



ONTARIO
CLRI

Centres for Learning,
Research & Innovation
in Long-Term Care

Frail Aging & Dementia Simulation Toolkits for Educators

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WHAT WE DO



HOST ORGANIZATIONS

The Ontario CLRI is funded by the Government of Ontario and hosted at Baycrest Health Sciences, Bruyère, and the Schlegel-UW Research Institute for Aging. The collective expertise, resources and partnerships of our host organizations help advance our provincially-mandated goals.



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Ontario CLRI



Objectives

- ① Understand the frame of simulation
- ② Provide resources to facilitate these types of simulations
- ③ Explore how these types of simulation can translate to your role in educating staff

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Simulation

Dementia + Frail Aging Simulations Toolkits

What is Simulation?

- A technique (not a technology) to replace and amplify real experiences with guided ones, often “immersive” in nature, that evoke or replicate aspects of the real world in a fully interactive fashion
- Goal: transference of lessons learned to real world situations

Gaba, 2004



Poll – do you use simulation?

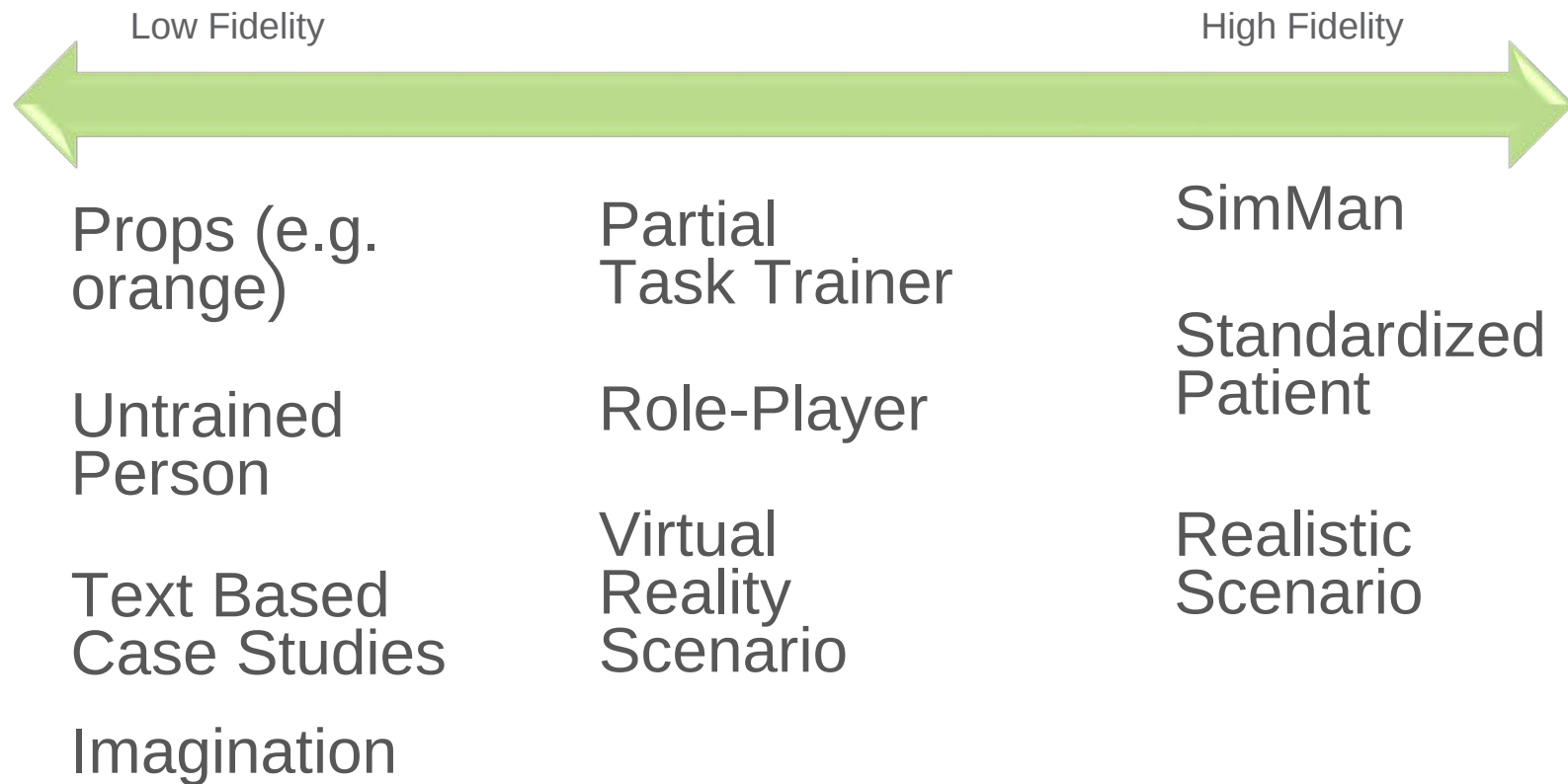
Gaba, 2004

Why Simulation?

Understand, practice and manage clinical situations:

- Safe place to replicate most essential elements of reality free of normal consequences
- Meaningful application of knowledge, technical skills, competencies and decision making
- Can be applied to a wide range of competencies (e.g., technical skill, professional behaviours)
- Immersive learning experience

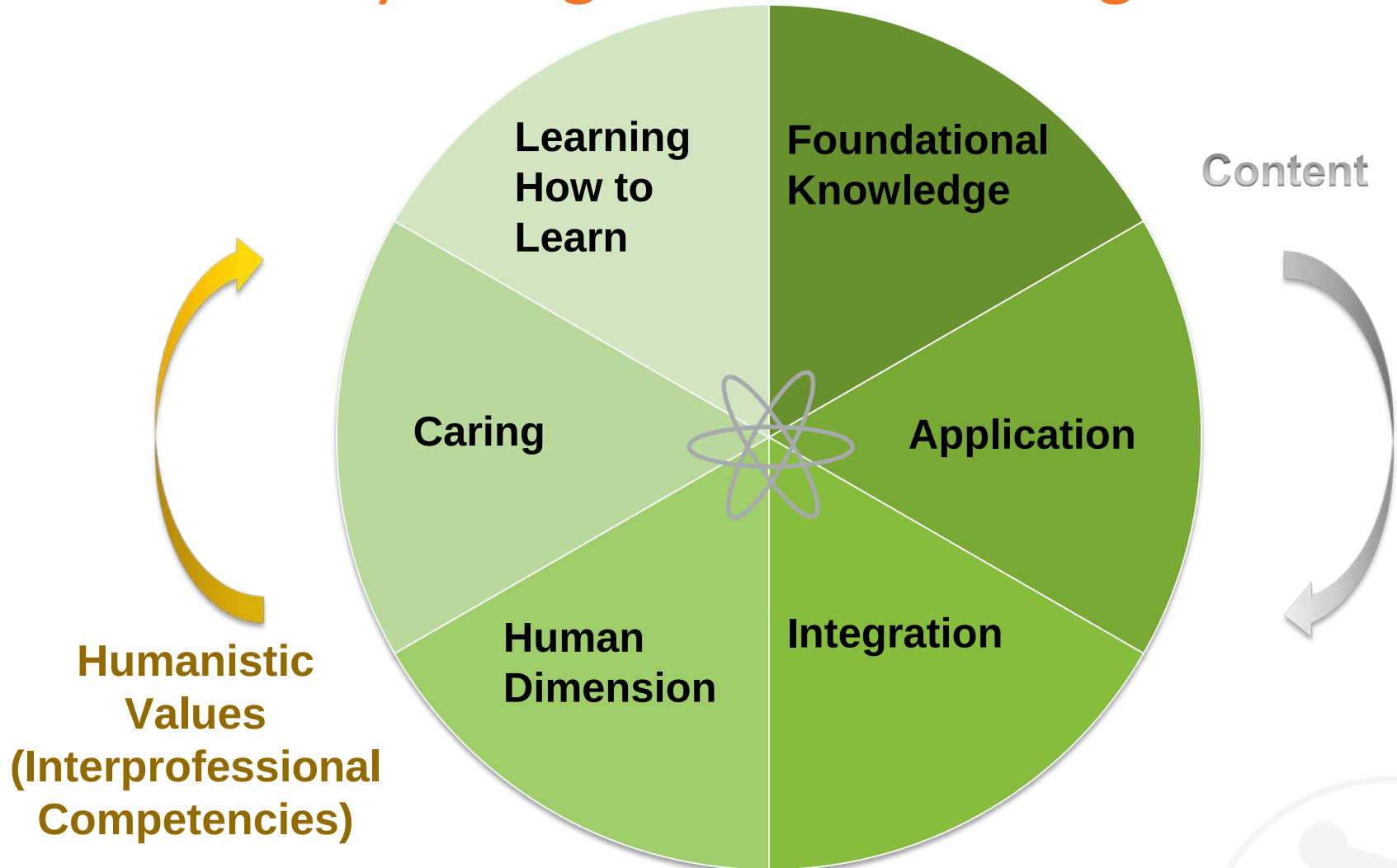
Fidelity = Realism



Adapted from Ballon, 2013

What type of simulation have you used?

Taxonomy of Significant Learning (Fink, 2013)



Simulation Basics

- Strong **learning objectives** within the context of the curriculum
- Skilled facilitators applying a **simulation framework**
- **Levels of fidelity** (reality) matched appropriately to
 - the learning objectives
 - the training level of the learners
- Have a level of challenge and maintain “reality”

What simulation scenarios do you use?

Roles

Simulationist

- Have the knowledge, skills and attitudinal aspect of using methodologies of simulation to achieve learning objectives

Confederates

- Someone who works with the simulationist
- Knows the learning goals and scripts
- Trained to work with simulated participants (actors)

Roles

- Content expert
 - consult with a subject matter
- Technicians
 - run technical devices or resources

Simulation Framework



* The most learning happens in the debrief

Simulation Framework

Brief



Activity



Debrief*

- Prep the learners
- Review objectives
- Provide safe environment
- Tone & confidentiality
- Role introductions

- Have a checklist
- Have safety guidelines for participants
- Consider stress titration and complexity
- Be aware of space

- Remember the goals and objectives
- Facilitate discussion through structured debrief
- 1 min of simulation = 10 min of debrief



Simulation

Dementia + Frail Aging Simulations

Toolkits

Why Simulation for Frail Aging & Dementia?

Lived experience of being less able and increasingly frail

+

Guided reflection

- May lead to
 - Increased awareness of frailty
 - Changes in perspective and subsequent behaviour
 - Increased empathy and compassion

Dementia + Frail Aging Simulation

With respect to dementia and frail aging, the **learning objectives** are to:

- a. Increase knowledge and understanding of the conditions
- b. Enhance empathy and attitudes towards the elderly and those living with dementia
- c. Enhance the care practices of healthcare providers

Frail Aging Suit

- Physical changes
 - Movement
 - Posture
 - Gait
 - Strength
- Sensory impairments
 - Hearing
 - Vision
 - Tactile grip



Describe your population



Clinical Frailty Scale

A. Very Fit



B. Fit



C. Managing Well



D. Vulnerable



E. Mildly Frail

F. Moderately Frail



G. Severely Frail



H. Very Severely Frail



I. Terminally Ill



Moorhouse et al., 2012

Cognition

- Executive functioning
- Learning and memory
- Language
- Complex attention
- Perceptual-motor function
- Social cognition

8 As of Dementia

- Anosognosia
- Agnosia
- Aphasia
- Amnesia
- Apraxia
- Altered Perception
- Apathy
- Attentional Deficit

Stages of Alzheimer's Dementia

- **Early:** forget, can't communicate as well, change in mood and behaviour
- **Middle:** decline in thinking ability, decline in memory, needs assistance in tasks of daily living
- **Late:** unable to speak and look after themselves
- **End of Life:** mental and physical decline

Alzheimer's Society Canada 2015

Poll

- How would you describe the stage of dementia that your staff works with (click all that apply).

Simulation

Dementia + Frail Aging Simulations

Toolkits

CLRI Resources

www.clri-ltc.ca

- Frail Aging Simulation Toolkit
- Dementia Simulation Toolkit



Intent

- To allow participants to feel the impact frailty, disease, and/or dementia
- These scenarios aren't comfortable
- Facilitators and/or confederates are designed to be distant and not helpful



Toolkit Contents

- Brief primer on simulation
- Learning objectives
- Scenarios
 - Physical limitations
 - 8 As
- Briefing notes
- Debriefing notes
- Sample forms and resources
- Sample presentations

Frail Aging Toolkit

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Tailoring the Scenario to Meet the Learning Objectives

Frail Aging

- Movement
- Posture
- Gait
- Strength
- Hearing
- Vision
- Tactile grip

8As

- Altered perception
- Amnesia
- Anosognosia
- Agnosia
- Apathy
- Aphasia
- Apraxia
- Attentional deficit

Learning Objectives with Frail Aging Suit

Scenario	Visual Impairment	Hearing Impairment	Mobility Impairment
Long-Term Care Home Scenarios	✓	✓	Severe

Scenario	Visual Impairment	Hearing Impairment	Mobility Impairment
Waiting room + mock X-ray	✓		Moderate

What to Expect

- This activity aims to mimic the **limitations of frail aging and living with cognitive impairments related to dementia** in an elderly person who is coming to a medical appointment. **As you go through the simulation, you will be putting yourself in the shoes of a person with dementia and physical frailty, who is being asked to fill out a form by a clinic assistant.**

Brief

Safety

- Participation in this simulation is 100% voluntary and everything that happens has a purpose. If at any point you feel too much discomfort or unease, please let your facilitator know. We will be sure to accommodate your needs and/or stop the simulation.”

Brief



When Facilitating

- State instructions quickly and do not repeat
- Hearing will be impaired so they are not meant to hear all instructions necessarily
- Have stations set up around the room/s that must be completed

Activity

- Foundation video

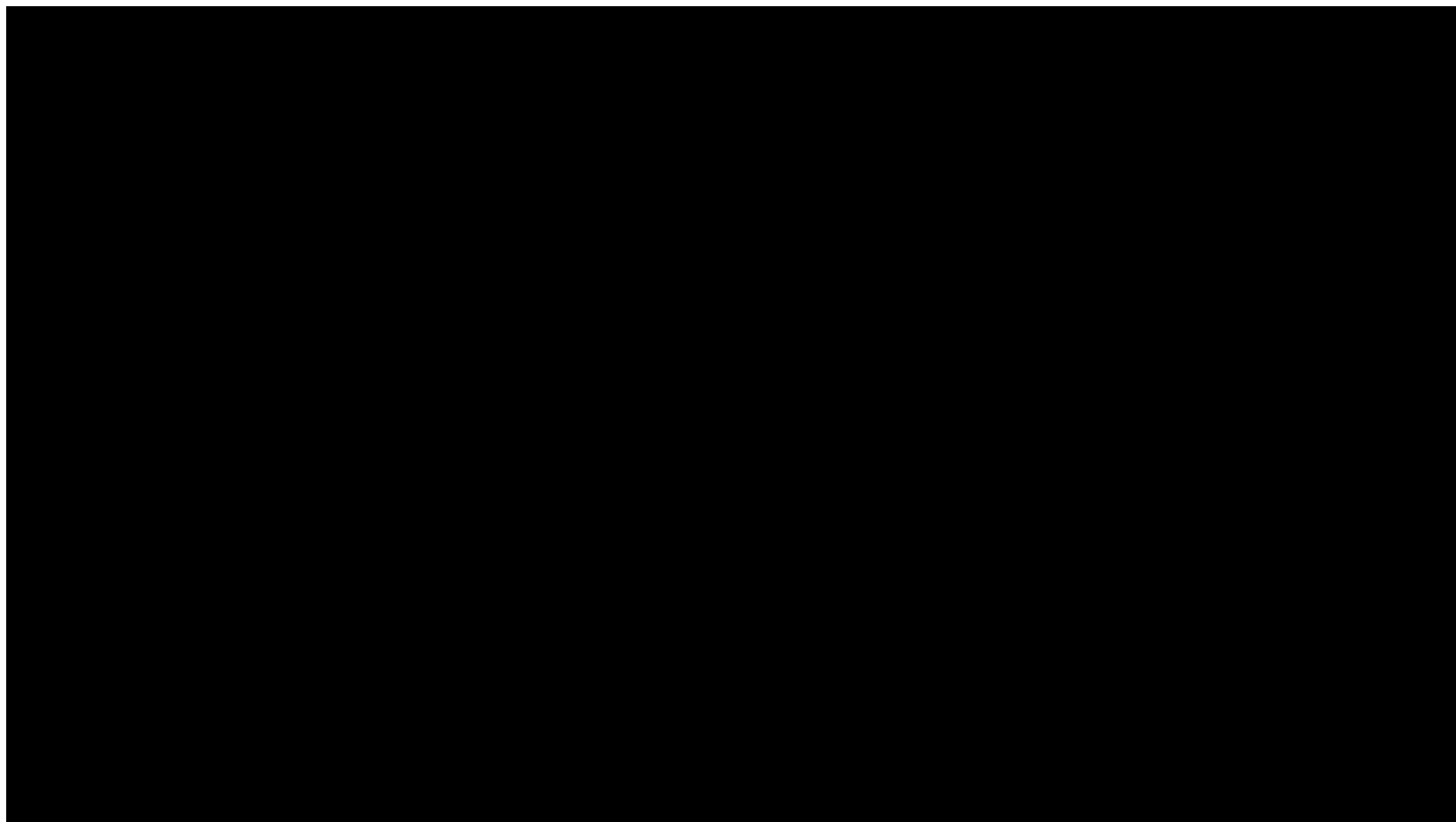
Suiting Up

Considerations

- Be sensitive to physical constraints (injuries, etc.)
- Be sensitive to other potential concerns (anxiety, claustrophobia, etc.)

Brief

We asked our CEO to try it on



Dementia Simulation Toolkit

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Dementia Simulation Toolkit

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Learning Objectives in Dementia Sims

Scenario Learning Objectives	Altered Perception	Amnesia	Anosognosia	Agnosia	Apathy	Aphasia	Apraxia	Attentional Deficit	Frail Aging Suit
Health card Information		✓	✓		✓	✓			

Scenario Learning Objectives	Altered Perception	Amnesia	Anosognosia	Agnosia	Apathy	Aphasia	Apraxia	Attentional Deficit	Frail Aging Suit
Filling out health form	✓		✓	✓	✓	✓			✓



Dementia Sim Video

Recommendations

- Expose learners to multiple experiences, different levels and areas of impairment
- Pre-assess participants to note differences in values, attitudes
- Plan for psychological and physical safety
- Brief participants for role-immersion and to adapt to limitations of the simulation
- Consider the pros and cons to group simulation

Recommendations

- Debrief immediately following the simulation
 - Geriatric knowledge
 - Emotional experience
 - Application to practice

Simulation

- ***“I think he comes over highway.”***
(I need you to come this way.)
- ***“Sit on the blue chair.”***
(Have a seat on that blue chair.)
- ***“Cyclist will come here soon. There will take you this highway today.”***
(The assistant will soon be with you. She’ll need information from you today.)

Activity

MEALICD SHOTIRY FROM

Patent **Anema**: _____ DAtED BURSt: _____

1. Underwear PhySICS NoW CARE? Iffy, pleasure pain: _____

2. Has **FOREVER** **BEE** **HOSTAGE** size or had a majenta ratio? Iffy, pleasure pain: _____

3. Hafa þú alltaf had -alvarleg höfuð eða háls meiðslum? Iffy ánægja verkir: _____

Four. Allegro

You

Have

?

5. What substaNCES take you to make HAPPY?

6. *Com*_{ics} OR *Con*_{certs} *Any?*

Educator Points

- May want to only inform the participants that there are learning objectives that are built into the scenario and that will be discussed after the simulation - during the debrief
- Informing the participants about the experience in advance may bias their experience of the simulation and their learning

Debrief

Pre-Questionnaires

- In your opinion, will this simulation that you are about to experience allow you to gain knowledge in some aspect(s) of:
 - Physical frailty?
 - Dementia?

Debrief

Pre-Questionnaires: Some Results

- “To gain a better appreciation of how I can make older adults more comfortable – being patient, understanding, and being able to communicate that”
- “To simulate the physical experience of an older adult. This is important so I can become a more informed health care provider and understand how they navigate their environment”

Post-Questionnaires

1. After going through this simulation, what would you do differently when you work with the frail elderly?
2. How was it when you had to complete the tasks in the simulation?
3. On a scale of 1-10, how much did this simulation allow you to:

a. Gain more knowledge about **physical** limitations of frail aging

Not at all

A little bit

Quite a bit

Very much

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----

b. Have more **empathy** for **physical** limitations experienced by the frail elderly

Not at all

A little bit

Quite a bit

Very much

1	2	3	4	5	6	7	8	9	10
---	---	---	---	---	---	---	---	---	----



Debrief

- a) How did the simulation make you feel?
 - i. What feelings did you have during the simulation?
- b) Which part of the simulation was most impactful? Why?
 - i. What shocked you the most about the simulation?
- c) What did you learn from the scenarios?
- d) What can you apply to your work? To your personal life?
 - i. How can you change your practice in order to provide better care?
 - ii. What are some simple strategies you can apply to your work?

Debrief



Debrief: Some results

- “I felt like a child – I had no control over my body/what I was being told to do”
- “Frustrated, fed up, didn’t want to even listen to instructions because I knew I couldn’t follow them”
- “I felt slow and it made me feel like I was a burden to the facilitator”
- “Be patient, more vocal about patient advocacy”
- “I felt bad for times I may have rushed older adults. I will definitely not rush them when I interact with them”
- “I held the hand of my partner to help me walk”
- “It was nicer having a partner with me”
- “I hope to have my partner by my side in old age”

Debrief Video

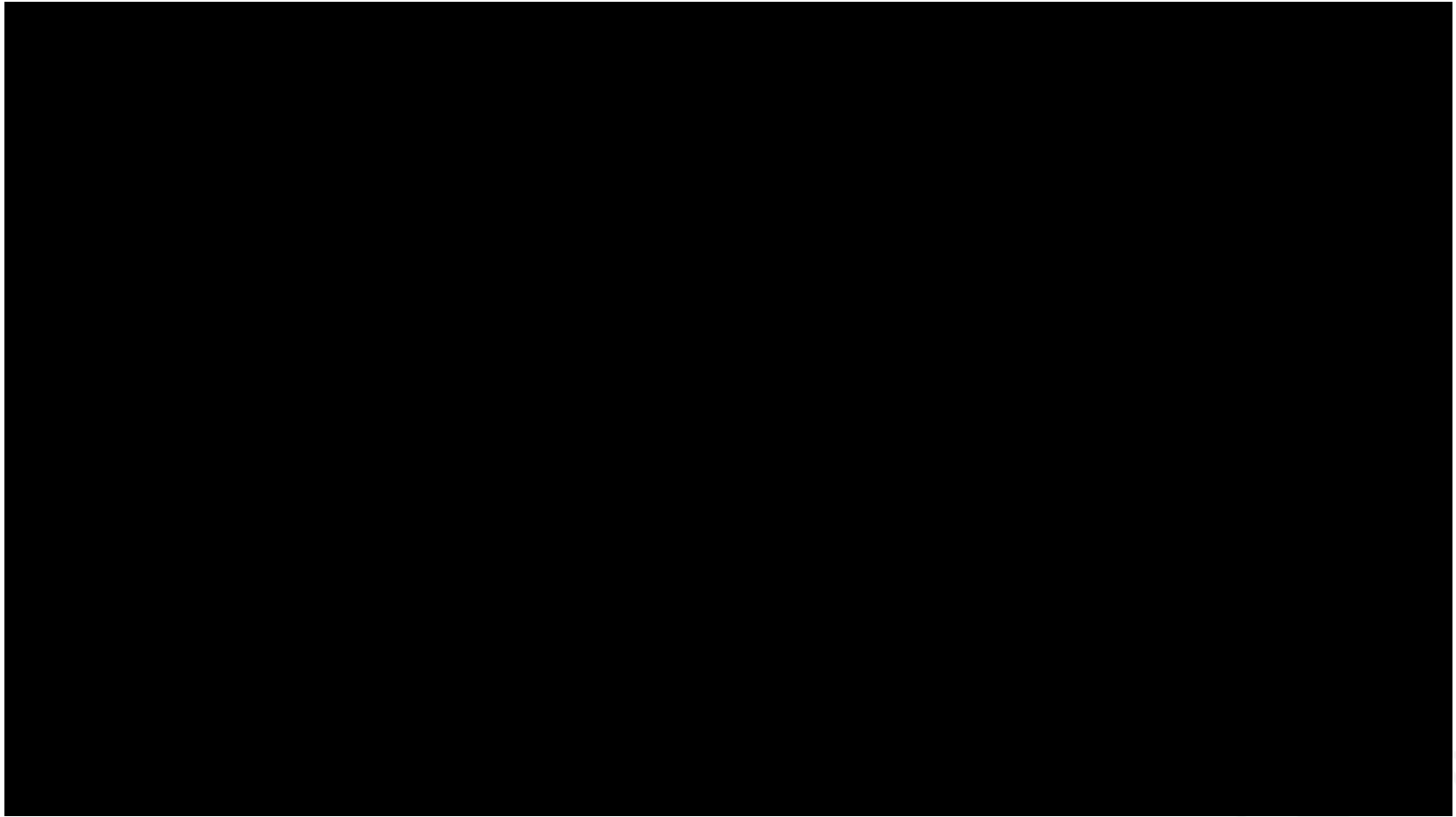
Emerging Themes

Other Ideas for Physical Sim

- Ear plugs or headphones with distracting noise
- Goggles that simulate different visual disturbances (paint cheap swimming goggles)
- Gloves on hands, some fingers taped – or cotton tips
- Frail aging suit or one arm in sling – saran wrap - bandage
- Something in shoe to cause mild discomfort (bunched up gauze or ABD pad)
- Wheel chair with physical arm issues
- Feed them applesauce



Frail Aging Suit on a Budget?



Cost?

- Glasses - \$1.25
- Bandages - \$24 (or scarves)
- Gloves - \$3.7 (bulk) (examination gloves)
- Earplugs - \$0.56 (bulk)
- Ribbon - \$1.25
- Binder clips - \$ 0.80
- =\$31.56 + tax + time (or less!)

Baycrest CLRI Resources

www.clri-ltc.ca

- Frail Aging
 - FA Simulation Toolkit
 - FA Suiting Up Video
 - FA Take a Walk in Their Shoes Video
- Dementia
 - Dementia Toolkit

Poll

- Do you see value in having staff experience frail aging and/or cognitive impairment?

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Resources

- <https://cep.health/clinical-products/antipsychotics-and-dementia-primary-care-edition/>
- <http://www.rgpeo.com/media/51096/behaviours%20and%20dementia%20inventory.pdf>
- <https://www.hqontario.ca/Evidence-to-Improve-Care/Quality-Standards/View-all-Quality-Standards/Behavioural-Symptoms-of-Dementia/>
- http://www.behaviouralsupportsontario.ca/Content/Pledge/BSO_Person-Centred_Language_Initiative_Report%20_October_2018.pdf?mc_cid=1f9152c19c&mc_eid=5c35c613f1
- https://alzheimer.ca/sites/default/files/2017-11/Person_Centred_Language_Guidelines-e.pdf
- http://www.tahsn.ca/LibraryFiles/Person_Centred_Language_December_2016.pdf
- <https://alz.to/wp-content/uploads/2017/04/Understanding-Behaviour-Communication-Strategies-COMBINED-BEHAVIOUR-HANDOUTS.pdf>
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