementia continuum
4. Learn how to help patients and families access services to improve function and promote wellness

Core Content:
- Cognitive Impairment Identification
- Administration of Mini Cog, SLUMS, MoCA
• Administration of Family Questionnaire
• History and Physical Examination
• Diagnostic workup – labs and neuroimaging
• Role of neuropsychological testing
• Differential diagnosis of dementia
• Mild Cognitive Impairment
• Alzheimer’s Disease
• Dementia with Lewy Bodies
• Frontotemporal Dementia
• Vascular Dementia
• Follow up visits
• Dementia management
• Counseling, education, support & planning
• Safety
• Advance care planning
• Medications
• Cultural Resources
• National Resources
• Local Resources for persons with dementia
• Alzheimer’s Association – Aloha Chapter resources

Teaching Methods:
• Didactic presentation with PowerPoint
• Large group discussion and questions and answers
• Case studies

Materials, Handouts and Teaching Resources:
• Curriculum PowerPoint slides, list of resources
• Mini-Cog printout
• SLUMS printout
• Family Questionnaire printout
• Alzheimer’s Association resource materials
• HADI adapted Clinical Provider Practice Tool

Time Period: 1 hour (40 min talk, 20 mins Q&A)

Evaluation Method:
• Feedback trainee evaluation form
• CME evaluation form

Module 6: Palliative Care for Persons with Advanced Dementia

Learning Objectives: At the completion of this module the trainee will be able to:

1. Articulate the difference between usual care and palliative care.
2. Appreciate the reasons that “usual” care is a poor fit for persons with advanced dementia.
3. Understand the different trajectories of decline for persons with advancing dementia.
4. Explore goals of care preferences at various times in the course of dementia.
6. Understand why current medical system drives most people with dementia to a hospital setting when a change in condition occurs.

Core Content:
- Definition of Palliative Care
- Working definition of dementia
- Reasons dementia is a terminal illness
- Goals of care discussion prompts
- Appreciation of increasing caregiver burden (emotional and financial)
- Hospital processes are not designed for persons with dementia
- Pain assessment and management strategies
- Common problems of weight loss, dysphagia, fevers, falls
- System barriers to palliative care for persons with dementia

Teaching method:
- PowerPoint slides with lecture
- Questions entertained during and after lecture

Materials:
- Printed slides
- Copy of Susan Mitchell’s NEJM article on Advanced Dementia

Time period:
- 50 minute lecture with 10 minutes question period

Feedback:
- CME evaluation form
- Feedback trainee evaluation form

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**Module 7: Geriatric Depression and Dementia**

Learning objectives: At the completion of this module the trainee will be able to:

1. Recognize the challenges in the diagnosis of depression in the elderly.
2. Understand how dementia impacts the presentation and treatment of depression.
3. Develop comprehensive strategies for the treatment of depression in the elderly

Core content:
- Diagnostic Criteria for Major Depression
- Overlap symptoms of Depression, Dementia and Delirium
- Clinical Presentation of Depression in the Elderly
- Depressive symptoms confounded by dementia and medical illness
- Early vs. Late-Life Depression
- Screening strategies for different cognitive levels
- Course of Depression in dementia
- Behavioral and Psychological Symptoms of Dementia
- Pharmacologic Strategies for managing depression in the elderly
- Non-Pharmacologic Strategies for managing depression in the elderly
Module 8: Delirium Prevention, Diagnosis and Management

Learning objectives: At the completion of this module the trainee will be able to:

1. Identify risk factors for delirium
2. Implement strategies to prevent and mitigate delirium among hospitalized patients
3. Develop comprehensive strategies for the management of delirium in the elderly

Core content:
- Epidemiology and Consequences of Delirium
- Risk factor assessment
- Clinical Presentation of Delirium in the Elderly
- Interventions to prevent delirium
- Diagnostic Criteria for Delirium
- Treatment of Delirium by addressing underlying problems
- Pharmacologic management of delirium
- Non-Pharmacologic Strategies for managing delirium
- Evidence-based models of care within the hospital setting to prevent and mitigate delirium

Teaching Methods:
- PowerPoint slides with lecture
- Questions entertained during and after lecture

Materials, Handouts and Teaching Resources:
- Printed Slides

Time Period: 1 hour (40 min talk, 20 mins Q&A)

Evaluation Method:
Module 9: Intellectual & Developmental Disabilities and Dementia (available in early 2017)

Learning objectives: At the completion of this module the trainee will be able to:

1. Understand the role of National Task Group (NTG) on intellectual disabilities and dementia practices.
2. Appreciate the challenges and value of timely detection of dementia in DD/ID population.
3. Learn to administer Early Detection Screen for Dementia (EDSD).
4. Learn dementia workup and management in DD/ID population.
5. Gain knowledge of best practices for dementia medication and non-medication treatments.
6. Understand caregiving risks and how to connect caregivers to evidence-based therapies, resources, and services.
7. Identify models of community-based support and long term care for DD/ID persons with dementia.

Core Content:
- NTG formation and charges
- Dementia basics
- Prevalence of dementia in intellectual disabilities
- Challenges within aging population in DD/ID
- Cognitive Impairment Identification
- Administration of EDSD
- Administration of Modified Caregiver Strain Index
- History and Physical Examination
- Gather pertinent medical and psychiatric history
- Family history
- Social history, living environment
- Social supports
- Review medication list
- Historical description of baseline functioning
- Diagnostic workup – labs and neuroimaging
- Differential diagnosis of dementia
- Follow up visits
- Dementia treatment
- Dementia management
- Counseling, education, support & planning
- Safety
- Advance care planning
- Local Resources for persons with dementia
- Alzheimer’s Association – Aloha Chapter resources

Teaching Methods:
- Didactic presentation with PowerPoint
- Large group discussion and questions and answers
• Case studies

Materials, Handouts and Teaching Resources:
• Curriculum PowerPoint slides, list of resources
• EDSD printout
• MCSI printout
• Alzheimer’s Association resource materials

Time Period: 1 hour (40 min talk, 20 mins Q&A)

Evaluation Method:
• Feedback trainee evaluation form
• CME evaluation form

Module 10: Care Coordination Training: Best Practices: Simplify and Optimize Dementia Care
(a training for care coordinators and consultants, case managers, nurses and social workers)

Learning objectives: At the completion of this module the trainee will be able to:

1. Be proficient in brief cognitive screening to help improve detection of memory loss among older patients
2. Describe evidence-based medication and non-medication interventions known to improve outcomes among patients with dementia and their care partners
3. Learn how to best support patients and care partners in accessing services throughout the continuum of the disease
4. Identify common health risks associated with caregiving and the unique needs of dementia caregivers
5. Recognize how to incorporate health equity principles into dementia assessment, diagnosis and treatment

Teaching Methods:
• PowerPoint slides with lecture including videos
• Questions during and after lecture

Materials, Handouts and Teaching Resources:
• Printed Slides
• Hawaii adapted Care Coordination Practice Tool
• Mini-Cog form

Time Period: 2 hours

Evaluation Method:
• Feedback trainee evaluation form