

# Piloting the DementiAbility Workshop for Care Partners



Thinking Differently About Dementia:  
Tips and Tools for Care Partners  
February 2022



Behavioural Supports Ontario  
Soutien en cas de troubles du comportement en Ontario



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## Introduction and Purpose

In the summer of 2021, the Behavioural Supports Ontario (BSO) Provincial Coordinating Office (PCO) and BSO Provincial Lived Experience Advisory initiated a collaboration with DementiAbility Enterprises to pilot the DementiAbility Workshop for Care Partners, entitled “Thinking Differently About Dementia: Tips and Tools for Care Partners”. The purpose of this report is to describe the pilot and share the results of its evaluation.

## About DementiAbility Methods

The goal of DementiAbility Methods is to provide a person-centred, non-pharmacological, multidisciplinary approach to understanding the connections between brain and behaviour. DementiAbility Methods focuses on supporting people living with dementia in a prepared environment that supports their needs, based on their unique interests, skills, strengths and abilities.

In Ontario, DementiAbility Methods is a recommended workshop in the ‘Behavioural Education and Training Support Inventory’ (BETSI). Tailored to the learning needs of healthcare providers, DementiAbility Methods has been taught in long-term care homes, hospitals, adult day programs, retirement homes, and community-based organizations. Since 2012, many Behavioural Supports Ontario (BSO) team members have completed the workshop to expand their knowledge and practical skills.

In 2015, the founder of DementiAbility Methods, Gail Elliot, adapted the DementiAbility Methods workshop to address the learning needs and unique circumstances of care partners. The primary goals of the adapted version are to equip family care partners with the ability to:

- (1) Learn about the connection between the brain, life story, and behaviour;
- (2) Surface the abilities of people living with dementia; and
- (3) Understand what is going on, why it is going on, and what family care partners can do to create better outcomes and better days for all involved.

## Recruitment for the Pilot

To recruit family care partners from across Ontario to participate in the DementiAbility Workshop for Care Partners pilot, the BSO Lived Experience Advisory Leads circulated a poster which contained information about the workshop, including its delivery format, dates it was taking place, and an overview of its content. The Leads invited members of the BSO Lived Experience Advisory to register and/or to share the poster with other family care partners in their networks. BSO Clinical/Strategy Leads from across Ontario facilitated additional recruitment by sharing the poster with their clinical team members and other team members from collaborating organizations such as local Alzheimer Society chapters, Seniors/Geriatric Mental Health Services, Primary Care Memory Clinics, and Specialized Geriatrics Services.

Using a first-come-first-served method, the 15 seats reserved for the pilot filled in a span of two weeks by participants from across urban and rural regions of Ontario. In total, over 50 family care partners reached out to express interest in participating in this pilot. Family care partners who reached out after



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the workshop was full were placed on a waitlist in case one or more participants could no longer commit before the workshop began. When registering for the workshop pilot, participants committed to attending the majority of the sessions and agreed to provide their feedback either verbally or in writing following completion of the workshop. The BSO Provincial Coordinating Office sponsored the pilot; all registrants participated at no cost.

## Method of Delivery

Gail Elliot delivered the DementiAbility Workshop for Care Partners via virtual Zoom meetings over a period of eight weeks from October 6 - November 23, 2021. Each learning session took 90 minutes; however, participants could remain in each session for an additional 30 minutes if they wished to discuss the material and/or seek specific guidance. To support their preparation for each session, as well as their continued learning, each participant received the workshop manual called *Thinking Differently about Dementia: Tips and Tools for Care Partners* prior to the first session.

During week 1 and week 3, two participants dropped out of the pilot due to personal circumstances.

## Workshop Evaluation

Participants who completed the workshop provided their feedback by responding to an electronic survey and/or participating in a virtual focus group hosted on December 1 2021. Although participants were given the opportunity to participate in an individual interview, none chose this option.

Participants received an invitation to contribute their feedback via electronic survey on the day after the last learning session. This survey was live from November 24, 2021 to January 7, 2022. In total, seven participants chose to provide feedback using the survey. The focus group took place on December 1, 2021 with six participants. Below is a summary of the feedback collected via both methods.

Unique to the survey, participants rated the workshop using a 5 point Likert scale, with 1 indicating very poor and 5 very good (see results below).

- Organization of sessions (using Zoom, weekly period) | Avg Score: 4.86
- Quality of instructor | Avg Score: 4.86
- Relevance of information | Avg Score: 4.86
- Quality of Manual | Avg Score: 4.86
- Opportunities for discussion | Avg Score: 4.57
- Ability to use learning in day-to-day life | Avg Score: 4.71
- Learning Environment (inclusive/warm/welcoming) | Avg Score: 4.71

In the survey and during the focus group, participants identified workshop content that they felt would be most beneficial in their role as a family care partner. Mentioned most frequently was the application of the DementiAbility WOW Model™ and the use of practical, hands-on, cost-effective products and strategies to help people living with dementia remain well and meaningfully engaged. Participants frequently mentioned an appreciation for the workshop's focus on maximizing abilities instead of focusing on disabilities, with many participants adding that they felt that the workshop developed their "detective skills".



Beyond the workshop content, participants noted other strengths related to the workshop instructor and weekly virtual group format. On these topics, participants voiced an appreciation for the instructor's perspectives as a person with lived experience and her ability to intertwine personal stories with the workshop's content. Participants also felt it was greatly beneficial to have a person living with dementia in the group and enjoyed the opportunity to network and build relationships with other family care partners from across Ontario. With regard to the format, the hosting of weekly sessions allowed participants to both preview and review content from the workshop manual which enhanced their ability to retain knowledge. The availability of the manual was another strength, along with the quality of the videos. Lastly, one participant voiced that they felt that by attending the workshop, their ability to communicate with healthcare providers improved, knowing that many of the health care providers that they interact with had taken their version of the program and now, they could all "speak the same language".

Participants next commented on opportunities to improve the workshop, with the majority recommending ways to enhance the format without changing the material. Participants suggested that people living with dementia be invited to a separate workshop with similar, yet tailored content. On this same topic of inclusion, participants also recommended that people living with dementia join their family care partners for the first session of the DementiAbility Workshop for Care Partners. Further, some participants suggested that it would be beneficial to organize future sessions specific to the stage/phase of the person living with dementia in their care (e.g., mild, moderate, late).

To enhance learning retention, participants recommended the addition of more case studies, role-play opportunities, and discussion time. On the topic of timing, some participants suggested shorter sessions while others recommended longer sessions. Recognizing the challenges of learning in a pandemic environment, participants voiced benefit in the offering of the program in-person when safe to do so. A couple of participants added practical ways to improve the experience for future learners, including redesigning the printing of the manual to spiral-bound so that pages could stay open more easily and recording all sessions so that they may be reviewed by participants at a later date.

Concluding the survey and focus group was a question asking whether participants would recommend this program to others, to which all participants responded 'yes'.

## Conclusion

Participation in this pilot provided a unique opportunity for a select number of family care partners across Ontario to take part in a workshop specifically designed for them. Overall, the response to the program was very positive, with participants praising the workshop content for being useful and practical. Participants also benefited from the networking opportunity provided and the quality of the instruction. Ways to enhance the delivery format of the workshop were identified, most of which pertaining to the workshop's delivery format. These recommendations have been provided to DementiAbility Enterprises for their consideration for future sessions.

**"This has opened a whole world of possibilities. I am very excited to share and put into practice what I have learned. Really appreciate the opportunity to have taken this workshop." – Participant**



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## Contact Us

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