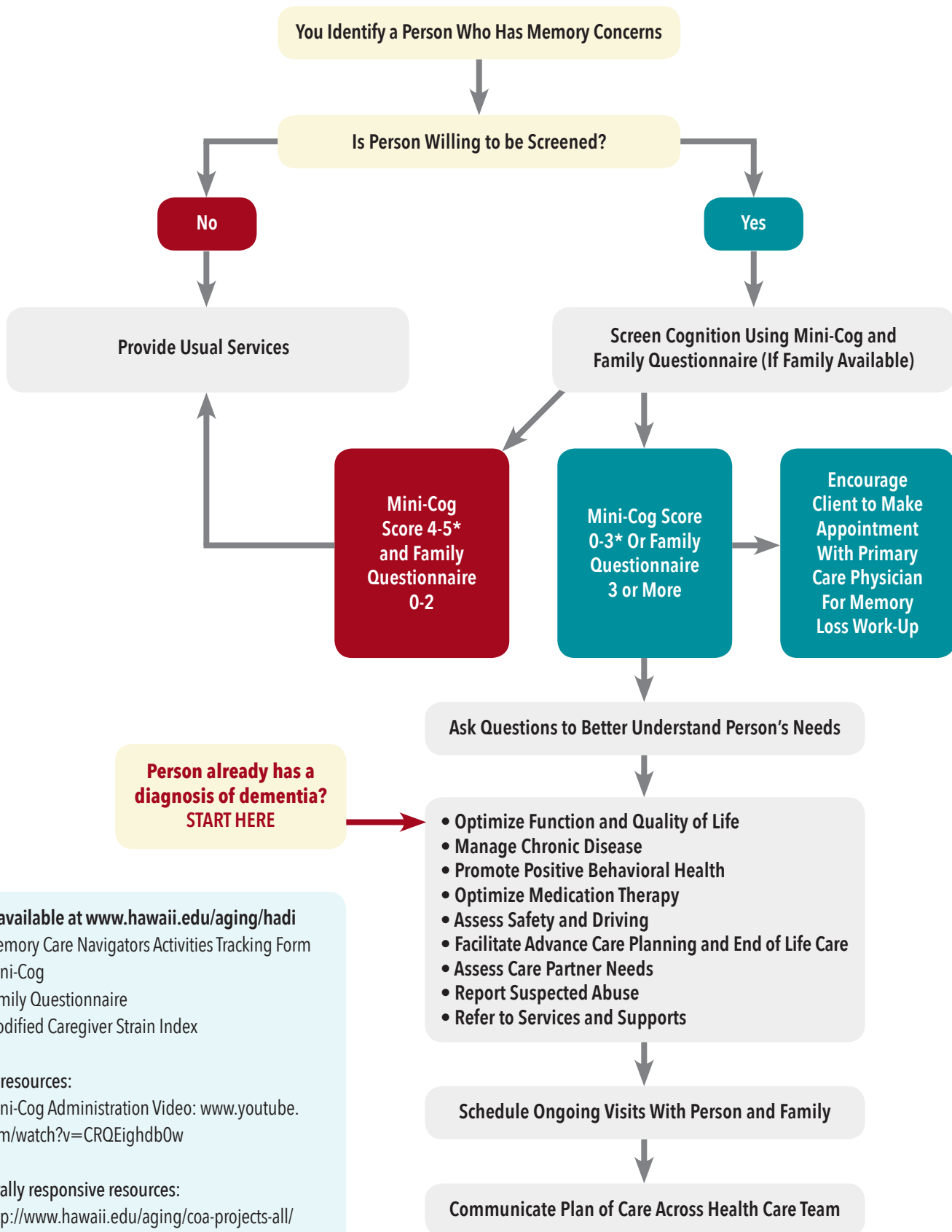


# Hawai'i Memory Care Navigator Roadmap

## COGNITIVE SCREENING FLOW CHART



### Tools available at [www.hawaii.edu/aging/hadi](http://www.hawaii.edu/aging/hadi)

- Memory Care Navigators Activities Tracking Form
- Mini-Cog
- Family Questionnaire
- Modified Caregiver Strain Index

### Other resources:

- Mini-Cog Administration Video: [www.youtube.com/watch?v=CRQEighdb0w](http://www.youtube.com/watch?v=CRQEighdb0w)

### Culturally responsive resources:

- <http://www.hawaii.edu/aging/coa-projects-all/hadi-project/hadi-resources/>
- [www.actonalz.org/culturally-responsive-resources](http://www.actonalz.org/culturally-responsive-resources)

# Hawai'i Memory Care Navigator Roadmap

## NAVIGATION SCREENING TOOLS

### Mini-Cog Scale

#### Step 1. Three Word Registration

Look directly at the Person and say "Please listen carefully. I am going to say three words that I want you to repeat back to me now and try to remember. The words are (select a list of words from the versions below). Please say them for me now". If the person is unable to repeat the words after three attempts, move on to Step 2 (clock drawing).

The following and other word lists have been used in one or more clinical studies. For repeated administrations, use of an alternative word list is recommended.

Version 1	Version 2	Version 3	Version 4	Version 5	Version 6
Banana	Leader	Village	River	Captain	Daughter
Sunrise	Season	Kitchen	Nation	Garden	Heaven
Chair	Table	Baby	Finger	Picture	Mountain

#### Step 2. Clock Drawing

Say: "Next, I want you to draw a clock for me. First, put all of the numbers where they go." When that is completed, say: "Now, set the hands to 10 past 11".

Use a preprinted circle for this exercise. Repeat instructions as needed as this is not a memory test. Move to Step 3 if the clock is not complete within three minutes.

#### Step 3. Three Word Recall

Ask the person to recall the three words you stated in Step 1. Say: "What were the three words I asked you to remember?" Record the word list version number and the person's answers below.

Word List Version: \_\_\_\_\_ Person's Answers: \_\_\_\_\_

Scoring **Word Recall:** \_\_\_\_\_ (0-3 points) 1 point for each word spontaneously recalled without cueing.

**Clock Draw:** \_\_\_\_\_ (0 or 2 points) Normal clock = 2 points. Inability or refusal to draw a clock (abnormal) = 0 points.

**Total Score:** \_\_\_\_\_ (0-5 points) Total score = Word Recall score + Clock Draw score.

\* Adapted from Mini-Cog™ © S. Borson. All rights reserved. Full version is available at <http://www.actonalz.org/pdf/Mini-Cog.pdf>

\*\* Note: these scales with scoring information are available in full on the HADI visit form ([www.hawaii.edu/aging/hadi](http://www.hawaii.edu/aging/hadi)).

### Family Questionnaire

In your opinion does \_\_\_\_\_ have problems with any of the following?

Please circle the answer.

- |   |            |           |            |                |
|---|------------|-----------|------------|----------------|
| 1. Repeating or asking the same thing over and over?      | Not at all | Sometimes | Frequently | Does not apply |
| 2. Remembering appointments, family occasions, holidays?  | Not at all | Sometimes | Frequently | Does not apply |
| 3. Writing checks, paying bills, balancing the checkbook? | Not at all | Sometimes | Frequently | Does not apply |
| 4. Deciding what groceries or clothes to buy?             | Not at all | Sometimes | Frequently | Does not apply |
| 5. Taking medications according to instructions?          | Not at all | Sometimes | Frequently | Does not apply |

Relationship to patient \_\_\_\_\_ (spouse, son, daughter, sister, grandchild, friend, etc.)

Scoring: Not at all=0, Sometimes=1, Frequently=2. Sum to get total score. A score of 3 or more should prompt the consideration of a more detailed evaluation

\*Adapted from the Care Management Advisory Group of the Chronic Care Networks For Alzheimer's Disease Initiative. Full version from: ([http://www.alz.org/mnnd/documents/family\\_questionnaire.pdf](http://www.alz.org/mnnd/documents/family_questionnaire.pdf))

### Modified Caregiver Strain Index

	Yes, On a Regular Basis=2	Yes, Sometimes =1	No=0
My sleep is disturbed	_____	_____	_____
Caregiving is inconvenient	_____	_____	_____
Caregiving is a physical strain	_____	_____	_____
Caregiving is confining	_____	_____	_____
There have been family adjustments	_____	_____	_____
There have been changes in personal plans	_____	_____	_____
There have been other demands on my time	_____	_____	_____
There have been emotional adjustments	_____	_____	_____
Some behavior is upsetting	_____	_____	_____
It is upsetting to find the person I care for has changed so much from his/her former self	_____	_____	_____
There have been work adjustments	_____	_____	_____
Caregiving is a financial strain	_____	_____	_____
I feel completely overwhelmed	_____	_____	_____

Sum responses for "Yes, on a regular basis" (2 pts each) and "Yes, sometimes" (1 pt each)

Total Score = \_\_\_\_\_ \* Higher score on the MCSI, the greater the need for more in-depth assessment to facilitate appropriate intervention.

Thornton, M., & Travis, S.S. (2003). Analysis of the reliability of the Modified Caregiver Strain Index. The Journal of Gerontology, Series B, Psychological Sciences and Social Sciences, 58(2), p. S129. Copyright © The Gerontological Society of America.

# Hawai'i Memory Care Navigator Roadmap

## DEMENTIA SUPPORT

Some do's and don'ts for effective communication with persons with dementia:

### DO

- Do use their first name to get their attention
- Do speak in a normal tone of voice at a normal volume
- Do your best to eliminate any distractions such as a TV or radio
- Do give short, one sentence explanations
- Speak slowly and clearly
- Allow plenty of time for comprehension
- Agree with them or distract them to a different subject or activity
- Accept the blame when something's wrong (even if it's a fantasy)
- Do encourage reminiscing if it is enjoyable to the person
- Respond to the feelings rather than the words
- Be patient, cheerful, and reassuring
- Go with the flow

### DON'T

- Don't interrupt
- Don't reason
- Don't argue
- Don't confront
- Don't question recent memory
- Don't insist, try again later
- Don't criticize or correct
- Don't take it personally

### TRIAGE: What zone is the person in?

ZONE	POTENTIAL CONCERNS	ACTION TO TAKE
<b>GREEN ZONE</b>	Coping well	No need for navigation
<b>YELLOW ZONE</b>	<p><b>Needs some assistance</b></p> <ul style="list-style-type: none"> <li>• Health Concerns</li> <li>• Behavior Concerns</li> <li>• Wandering Concerns</li> <li>• ADLS Assistance</li> <li>• Nutrition Concerns</li> <li>• Transportation Concerns</li> <li>• Driving Concerns</li> </ul> <ul style="list-style-type: none"> <li>• Fall Concerns</li> <li>• Caregiver Burnout Concerns</li> </ul> <ul style="list-style-type: none"> <li>• Advance Care Planning</li> <li>• Legal Concerns</li> <li>• Family Conflict</li> <li>• Elder Abuse Concerns</li> <li>• Medical Insurance and Financial Concerns</li> </ul> <ul style="list-style-type: none"> <li>• Late Stage Dementia</li> </ul>	<p><b>Provide Navigation</b></p> <ul style="list-style-type: none"> <li>• Refer to Physician</li> <li>• Refer to Psychologist or Psychiatrist</li> <li>• Refer to Safe Return Program</li> <li>• Refer to ADRC</li> <li>• Refer to Nutritionist, Meals on Wheels</li> <li>• Refer to HandiVan or HandiCab</li> <li>• Refer To Driving Rehabilitation Specialist or Occupational Therapist</li> <li>• Refer to Physical Therapy, Fall Prevention Programs</li> <li>• Refer to Alzheimer's Association, Caregiver Support Groups</li> <li>• Refer to Social Worker or Primary Care Provider</li> <li>• Refer to Elder Law Attorney</li> <li>• Refer for Family Mediation or Social Worker</li> <li>• Refer to Adult Protective Services</li> <li>• Refer to Department of Human Services Med-QUEST, Social Security Administration</li> <li>• Refer to Hospice</li> </ul>
<b>ORANGE ZONE</b>	<p><b>Highly Complex Case</b></p> <ul style="list-style-type: none"> <li>• Needing Placement</li> <li>• Determination of Capacity &amp; Competency</li> <li>• Multiple Hospitalizations</li> <li>• Multiple Medical Issues</li> </ul>	<b>Discuss with Supervisor and Refer for Case Management</b>
<b>RED ZONE</b>	<b>Crisis, Safety Risk, Elder Fraud, Abuse or Neglect</b>	<b>Call 911 or APS</b>

# Hawai'i Memory Care Navigator Roadmap

## DEMENTIA RESOURCES

Visit the UH Center on Aging at [www.hawaii.edu/aging/hadi](http://www.hawaii.edu/aging/hadi) for additional resources and information.  
Note: Inclusion of an agency/organization in this Roadmap does not imply endorsement by HADI

### Help with Diagnosis and Behavior Management

#### **Refer to Specialist as Needed**

- Neurologist (dementia focus, if possible)
- Geriatric Psychiatrist
- Geriatrician
- Information on stages & behaviors: <https://www.alz.org/care/alzheimers-dementia-stages-behaviors.asp>

### Counseling, Education, Support & Planning

#### **Links to Community and Online Resources**

##### Family Meeting

- Refer to social worker, case manager, or care coordinator

##### **Link to Community Resources**

- Contact the Alzheimer's Association – Aloha Chapter 24/7 Helpline at 1-800-272-3900 or [www.alz.org/hawaii](http://www.alz.org/hawaii)
- Contact Hawaii ADRC (Aging & Disability Resource Center) statewide at 643-ADRC (2372). TTY line: 643-0889. Or, go to [www.adrc.org](http://www.adrc.org) and click on "Professionals & Service Providers"
- Alzheimer's and Dementia Caregiver Center: [www.alz.org/care/](http://www.alz.org/care/)
- TrialMatch®: [www.alz.org/trialmatch](http://www.alz.org/trialmatch)
- Life After Diagnosis: [www.alz.org/alzheimers\\_disease\\_life\\_after\\_diagnosis.asp](http://www.alz.org/alzheimers_disease_life_after_diagnosis.asp)
- Taking Action Workbook: <http://www.actonalz.org/pdf/Taking-Action.pdf>
- NIH Caring for a Person with Alzheimer's Disease: <https://www.nia.nih.gov/alzheimers/publication/caring-person-alzheimers-disease/about-guide>

### Stimulation/Activity/Maximizing Function

- Living Well Workbook: <http://www.actonalz.org/pdf/Living-Well.pdf>
- Adult day services
- Sensory aids (hearing aids, pocket talker, glasses, etc.)
- NIH's Caring for a Person with Alzheimer's Disease: <https://www.nia.nih.gov/alzheimers/publication/caring-person-alzheimers-disease/about-guide>

### Medication Therapy and Management

- Family oversight or health care professional monitoring
- Identify all medications, including over-the-counter medications, vitamins and herbal remedies
- Educate patient and care partner on medication management aids (pill organizers, dispensers, alarms)
- Use a tool like "My Medicine List" at <http://www.hawaii.edu/aging/coa-projects-all/hadi-project/> and share the list with the healthcare team
- Medicine, Age, and Your Brain: [http://www.acl.gov/Get\\_Help/BrainHealth/Index.aspx](http://www.acl.gov/Get_Help/BrainHealth/Index.aspx)

### Cultural Resources & Language Services

- Screening diverse populations: <http://www.actonalz.org/screening-diverse-populations>
- HADI culturally competent resources: <http://www.hawaii.edu/aging/coa-projects-all/hadi-project/hadi-resources/>
- For materials in different languages, go to Alzheimer's Association ([www.alz.org](http://www.alz.org)) and click on "Languages" on the upper right section of the screen

## Safety

*Note: Individuals with dementia are vulnerable adults and may be at a higher risk for elder abuse and exploitation.*

### Driving

- Counsel on risks
- Refer to driving rehab specialist/occupational therapist for clinical and/or in-vehicle evaluation
- Understanding Dementia and Driving: <http://www.thehartford.com/mature-market-excellence/dementia-driving>
- Family Conversations about Alzheimer's Disease, Dementia & Driving: [www.thehartford.com/alzheimers](http://www.thehartford.com/alzheimers)
- At the Crossroads Guidebook: [www.thehartford.com/mature-market-excellence/order-guidebooks](http://www.thehartford.com/mature-market-excellence/order-guidebooks)
- Dementia and Driving Resource Center: <http://www.alz.org/care/alzheimers-dementia-and-driving.asp>
- Fitness to Drive Screening Tool: <http://www.aarp.org/home-family/getting-around/driving-resource-center/info-08-2013/fitness-to-drive-screening-tool.html>

### Fall Prevention

- Preventing Falls Among Older Adults: <http://health.hawaii.gov/injuryprevention/home/preventing-falls/information/>
- Refer to an occupational therapist and/or physical therapist to address fall risk, sensory/mobility aids and home modifications

### Wandering

- Medic Alert® and Alzheimer's Association Safe Return®: [www.alz.org/care/dementia-medical-alert-safe-return.asp](http://www.alz.org/care/dementia-medical-alert-safe-return.asp)
- Six out of 10 People With Alzheimer's Will Wander™: <http://www.alz.org/documents/dsw/MASREnrollmentBrochure.pdf>
- Wandering and Getting Lost: <http://www.alz.org/care/alzheimers-dementia-wandering.asp>

### Legal/Financial

- Encourage patient, as appropriate, to include designating an agent and an alternate agent in a durable power of attorney for health care decisions and to designate an agent or alternative agent in a durable power of attorney for legal and financial matters
  - UH Elder Law Program Health Care Decision Making: [www.hawaii.edu/uhelp/healthcare.htm](http://www.hawaii.edu/uhelp/healthcare.htm)
  - Deciding What's Next and Who in the World Cares? <http://www.hawaii.edu/uhelp/publications.htm>
- Refer to elder law attorney as needed
  - Hawaii State Bar Association Lawyer Referral & Information Service: <http://hawaiilawyerreferral.com>
  - University of Hawaii Elder Law Program: [www.hawaii.edu/uhelp/](http://www.hawaii.edu/uhelp/)
  - Legal Aid Society of Hawaii: [www.legalaidhawaii.org](http://www.legalaidhawaii.org)
- Consumer Credit Counseling Services of Hawaii: <http://cccsofhawaii.org>

### Preventing Elder Abuse, Neglect and Fraud

- Monitor for Elder Abuse, Neglect and Fraud
- If suspected, contact Adult Protective Services: <http://humanservices.hawaii.gov/ssd/home/adult-services/>
- Elder Abuse Justice Unit, Office of the Prosecuting Attorney: Honolulu: (808) 768-6452, [www.elderjustice.com](http://www.elderjustice.com); Hawaii County: (808) 934-3461; Maui County: (808) 270-7777; Kauai County: (808) 241-1888
- Hawaii's Fraud Prevention & Resource Guide: <http://cca.hawaii.gov/blog/news-release-hawaiis-fraud-prevention-resource-guide-gets-an-update/>

### Hawaii Advance Care Planning and POLST Forms:

- Refer to advance care planning facilitator within system, if available
- Encourage, as appropriate, execution of advance health care directive and POLST forms
- Refer to Your Conversation Starter Kit for Families and Loved Ones of People with Alzheimer's Disease or Other Forms of Dementia: [http://theconversationproject.org/wp-content/uploads/2016/05/TCP\\_StarterKit\\_Alzheimers.pdf](http://theconversationproject.org/wp-content/uploads/2016/05/TCP_StarterKit_Alzheimers.pdf)

## Advance Care Planning

# Hawai'i Memory Care Navigator Roadmap

## MCI & STAGES OF ALZHEIMER'S DISEASE

**Symptoms and Duration:** Alzheimer's symptoms vary. The information below provides a general idea of how abilities change during the course of the disease. Not everyone will experience the same symptoms nor progress at the same rate. Find additional information on the stages of Alzheimer's at: [www.alz.org/alzheimers\\_disease\\_stages\\_of\\_alzheimers.asp](http://www.alz.org/alzheimers_disease_stages_of_alzheimers.asp)

### Mild Cognitive Impairment (MCI)

[www.mayoclinic.com/health/mild-cognitive-impairment/DS00553](http://www.mayoclinic.com/health/mild-cognitive-impairment/DS00553)

- Mild forgetfulness
- Increasingly overwhelmed by making decisions, planning steps to accomplish a task or interpreting instructions
- Mild difficulty finding way in unfamiliar environments
- Mild impulsivity and/or difficulty with judgment
- Family and friends notice some or all of these symptoms
- IADLs only mildly compromised; ADLs are intact

### Alzheimer's Disease Early Stage

2-4 years in duration

- Increased short-term memory loss
- Difficulty keeping track of appointments
- Trouble with time/sequence relationships
- More mental energy needed to process information
- Trouble multi-tasking
- May write reminders, but lose them
- Mild mood and/or personality changes
- Increased preference for familiar things
- IADLs more clearly impaired; ADLs slightly impaired

### Alzheimer's Disease Middle Stage

2-10 years in duration

- Significant short-term memory loss; long-term memory begins to decline
- Fluctuating disorientation
- Diminished insight
- Changes in appearance
- Learning new things becomes very difficult
- Restricted interest in activities
- Declining recognition of acquaintances, relatives
- Mood and behavioral changes
- Alterations in sleep and appetite
- Wandering
- Loss of bladder control
- IADLs and ADLs broadly impaired

### Alzheimer's Disease Late Stage

1-3 years in duration

- Severe disorientation to time and place
- No short-term memory
- Long-term memory fragments
- Loss of speech
- Difficulty walking
- Loss of bladder/bowel control
- No longer recognizes family members
- Inability to survive without total care

Adapted from ACT on Alzheimer's® developed tools and resources.

This document was supported in part by a cooperative agreement No. 90AL0011-01-00 from the Administration on Aging (AoA), Administration for Community Living (ACL), U.S. Department of Health and Human Services (DHHS). Grantees carrying out projects under government sponsorship are encouraged to express freely their findings and conclusions. Therefore, points of view or opinions do not necessarily represent official AoA, ACL, or DHHS policy. Form version 3.10.16



Adapted from ACT on Alzheimer's® developed tools and resources. ACT on Alzheimer's® provider practice tools and resources cannot be sold in their original or modified/adapted form.

This document was supported in part by a cooperative agreement No. 90AL0011-01-00 from the Administration on Aging (AoA), Administration for Community Living (ACL), U.S. Department of Health and Human Services (DHHS). Grantees carrying out projects under government sponsorship are encouraged to express freely their findings and conclusions. Therefore, points of view or opinions do not necessarily represent official AoA, ACL, or DHHS policy.