A Professional Training Program

For CNA's, PSS's and all Direct Care Staff

caring for the person with dementia

A Training Program for Direct Care Staff

The life of the person with Alzheimer's disease once was defined as revolving entirely around inevitable loss. Another view of Alzheimer's disease has emerged in which individuals respond to their disease according to how supportive their environments are.

Developing a better understanding of how a person thinks, feels, communicates, compensates, and responds to change, to emotion, to love—may bring some of the biggest breakthroughs in treatment. The primary goal of habilitation therapy is to promote a positive emotion in the person with dementia by maximizing their strengths and abilities and minimizing their limitations.

This training teaches important elements in best Habilitation Therapy practices, focusing on four key areas:

- Understanding Alzheimer's and Dementia: Caring for the Person
- Communication: We Need to Know the Language
- Behavior as Communication: Understanding and Responding
- Understanding and Working with Families

Modules include a PowerPoint presentation, discussion activities, lecture and demonstration, role-play and group work.

Cost: \$21 fee (covers light breakfast and lunch)

Advance Registration Required

Online: act.alz.org/MachiasHabilitation

By Phone: 800 272 3900

Thursday, April 2, 2015 8 a.m. to 4 p.m.

Science Building Room 102 University of Maine at Machias 116 O'Brien Avenue Machias, ME 04654

alzheimer's % association

Maine Chapter

383 US Route One, Suite 2C Scarborough, ME 04074 207.772.0115 or 1.800.272.3900 alz.org/maine



Funding for this training is provided by the University of New England Maine Geriatric Education Center which is funded by the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA) Grant # UB4HP19207

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How to Register

Online

act.alz.org/MachiasHabilitation

By Mail

Alzheimer's Association Maine Chapter 383 US Route One Suite 2C Scarborough, ME 04074

By Phone

800 272 3900

Card#

Signature

Name as it appears on card

Credit Card Billing Address (if different than above address)

Name			
Facility (if applicable)			
Address			
City		ST	Zip
Email	·	Phone	
\$21 Fee (covers light break	fast and lunch)		
Make checks payable to: A	.lzheimer's Assoc	iation, Main	e Chapter
Please charge my (circle one)	VISA	MasterC	ard Discove
			_

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Exp Date

Amount

CVV