Welcome to ICST

This material has been developed for you as a caregiver to a person with dementia. We want to introduce you to an evidence-based program that includes a format and activities to foster and enhance the connection you have with the person you care for.

These activities are designed for you to engage with the person you care for and each activity suggestion has been adapted to meet their needs. Each lesson includes suggested warm-up strategies and one activity. We encourage you to review the lesson completely to decide the activity suggestion that fits best.

These materials are a sample of the Individual Cognitive Stimulation Therapy (ICST) program, and when you find them comfortable to use, we encourage you to obtain the book, “Making a Difference: Individual Cognitive Stimulation Therapy; A Manual for Carers,” for additional information and activities.

Read on to learn more.
What is ICST?

Individual Cognitive Stimulation Therapy (ICST) is an intervention that caregivers can use to engage with individuals with mild to moderate dementia.

How can this help you?

ICST is a one-on-one, evidenced-based activity program written for caregivers and designed to provide opportunities for individuals to be involved in meaningful activities, keeping their mind active and engaged, and supporting the bond and interactions that take place between the caregiver and the person they care for. ICST is based on 13 key principles:

1. Mental stimulation
2. Developing new ideas, thoughts, and associations
3. Using orientation in a sensitive manner
4. Focusing on opinions, rather than facts (an important goal of ICST is focusing on the person’s strengths while avoiding direct questions of memory such as “can you remember…?”)
5. Using reminiscence as an aid to the here and now
6. Providing triggers to support memory
7. Stimulate language and communication
8. Stimulate everyday planning ability
9. Using a “person-centered” approach
10. Offering a choice of activities
11. Enjoyment and fun
12. Maximizing potential
13. Strengthening the relationship by spending quality time together
Which group of activities is right for you and the individual you care for?

This handout includes three groups of activities (A, B, and C) for individuals and their caregivers. You, the caregiver, can select the group that best fits the needs of the individual you care for, based on the individual’s current capabilities. You can adjust the level of activity (A, B, or C) depending on the person you care for, as their ability to participate can vary. Also, adjust the recommended timing for each activity as you see fit.

Group A-mild neurocognitive impairment
An individual with mild neurocognitive impairment may exhibit the following symptoms:
» Memory problems are slight but consistent
» Some difficulties with time and problem solving
» Daily life slightly impaired
» Increased forgetfulness
» Slight difficulty concentrating
» A decrease in work performance
» Getting lost more often
» Have difficulty finding the right words

At this stage, people close to the individual will begin to notice a cognitive decline.

Research suggests that a person with the symptoms above may function in this range for about seven years before being formally diagnosed with dementia (Dementia Care Central, 2016).
Group B—mild dementia
An individual with mild dementia may exhibit the following symptoms:
» Moderate memory loss, which interferes with daily activities
» Moderate difficulty solving problems
» Cannot function independently in community affairs
» Difficulty with daily activities and hobbies, especially complex ones (i.e. handling finances, planning parties, organizing and remembering a shopping list, and keeping up with household chores)
» Difficulty concentrating
» Decreased memory of recent events
» Difficulty managing finances or traveling alone to new locations
» Difficulty completing complex tasks efficiently or accurately
» May be in denial about their symptoms
» Withdrawing from family or friends, because socialization becomes difficult

Research suggests individuals demonstrating these symptoms are likely to be in this stage for about two years (Dementia Care Central, 2016).

Group C—moderate dementia
An individual with moderate dementia may exhibit the following symptoms:
» More profound memory loss, only retaining repetitively learned material
» Disoriented with respect to time and place
» Lacking good judgment and difficulty handling problems
» Little or no independent function at home
» Can only do simple chores
» Has few interests
» Has major memory deficiencies and needs some assistance to complete daily activities (dressing, bathing, preparing meals)
» May not remember their address or phone number and may not know the time or day or where they are

Research suggests individuals demonstrating these symptoms are likely to be in this stage for about 1.5 years (Dementia Care Central, 2016).

Individuals with symptoms that have progressed beyond those noted above are further along in the disease process and are not likely to benefit from the ICST program.
Sample lesson plan: My life history

Warm up:
» Orientation: Have a chat about the weather and the time of year/season. Have a conversation about recent events from the newspaper, internet, or television.
» Consider having refreshments (water or a small snack).
» Feel free to include gentle stretches, deep breathing activities, or soft music/favorite song to set the tone.

Materials needed:
» Old and recent family photographs

Group A (mild neuro cognitive impairment): Spend approximately 30 minutes
Create a family tree to record your family’s history. Add family members such as brothers and sisters, children, grandchildren, or great grandchildren to the tree. Add as many details as you like, such as: birthdates, years, places of birth, or double lines to show that family members are married. Follow the template below or create your own.

Group B (mild to moderate dementia): Spend approximately 25 minutes
Use the family/friends photographs and arrange them into a family tree and/or a timeline. Use the following suggestions to help guide the activity.
» Shared features or traits
» Interesting life stories of family members and friends
» Favorite family members and friends as a child
» How everybody’s lives differ with each generation

Group C (moderate dementia): Spend approximately 15 minutes
Use family/friend photos to create stories about the photographs and discuss the time/era of each. The stories do not need to be factual or real. Use the following questions to help guide the activity:
» Do these pictures remind you of anyone you know?
» What story does this picture tell?
» What advice do you have about how to maintain a good relationship?
» How do people change as they get older?


My Life (Life History) Example

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My Life (Life History) I | 1

Mother: Jane Smith
Father: George Smith
Brother: James Smith
Me: John Smith
My wife: Sarah Smith
Daughter: Janet Smith
Son: Howard Smith
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Sample lesson plan: Scenery

Warm up:
» Orientation: Have a chat about the weather and the time of year/season. Have a conversation about recent events from the newspaper, internet, or television.
» Consider having refreshments (water or a small snack).
» Feel free to include gentle stretches, deep breathing activities, or soft music/favorite song to set the tone.

Materials needed:
» A selection of photographs of landscapes and scenery. These could be personal photographs or they could be from a magazine, book, calendar, or found online.

Examine and discuss the landscapes and scenes.

Group A (mild): Spend approximately 30 minutes
Consider the following questions or statements to guide the experience:
» How are the scenes similar? How are they different?
» How does each scene make you feel? (for example: happy, calm, sad OR warm, cool, cold)
» Which landscape do you like best? Why do you like it best?
» Would you want to visit any of these places? What would you do there?
» Does this scene remind you of home? Or of a childhood vacation?
» Can you imagine what people are doing there?
» Will you please create a story about one of these places?
» Let’s put these scenes in order, based on your desire to visit them

Group B (mild to moderate): Spend approximately 25 minutes
Consider the following questions or statements to guide the experience:
» How are the scenes similar? How are they different?
» How does each scene make you feel? (for example: happy, calm, sad OR warm, cool, cold)
» Which place do you want to visit?
» Does this scene remind you of home? Or of a childhood vacation?

Group C (moderate): Spend approximately 15 minutes
Consider the following questions or statements to guide the experience:
» How are the scenes similar? How are they different?
» Does this scene make you feel happy or sad? Hot or cold?
» Would you like to go to a place like this?


Sample lesson plan: Let’s cook!

Warm up:
» Orientation: Have a chat about the weather and the time of year/season. Have a conversation about recent events from the newspaper, internet, or television.
» Consider having refreshments (water or a small snack).
» Feel free to include gentle stretches, deep breathing activities, or soft music/favorite song to set the tone.

Materials needed:
» Group A: Cookbook, recipe card box, computer; all materials and ingredients needed to make the recipe
» Group B: 2-3 pre-selected recipes from a cookbook, recipe card box, computer; all materials and ingredients needed to make the recipe
» Group C: 1 pre-selected recipe containing no more than 5 ingredients from a cookbook, recipe card box, computer; all materials and ingredients needed to make the recipe

Group A (mild): Approximately 30 minutes
» Together read through a cookbook, recipe card box, or do a computer search for a desired recipe.
» Select a recipe, make a plan to gather all needed materials and ingredients.
» Organize the ingredients and prepare the recipe together talking about favorite foods and the memories they conjure.
  • Feel free to use the “Things to think about” (below) to guide your discussion.

Group B (mild to moderate): Approximately 25 minutes
» Caregiver selects 2-3 recipes from a cookbook, recipe card box, or from a computer search.
 » Together, decide on a recipe.
 » Caregiver gathers and lays out all needed materials and ingredients to make the meal.
 » With support, the individual measures and combines the ingredients according to the recipe directions.
 » Talk about favorite foods and the memories they conjure.
  • Feel free to use the “Things to think about” (below) to guide your discussion.

Group C (moderate): Approximately 15 minutes
» Caregiver pre-selects recipe from a cookbook, recipe card box, or from a computer search. The selected recipe should not exceed 5 ingredients.
» Caregiver gathers all materials and measures all ingredients needed to prepare the recipe.
 » With support, the individual adds the ingredients according to the recipe directions.
 » Talk about favorite foods and the memories they conjure.

“Things to think about” to guide your discussion.
» Favorite breakfast foods, dinners, or desserts
» Are you a person who like sweets or more savory foods
 » A childhood memory of the smell of food cooking in the kitchen or at a favorite restaurant or relative’s house
 » Favorite foods at holiday times
 » Food you always wanted to try
 » Food you wished you never tried
 » Food you miss
Sample lesson plan: Toss it!

Warm up:
» Orientation: Have a chat about the weather and the time of year/season. Have a conversation about recent events from the newspaper, internet, or television.
» Consider having refreshments (water or a small snack).
» Feel free to include gentle stretches, deep breathing activities, or soft music/favorite song to set the tone.

Materials needed:
» Beach ball with red, blue, and yellow color sections
» Black sharpie marker

Directions:
Using the black sharpie, the caregiver labels each color block accordingly:
» Blue: Weather/season
» Red: Feelings
» Yellow: Place

Group A (mild): Approximately 30 minutes
With the individual standing or seated (depending on balance) toss the ball back and forth. Feel free to toss the ball slightly above the individual’s head but still in reach, or to either side of the individual but still in reach, or down low to the individual but still in reach. After 5 challenging tosses the ball is passed back to the caregiver, the individual then picks one of the colors on the beach ball. The caregiver then asks a question to the individual based on the color that is called out (see examples of questions on the next page).

Group B (mild to moderate): Approximately 25 minutes
With the individual seated, toss the ball back and forth. Toss the directly to the individual. After 5 challenging tosses the ball is passed back to the caregiver, the individual then picks one of the colors on the beach ball. The caregiver then asks a question to the individual based on the color that is called out (see examples of questions on the next page).

Group C (moderate): Approximately 15 minutes
With the individual seated, toss the ball back and forth. Toss the directly to the individual. After 8-10 challenging tosses the ball is passed back to the caregiver, the individual then picks one of the colors on the beach ball. The caregiver then asks a question to the individual based on the color that is called out (see examples of questions on the next page).
Examples of questions for each color:

Blue - questions about weather/seasons
» Tell me about a season that you enjoy?
» What comes to mind when you think about winter? Spring? Summer? Fall?
» Can you share a memory that specifically relates to a season?
» Have you ever been caught in bad weather, where were you and what happened?

Red - questions about feelings
» How are you feeling today?
» Have you ever laughed so hard your side ached?
» Can you share a time you felt proud of yourself?
» What experiences make you feel happy (silly, joyful, nervous, scared, etc.)?
» What makes you smile? What makes you laugh? What makes you cry?

Yellow - questions about places
» Is there a place you would love to visit?
» What places would you recommend visiting?
» Describe where you grew up?
» Can you describe some elements of your childhood home?
» What makes a place memorable for you?
» How do you travel (car, plane, train, boat, etc.) when going to faraway places?
What is dementia?

The term dementia is a broad term that describes a wide range of symptoms associated with a decline in memory or other thinking skills that is significant enough to decrease a person’s ability to carry out everyday activities such as working, participating in hobbies, completing household tasks, and even socializing.

The term dementia is now being called by the Diagnostic & Statistical Manual of Mental Disorders (DSM-V), a diagnosis of Major Neurocognitive Disorder, but the term dementia is still frequently used. According to the DSM-V Task Force on Neurocognitive Disorders, “the aim of removing the emphasis on the term dementia was an attempt to remove the stigma surrounding dementia and related conditions” (Dementia Australia, 2015, p.1).

Dementia as a Major Neurocognitive Disorder includes Alzheimer’s disease (accounts for 60-80 percent of cases), cerebrovascular disease (occurs after a stroke, is the second most common dementia type), frontotemporal lobar degeneration, Lewy Body disease, Huntington’s disease, traumatic brain injury, and HIV-associated dementia. (Dementia Australia, 2015, p.1). Recognizing that neurocognitive functions change with age, a new category was created in the DSM-V called Minor Neurocognitive Disorder, also referred to as Mild Cognitive Disorder or MCI. This new category will be for people that do not have severe dementia symptoms but may have a “decline from a previous level of performance” based on a persons’ self-report, or having a slight reduction from their previous score in a cognitive assessment (Dementia Australia, 2015, p.1).

How is dementia diagnosed?

Since each individual is unique, there is no one test to determine if someone has dementia. Therefore, doctors diagnose Alzheimer’s and other types of dementia in a number of different ways. Typically, physicians thoroughly review an individual’s medical history, conduct a physical examination and a cognitive assessment, and run a series of laboratory tests. Additionally, an interview with the individual and/or caregiver may illuminate recent changes in thinking or changes in day-to-day function. Gathering all of this information makes it easier for doctors to determine that a person has dementia with a high level of confidence. Referral to a specialist (i.e. neurologist, geriatric psychologist) is recommended to diagnose the specific type of dementia and to determine a plan of care. (Alzheimer’s Association, 2018).
* For additional activities and further suggestions to engage with an individual with mild to moderate dementia, refer to the following resource: Making a Difference: Individual Cognitive Stimulation Therapy; A Manual for Carers

References:


A.T. Still University

Established in 1892 by A.T. Still, DO, the founder of osteopathy, A.T. Still University (ATSU) began as the nation’s first college of osteopathic medicine and has evolved into a leading university of health sciences comprised of two colleges and four schools on two campuses and online. Today, ATSU offers master’s degrees across allied health disciplines and doctorates in osteopathic medicine, dental medicine, athletic training, audiology, health administration, health education, health sciences, occupational therapy, and physical therapy.

ATSU Center for Resilience in Aging

Purpose statement
The purpose of the ATSU Center for Resilience in Aging is to empower communities and individuals to age with resilience across the lifespan.