

# **Dementia Matters: a practical approach to assessment and nursing care**

## **Session 2**

**Zoom webinar – Thursday 26 June 2025**  
**6.30-8pm**

# Acknowledgement of traditional owners

We acknowledge the Tasmanian Aboriginal people as the traditional owners and ongoing custodians of the land on which we are meeting today. We pay our respects to Elders past and present.

We would also like to acknowledge Aboriginal people who are joining us today.

# Some housekeeping

- Tonight's webinar is being recorded
- Please use the Zoom Q&A feature to ask questions
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<https://www.primaryhealthtas.com.au/for-health-professionals/events/>

# Presenters



**Caroline Gibson**



**Professor Dimity Pond**

# Dementia Matters

## Part 2

A practical approach to assessment and care for people living with dementia for the primary care nurse (PCN)

Caroline Gibson and Dimity Pond

Dementia Training Australia is supported by funding from the Australian Government under the Dementia Training Program.



Dementia  
Training  
Australia®



DTA would like to show our respect and acknowledge the traditional custodians of these lands. We extend this respect to elders' past, present and emerging, and to all Aboriginal and Torres Strait Islander peoples. We also pay respect to Aboriginal and Torres Strait Islander peoples living with dementia and their carers.



Commonwealth of Australia

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# Learning Outcomes - Part 2

After participating in this training, you will be able to

Discuss how to have a conversation about cognition with patients and your medical team

Apply a person-centred, team-based approach to identify potential health care needs

Develop strategies to support individuals living with a cognitive change and/or chronic disease (diabetes)

Self-care



# Part 1 Recap

- Dementia is common
- Dementia is a significant cause of death and disability
- It is caused by the damage to communication pathways between brain neurons
- Depending on the brain regions affected, the type and presentation of dementia differs
- Dementia diagnosis and management is shifting from secondary to primary care
- Primary care nurses can
  - Promote brain health and discuss dementia risk reduction
  - Recognise cognitive change and act early to trigger assessment and appropriate care

# Having a Conversation About Cognition

# Communicating with People Living with Dementia

Quiet environment

Hearing aids and glasses

Get the person's attention

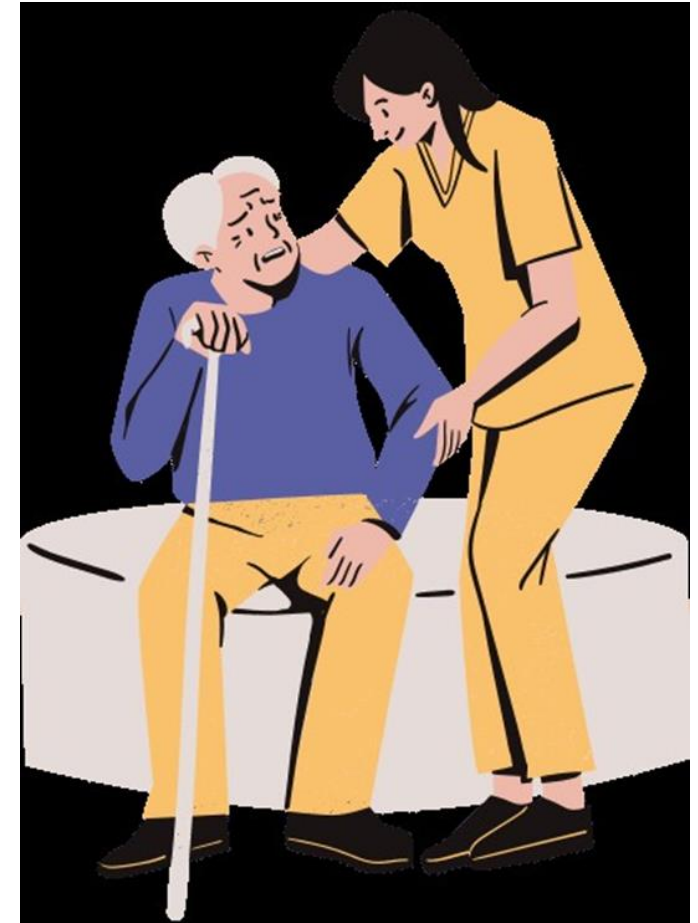
Talk directly with the person with cognitive changes

Speak clearly, not loudly

Use simple language, one idea at a time

Give time to process information and answer

Body language – yours and theirs



# Asking People About Cognition

Have you noticed any issues with your memory and thinking?

Are you finding it trickier to do some things you used to?

Clarify meaning and probe

Use a non-threatening approach by framing your questions as a common concern of many older patients

Keep it positive - "It's good that we've talked about this, because we can figure out what is going on and there are things we can do to better support you"

# Having a Conversation About Cognition

## Checklist for dementia symptoms and changes

Listed below are some of the common changes that may be associated with dementia. There are many different types of dementia and symptoms can vary. This checklist is not intended to diagnose dementia or any other health condition. There may be other reasons for these changes.

If you have any concerns, use this checklist to help you to have a conversation with your GP, nurse or health professional as well as your family.

### Changes in thinking and memory:

	Tick if it's worse than two years ago	Tick if it affects your daily life
Forgetting recent events	<input type="checkbox"/>	<input type="checkbox"/>
Having trouble learning new things	<input type="checkbox"/>	<input type="checkbox"/>
Struggling to find the right words or follow conversations	<input type="checkbox"/>	<input type="checkbox"/>
Having a hard time making choices, or making careless or risky choices	<input type="checkbox"/>	<input type="checkbox"/>
Losing track of time and dates	<input type="checkbox"/>	<input type="checkbox"/>
Asking the same question a lot, or saying the same things over and over	<input type="checkbox"/>	<input type="checkbox"/>
Putting things in unusual places	<input type="checkbox"/>	<input type="checkbox"/>

### Changes in daily activities:

Finding it hard to do day-to-day jobs like cooking, paying bills, planning, shopping	<input type="checkbox"/>	<input type="checkbox"/>
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### Changes in daily activities:

Finding it hard to do day-to-day jobs like cooking, paying bills, planning, shopping	<input type="checkbox"/>	<input type="checkbox"/>
Changed sleep patterns such as disturbed sleep or sleeping more during the day	<input type="checkbox"/>	<input type="checkbox"/>
Getting lost in familiar places	<input type="checkbox"/>	<input type="checkbox"/>
Harder to walk and move, for example, shuffling, feeling stiff or being slow	<input type="checkbox"/>	<input type="checkbox"/>

### Changes in mood and behaviour:

Feeling unusually sad or hopeless	<input type="checkbox"/>	<input type="checkbox"/>
Feeling unusually worried, nervous or uneasy	<input type="checkbox"/>	<input type="checkbox"/>
Not being interested in previously enjoyable hobbies or social events	<input type="checkbox"/>	<input type="checkbox"/>
Behaving inappropriately or differently to usual	<input type="checkbox"/>	<input type="checkbox"/>
Feeling restless and walking around a lot	<input type="checkbox"/>	<input type="checkbox"/>

### Other concerns:

Can you hear well? Yes / No      Do you use hearing aids? Yes / No

Write other concerns here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date:



**Face Dementia**  
Know the signs. Ask a GP.

Visit [www.facedementia.au](http://www.facedementia.au) | Email [info@facedementia.au](mailto:info@facedementia.au)  
Call the National Dementia Helpline: 1800 100 500

Source: [facedementia.au](http://facedementia.au). Freely available print off sheet

# Exploring the Impact of Cognitive Changes on Function



# You find out there has been a change in social activities

Max has stopped doing activities that he previously enjoyed e.g., bowls

“Tell me more”

“it is too hard to get there”

“Ok, let us sort out some transport for you because it is important to your health to maintain your social connections”



Photo by [Mark Timberlake](#) on [Unsplash](#), Royalty free

You see Max for a review, he has not used the transport you arranged.

You feel frustrated but maybe there was a different reason

- A loss of confidence because forgetting people's names (short-term memory loss)
- Feeling embarrassed at bowls mis-naming the jack and bias (aphasia)

This information could change what you do



Not taxi vouchers or community transport →

Maybe a friend/ buddy for reassurance and support

Photo by [Peter Kasprzyk](#) on [Unsplash](#)

# Change in Personal Care



Photo by [Tim Doerfler](#) on [Unsplash](#), Royalty free

Lazy? Depressed? Pain?

Maybe usual hygiene and grooming has become too complex due to cognitive changes

Different strategies

- Have clothes easy to get on and off
- Simplify environment
- Provide only a couple of choices of clothing
- Provide only a couple of steps at a time
- Set out toothbrush, comb, hairbrush, shaver...



Desk Photo by [Samantha Gades](#) on [Unsplash](#), Royalty free.



Poppelreuter overlapping figure. 1917.

Cannot find them “right under his nose” (agnosia)



Tie photo by [Alexander Grey](#) on [Unsplash](#)



Bathroom Photo by [Filios Sazeides](#) on [Unsplash](#), Royalty free.

## Consider

- District nursing
- Community care services
- Occupational therapy
- Changes to environment
- Dementia Australia help sheets



## A Change in Continence

Refer to continence clinic

Or

Is the person having difficulty with clothing fasteners (apraxia)

Or

Are there changes in depth perception / colour differentiation

Is the person easily disorientated

Photo by [Chastity Cortijo](#) on [Unsplash](#), Royalty free.



# Not Eating Well

Poor appetite

Or

Visual perception difficulties

Apraxia

Simplify

- presentation
- cutlery
- food



Plate setting photo by E M: Pexels, Royalty free



Food plate photo by Valeria Boltneva:Pexels, Royalty free



# Adapting Routine Care – Case Study

Consider a person-centred, team-based approach to identify potential health care needs and strategies to support a person living with a cognitive change

## Case Study - Jenny

Jenny is 82 and lives alone. She has diabetes and cognitive impairment. She is on multiple medications including metformin 500mg bd. Jenny has missed her previous 2 appointments, so it has been a while since you last saw her. Jenny has lost 5kg in weight. Her diabetes control has also slipped a bit – HbA1c is now 8.2, up from 7.5, 6 months ago.



Photo by RDNE Stock project: Pexels, Royalty free.

## Case Study - Jenny

Two years ago, the memory clinic diagnosed her with MCI (MMSE 28). She has managed OK up to now with support from her daughter, Cheryl. Cheryl takes time off work today to attend with Jenny. She is worried that Jenny is not eating well and forgetting her medications. She reports Jenny has been short-tempered and teary lately. Jenny is socially isolated. She was attending church and participating in a weekly 'walk and coffee' group but stopped about a month ago. Cheryl is busy and can't see her often.



Source Photo by Anna Shvets. Pexels. Royalty free

# Diabetes Management

Problem	Goal	How Are We Going to Get There	Who
Poorly managed diabetes	Diabetes assessment/ management monitoring	Physical examination/ investigations/ education/ medications Referral - Diabetes Nurse Educator	
Mild Cognitive Impairment	Reduce risk of further cognitive impairment	MCI education. Dementia risk reduction education and lifestyle changes Monitor cognitive status	
Weight loss	Support Jenny to prepare nutritious meals	Referrals - Occupational Therapy, Grocery and meal assistance	
Physical inactivity	Jenny to walk most days of the week	Walking buddy (formal/ informal)	
Social isolation	Jenny to attend Church weekly	Jenny to talk with her best friend about her memory worries about forgetting names. Accompany her to Church	
Medication management	Jenny to take medications as prescribed	Memory aids. Deprescribing Referrals Home Medication Review, Occupational Therapist	
Emotional/ mental health	Jenny to engage in enjoyable activities. Optimise independence.	Mental health assessment Support social interaction	

# Next Steps

Involve Daughter (with Jenny's consent)

Collateral history

Support person health and well-being

Future Planning

Advance Care Directives/ Enduring Powers of Attorney

Consultations

Case conference

75+ Health assessment to do holistic functional assessment and cognitive assessment

Schedule regular care plans and reviews

Refer to MAC for Home Care Package (care coordination and funds for formal supports to remain living in community as long as possible)



# Finding Local Formal and Informal Support Networks

- Dementia Australia and Carer Gateway - local carer support groups.
- Primary Health Network (PHN) *healthpathways* - local referral pathways
- Servicefinder – find local health services and practitioners
- Community Connectors – check your local Council Ageing Department for a Community Connector. Their role is to help people connect with local service options.
- Care Finders – located within My Aged Care. Assists people without supports to access aged care support services.
- Local Neighbourhood Houses, Community Health Centres and libraries, local paper, your patients and nurse networks.



# Supporting Self-Care



Image by pikisuperstar on Freepik

# Take Away Messages

There is no cure for dementia, but a lot can be done to support both people living with dementia and those who care for them

Primary care nurse has an essential role supporting patients by

- Promoting brain health
- Identifying cognitive change
- Assessing the impact of change on function
- Adapting routine care to better meet patient/ client needs
- Communicating concerns to the GP

# A Closing Thought

Now you have this information what can you do differently in your practice to improve the care you provide to people living with cognitive change and their carer(s)?

# Resources

Nurse resource for adapting care for Person Living with Dementia - [Dementia Pathways Tool - nurse and care planning](#)

General dementia resources - [Forward with Dementia](#)

[Dementia Australia - Help Sheets](#), Education programs, Support groups, Counselling

[The Dementia Guide - patient resource](#) (good patient resource, can order hard copy)

MCI - [About mild cognitive impairment \(Dementia Australia resource\)](#)

Risk reduction - [Cogdrisk assessment tool, Cogdrisk risk reduction factsheets for general practitioners. Dementia Australia risk reduction resources, Healthy Brain Healthy Life booklet](#)

Carer education and support - [Carer Gateway](#), Counselling, help with respite, [Taking care of carers fact sheet](#)

Changed behaviour support - [Dementia Support Australia](#)

# Resources

## CaLD Dementia Resources for Families and Professionals

<https://www.dementia.org.au/resources/diversity/cald-dementia-resources-for-families-and-professionals>

## Aboriginal and Torres Strait Islander People Dementia Resources

<https://www.dementia.org.au/resources/for-aboriginal-and-torres-strait-islander-communities>

<https://healthinonet.ecu.edu.au/learn/health-topics/dementia/>

<https://dta.com.au/resources/lets-chat-dementia-webinar-series/>

Belfrage M, Hughson J, Douglas H & LoGiudice D, Best-practice guide to cognitive impairment and dementia care for Aboriginal and Torres Strait Islander people attending primary care, Version 1.1, Melbourne, Dementia Training Australia, 2020

**Advance Care Planning Australia** – Information on substitute decision-makers and advance care planning

**The Australian Dementia Network (ADNeT)** ADNeT has set up a Volunteer Register for persons who would like to participate in research into the causes, prevention, and treatment of dementia.

# Check This Out!

GP Dementia Resource Hub  
Easy Access to Dementia Courses,  
Resources and Links

Visit <https://dta.com.au/general-practitioners/>



Dementia in Practice Podcast  
Selection of Episodes

- Driving and dementia – Who's in the driver's seat?
- Sleep Matters
- Dementia at the end of life – A person-centred approach
- A carer's story: When dementia comes home





**Visit Site**

<https://dta.com.au/ndetsf>

**Learn** about the skills and knowledge you need to support a person living with dementia, their carer and family.

**Hear** what people living with dementia expect from your care.

**Find** resource information across key dementia topic areas.

**Undertake** the DTAp self assessment tool to identify your training needs.

**Create** your Learning Pathway of dementia specialist training.

# Dementia Training for Australia's Workforce

To find out more visit  
[dta.com.au](http://dta.com.au)

Dementia Training Australia is supported by funding from the Australian Government under the Dementia Training Program.





## Tasmanian HealthPathways

is a web-based information portal developed by Primary Health Tasmania. It is designed to help primary care clinicians plan local patient care through primary, community and secondary healthcare systems.

**tasmania.communityhealthpathways.org**

# Update- New personalised accounts

## Registering for the first time

Registering for and accessing HealthPathways for the first time - Individual HealthPathways accounts.



Scan to learn more

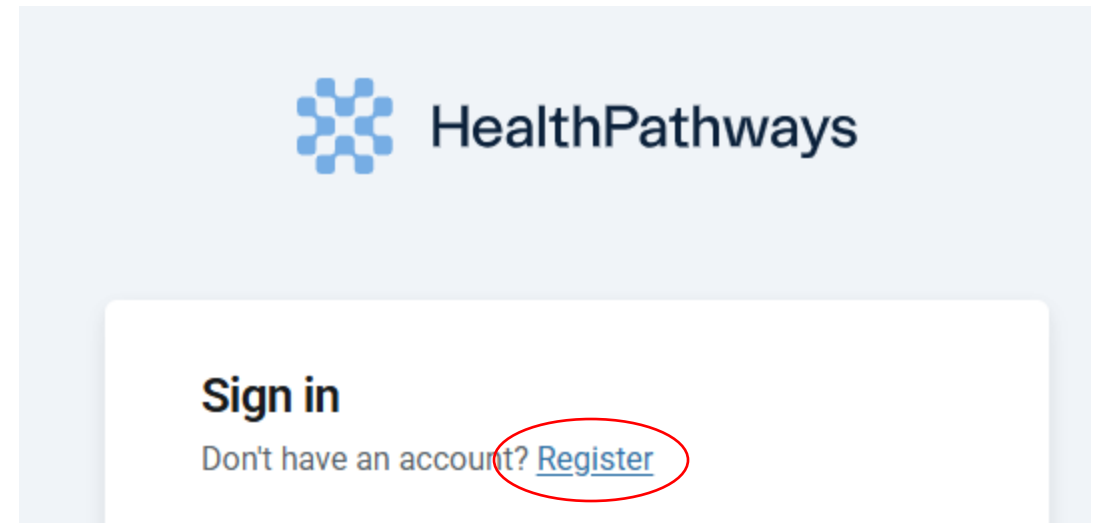


Have a question? Contact the Tasmanian HealthPathways team [HealthPathways@primaryhealthtas.com.au](mailto:HealthPathways@primaryhealthtas.com.au)

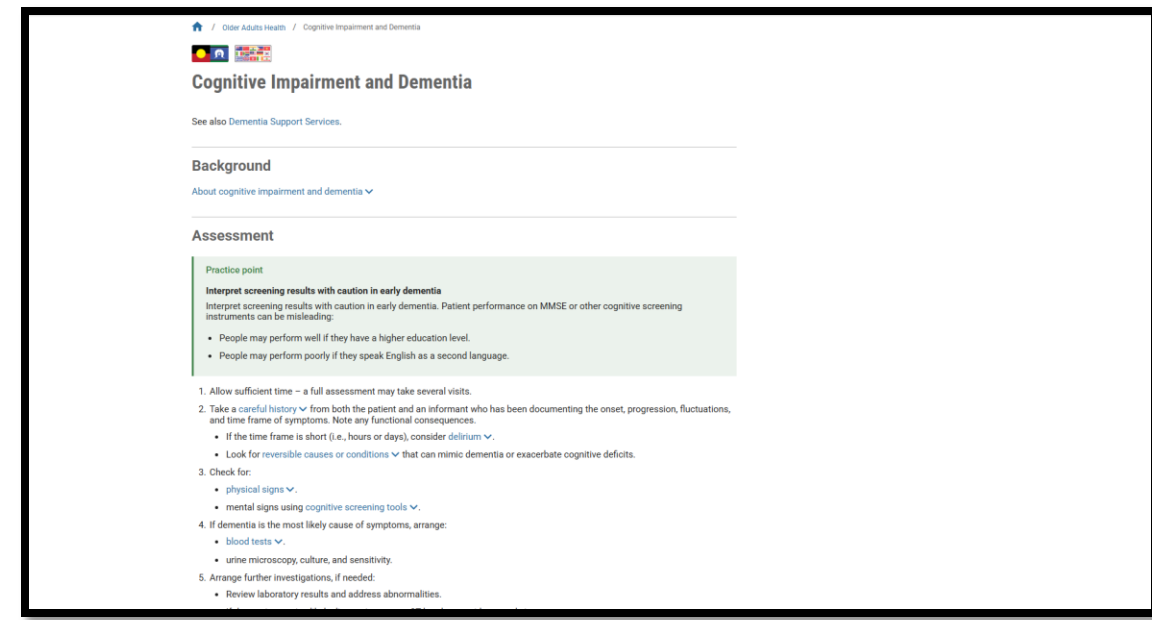
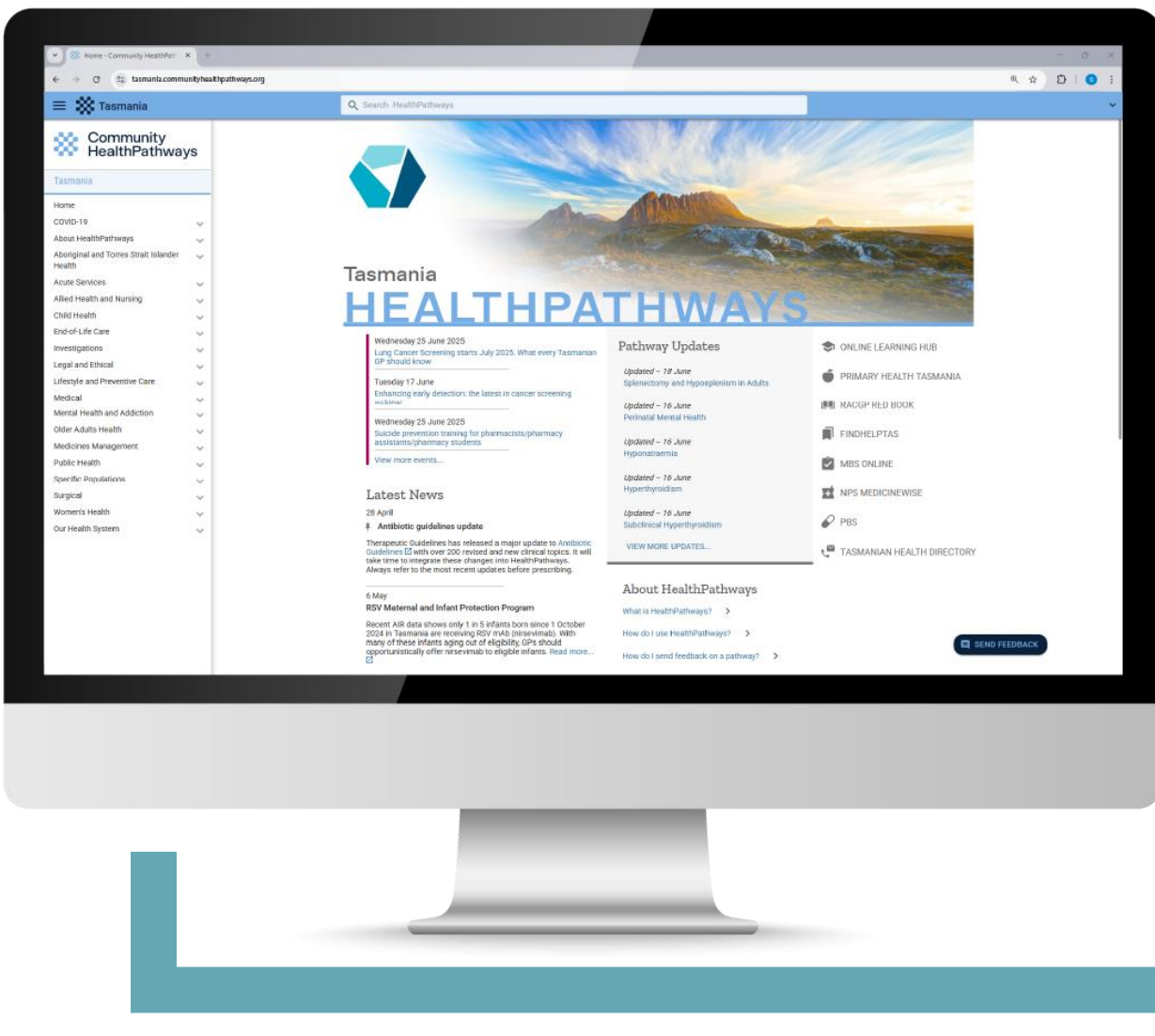
# Sign up for a personalised account today!



Scan to register  
now



**The generic login will cease on Tuesday 1<sup>st</sup> July**



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