

<b>Unit Title:</b>	<b>Dementia Awareness</b>
Unit sector reference:	DEM 201
Level:	2
Credit value:	2
Guided learning hours:	17
Unit expiry date:	31/03/2015
Unit accreditation number:	J/601/2874

## Unit purpose and aim

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The aim of the unit is to enable learners to gain knowledge of what dementia is, the different forms of dementia and how others can have an impact on the individual with dementia.

<b>Learning Outcomes</b> The learner will:	<b>Assessment Criteria</b> The learner can:	<b>Exemplification</b>
1. Understand what dementia is	1.1 Explain what is meant by the term 'dementia' 1.2 Describe the key functions of the brain that are affected by dementia 1.3 Explain why depression, delirium and age related memory impairment may be mistaken for dementia	<p><b>Dementia:</b></p> <ul style="list-style-type: none"> <li>• Specific diseases eg Alzheimer's Disease, Parkinson's Disease</li> <li>• Cerebral Vascular eg stroke</li> <li>• A group of conditions/brain disorders</li> </ul> <p><b>Functions of:</b></p> <ul style="list-style-type: none"> <li>• Parietal Lobe - language, special awareness, recognition</li> <li>• Frontal Lobe - behaviour, movement, personality</li> <li>• Occipital Lobe - visual processing</li> <li>• Temporal Lobe - memory, speech, hearing</li> </ul> <p><b>Depression, delirium and age related memory loss:</b></p> <ul style="list-style-type: none"> <li>• Similarities eg signs and symptoms</li> <li>• Differences eg signs and symptoms</li> <li>• Side effects of medication</li> </ul>

<b>Learning Outcomes</b> The learner will:	<b>Assessment Criteria</b> The learner can:	<b>Exemplification</b>
2. Understand key features of the theoretical models of dementia	2.1 Outline the medical model of dementia  2.2 Outline the social model of dementia  2.3 Explain why dementia should be viewed as a disability	<b>Medical model:</b> <ul style="list-style-type: none"> <li>• Focus on the disease</li> <li>• Focus on diagnosis and treatment of illness</li> </ul> <b>Social Model:</b> <ul style="list-style-type: none"> <li>• Focus on individual's skills, capabilities and achievements retained</li> <li>• Person centred approach eg recognise individuality, enabling choice, looking at the person as a united whole</li> </ul> <b>Dementia as a disability:</b> <ul style="list-style-type: none"> <li>• Emotional impairment</li> <li>• Physical impairment</li> <li>• Impact on relationships</li> <li>• Impact on tasks of daily living</li> <li>• Impact on communication</li> <li>• Environmental factors</li> </ul>
3. Know the most common types of dementia and their causes	3.1 List the most common causes of dementia  3.2 Describe the likely signs and symptoms of the most common causes of dementia  3.3 Outline the risk factors for the most common causes of dementia  3.4 Identify prevalence rates for different types of dementia	<b>Common types of dementia:</b> <ul style="list-style-type: none"> <li>• Korsakoff's Syndrome</li> <li>• Vascular Dementia</li> <li>• Aids-related cognitive impairment</li> <li>• Creutzfeldt-Jacob Disease</li> <li>• Dementia with Lewy Bodies</li> <li>• Alzheimer's Disease</li> <li>• Progressive Supranuclear Palsy (PSP)</li> <li>• Fronto-Temporal Dementia</li> </ul> <b>Causes:</b> <ul style="list-style-type: none"> <li>• Alcohol/Substance Misuse</li> <li>• Stroke</li> <li>• Aids</li> <li>• Epileptic Seizures</li> <li>• Lewy Bodies</li> </ul> <b>Signs &amp; symptoms:</b> <ul style="list-style-type: none"> <li>• Mood changes</li> <li>• Personality changes</li> <li>• Hallucinations</li> </ul>

<b>Learning Outcomes</b> The learner will:	<b>Assessment Criteria</b> The learner can:	<b>Exemplification</b>
		<ul style="list-style-type: none"> <li>• Confusion</li> <li>• Disorientation in time and place</li> <li>• Memory loss</li> <li>• Communication difficulties</li> <li>• Repetitive conversation/questions</li> <li>• Difficulties with organising everyday life</li> <li>• Difficulties with perception</li> </ul> <p><b>Risk Factors:</b></p> <ul style="list-style-type: none"> <li>• Lifestyle choices eg diet, smoking, alcohol, lack of exercise</li> <li>• Age</li> <li>• Medical conditions such as multiple sclerosis, motor neurone disease, Parkinson’s disease and Huntingdon’s disease</li> <li>• High blood pressure</li> <li>• Gender</li> <li>• Genetics</li> </ul> <p><b>Prevalence rates</b> for different types of dementia</p>
4. Understand factors relating to an individual’s experience of dementia	4.1 Describe how different individuals may experience living with dementia depending on age, type of dementia, and level of ability and disability  4.2 Outline the impact that the attitudes and behaviours of <b>others</b> may have on an individual with dementia	<p><b>Others</b> may include:</p> <ul style="list-style-type: none"> <li>• Care workers</li> <li>• Colleagues</li> <li>• Managers</li> <li>• Social Worker</li> <li>• Occupational Therapist</li> <li>• GP</li> <li>• Speech &amp; Language Therapist</li> <li>• Physiotherapist</li> <li>• Pharmacist</li> <li>• Nurse</li> <li>• Psychologist</li> <li>• Admiral Nurses</li> <li>• Independent Mental Capacity Advocate</li> <li>• Community Psychiatric Nurse</li> <li>• Dementia Care Advisors</li> <li>• Advocate</li> <li>• Support groups</li> </ul>

<b>Learning Outcomes</b> The learner will:	<b>Assessment Criteria</b> The learner can:	<b>Exemplification</b>
		<p><b>Different Individuals:</b></p> <ul style="list-style-type: none"> <li>• Older Adults</li> <li>• Young Adults</li> <li>• Mental Health Needs</li> <li>• Learning Disability</li> <li>• Ethnic Backgrounds</li> </ul> <p><b>Positive and Negative Impact:</b></p> <ul style="list-style-type: none"> <li>• Respond encouragingly</li> <li>• Disempowerment</li> <li>• Imposition</li> <li>• Infantilisation</li> <li>• Intimidation</li> <li>• Withholding</li> <li>• Included</li> <li>• Aggressive</li> <li>• Valuing</li> <li>• Challenging Behaviour</li> <li>• Improved Communication</li> </ul>

## Assessment

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This unit needs to be assessed in line with the Skills for Care and Development QCF Assessment principles.

Candidates will have to produce a portfolio of evidence that meets the requirements of the learning outcomes and assessment criteria in full, taking account of the additional knowledge understanding and skills specified in the unit content.

The evidence can either be drawn from naturally occurring work based activities or alternatively centres can devise tasks/assignments or projects for candidates to complete to generate appropriate evidence. Any centre devised tasks/assignments or projects need to be cross-referenced to the appropriate learning outcomes and assessment criteria to ensure that full coverage can be achieved.

Further guidance on the assessment and evidence requirements and the delivery of the teaching of the content of this unit is available as part of this unit specification.

## Evidence requirements

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**Evidence could be presented using the following methods:**

- through employment, for example, through witness statements
- by means of case studies, based on workplace experience or fictitious
- as a written 'Guide' to help care workers, both professional and informal, who care for individuals who have dementia
- by giving a powerpoint presentation with speaker's notes to formal and informal care workers

- through producing leaflets or handouts to provide information to care workers
- through oral discussion in the workplace or in a learning environment with supporting evidence, for example the questions asked and an outline of the answer or taped evidence
- as posters, where appropriate, providing the depth of the command word in the Assessment Criteria has been met.
- role plays in the learning environment or the workplace which are supported by witness statements
- essay writing with evidence being based on theoretical knowledge and practical experience

This list is not exhaustive but the depth of the command words within the Assessment Criteria must be met.

#### **For their evidence candidates must:**

- Explain what is meant by the term 'dementia'
- Describe the key functions of the brain that are affected by dementia; relating them to the **four** main areas of the brain that are responsible for each function
- Explain why depression, delirium and age related memory impairment may be mistaken for dementia, giving at least **two** examples
- Outline the medical model of dementia
- Outline the social model of dementia
- Explain why dementia should be viewed as a disability, giving at least **two** examples
- List the **four** most common causes of dementia
- Describe the likely signs and symptoms of the **four** most common causes of dementia
- Outline **four** different risk factors for the most common causes of dementia
- Identify prevalence rates for **four** different types of dementia
- Describe how **two** different individuals may experience living with dementia depending on age, type of dementia, and level of ability and disability
- Outline the impact that the attitudes and behaviours of others may have on an individual with dementia, giving **two** positive and **two** negative examples

## **Guidance on assessment and evidence requirements**

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This section provides guidance for tutors on the types of assessment activities that can be used and evidence that can be produced that will ensure coverage of the learning outcomes and related assessment criteria.

Portfolios of work must be produced independently and centres must confirm to OCR that the evidence is the original work of the candidate. Recording documents are provided on the website for this purpose.

Wherever possible, candidates should be encouraged to put the theoretical knowledge into practice through real work or role play. Where role play is used this should reflect working practices in the health and social care sector.

**Examples of possible sources of evidence/activities/tasks/assignments are shown below but these are not exhaustive nor are the examples shown mandatory.**

## **A Training Session: Dementia Awareness**

You have been asked to prepare and present a training session on 'dementia awareness' for a group of care workers. You will need to prepare a presentation and resources.

**The presentation should include:**

- A definition of dementia
- Why depression, delirium and age related memory impairment may be mistaken for dementia and the associated impact of medication
- An outline of the four most common causes of dementia, the supporting prevalence rates and associated risk factors
- Signs and symptoms of dementia
- Information on why dementia should be viewed as a disability, looking at the medical and social models of dementia care

Remember to include speaker's notes or taped evidence of the talk. A witness statement will be required from the assessor/tutor who observed the presentation. The presentation should take at least 5 minutes.

**The resources that should be prepared for the session are:**

- A poster of the brain, showing areas of the brain that are affected by dementia, and the functions that each is responsible for
- A case study that:
  - Identifies the impact of dementia for at least two very different individuals
  - Identifies different types of dementia; discuss the impact that the particular type of dementia may have on the individual (eg Dementia with Lewy bodies often causes hallucinations, Alzheimer's disease is terminal)

You could use the case study for role play to look at attitudes and behaviours towards people with dementia.

You may wish to use the poem 'Look Closer' to assist with stimulating discussion about attitudes and behaviours (also available as a DVD – 'What do you See')

An example of part of a case study could be:

### **Case Study 1**

Jacintha is 91 and has dementia with Lewy Bodies. She remains fairly independent, although needs some assistance with bathing, due to her reduced mobility. She should use a walking stick when walking around the home, but sometimes forgets. Her husband has passed away, but her two daughters visit on a weekly basis, although they become frustrated when mum keeps repeating herself in conversation and spare no feelings when telling her that she has already said that!! (To be continued)

### **Case Study 2**

Patrick is 47 and has Alzheimer's disease. He has a young family including a wife of 15 years and two daughters aged 4 and 6. He has recently had to give up work due to the progression of his condition, although remains active, attending the local swimming pool every morning. He finds communicating a struggle as often can't find the right word in time when holding a conversation

with people. He has started to misplace objects around the house and blaming the family and care staff. (To be continued)

**OR**

## **B Research project on dementia**

You may have enough people to split into small groups for a research project. You could ask each small group to go and research a different requirement of this unit and produce a short presentation to deliver to the rest of the group.

### **Group 1**

The candidates should find out about depression, delirium and age related memory impairment, so they are then able to compare and contrast the similarities and differences and explain why these things may be mistaken for dementia.

The candidates will need to research about depression, delirium, age related memory impairment and dementia to enable them to draw on comparisons.

### **Group 2**

The candidates should find out about the most common causes of dementia. They need to look at the four most common causes of dementia. Their presentation should also include signs, symptoms and prevalence rates.

### **Group 3**

The candidates should find out about the risk factors associated with dementia and include in their presentation steps to take to reduce the risk of getting dementia.

**Whatever the candidate's choice of evidence collection, they must ensure that it covers all the requirements set out in the 'Evidence Required' section of the unit specification.**

## **Guidance on delivery**

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OCR does not stipulate the mode of delivery for the teaching of the content of this unit. Centres are free to deliver this unit using any mode of delivery that meets the needs of their candidates.

Centres should consider the candidates' complete learning experience when designing learning programmes.

It is anticipated that there will be some formal teaching and input to develop fully the knowledge and understanding identified in the specification.

For AC1.1 candidates will need to understand the term 'syndrome' in order to understand what is meant by the term 'dementia'.

AC2.3 looks at dementia as a disability. This refers to the impact that dementia has on an individual's daily living and the difficulties that they experience as a result of the dementia.

When candidates are working on LO3, they need to list the four most common causes of dementia and the signs and symptoms, risk factors and prevalence rates for at least those four. If candidates are unsure where to go for this information, the Alzheimer's Society's website would make a good starting point.

The list of signs and symptoms listed for AC3.2 is not exhaustive. Many are self-explanatory such as hallucinations and mood changes. However, difficulties with organising everyday life could cover things such as normal routines – getting the children ready for school, undertaking the household chores, but could also be problems with sequencing on a finer level such as dressing in appropriate clothing, in an appropriate order or making a drink appropriately.

With LO4, candidates need to demonstrate their breadth of knowledge by looking at two different types of people, eg a young person, maybe around 45 with Alzheimer's or Parkinson's Disease and an older adult with dementia with Lewy bodies, as these individuals will both have very different lifestyles, family and social implications, and considerations. Candidates should also consider the impact of ethnicity or if the individual has a learning difficulty. If the candidates struggle for a starting point, there are two case studies in the 'guidance on assessment and evidence requirements' section of this document.

You may wish to consider someone coming to give a talk – if you get in touch with local dementia support groups, they will be able to put you in contact with someone; either an expert in the field, a carer who could give their insight or an individual with dementia to talk about their experiences. When arranging a speaker, you need to consider the assessment criteria. To ensure that the talk maintains relevance to the qualification, you may wish to pre-prepare questions or ask the learners to do so.

## National occupational standards (NOS) mapping/signposting

This unit has been developed by Skills for Care and Development in Partnership with Awarding Organisations. It provides a key progression route between education and employment (or further study/training leading to employment). It is directly relevant to the needs of employers and relates to national occupational standards developed by Skills for Care and Development.

NOS can viewed on the relevant Sector Skills Council's website or the Occupational standards directory at [www.ukstandards.co.uk](http://www.ukstandards.co.uk).

## Functional skills signposting

This section indicates where candidates may have an opportunity to develop their functional skills.

Functional Skills standards can be viewed at <http://www.qcda.gov.uk/15565.aspx>

Functional Skills Standards					
English		Mathematics		ICT	
Speaking and Listening		Representing		Use ICT systems	✓
Reading	✓	Analysing		Find and select information	✓
Writing	✓	Interpreting		Develop, present and communicate information	✓

## Resources

This section contains details of suggested resource material that will support learning for example:

### Books

Adams, T (ed) (2008) *'Dementia Care Nursing'* Palgrave Macmillan. Basingstoke

Adams, T and Manthorpe, J (eds) (2003) *'Dementia Care'* Arnold. London

Benson, S (ed) (2002) Fourth Edition *'The Care Assistants Guide to Working with People with Dementia'* Hawker Publications. London

Cantley, C (ed) (2001) *'A Handbook of Dementia Care'* Open University Press. Buckingham



Kitwood, T. (1997) *'Dementia Reconsidered: The Person Comes First'* Open University Press. Buckingham

## Websites

Alzheimer's Society - <http://www.alzheimers.org.uk/site/index.php>

Alzheimer's Society is a membership organisation, which works to improve the quality of life of people affected by dementia in England, Wales and Northern Ireland. It offers a number of factsheets about dementia and an online magazine

Dementia Web - <http://www.dementiaweb.org.uk/index.php>  
Information and factsheets for individuals, carers and professionals

Department of Health - <http://www.dh.gov.uk/en/index.htm>  
Provides information on the dementia strategy

Healthtalkonline.org - <http://www.healthtalkonline.org/>  
Information and case studies on dementia

Open University - <http://www.open.ac.uk/inclusiveteaching/pages/understanding-and-awareness/models-of-disability.php>  
Details the models of disability

Mental Health Foundation – [www.mentalhealth.org.uk](http://www.mentalhealth.org.uk)

Social Care Institute for Excellence - <http://www.scie.org.uk/>  
Provides information, training resources and short video clips for training sessions

## DVDs

Amanda Waring (2005) What do you see?

Amanda Waring (2009) Home

Sara Kestleman & Natalie Press (2006) Ex Memoria

## Organisations

### Alzheimer's Society

Devon House  
58 St Katharine's Way  
London  
E1W 1LB  
Email: [enquiries@alzheimers.org.uk](mailto:enquiries@alzheimers.org.uk)

### Carers UK

20 Great Dover Street  
London  
SE1 4LX  
Email: [info@carers.org.uk](mailto:info@carers.org.uk)

## Additional information

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For further information regarding administration for this qualification, please refer to the OCR document *'Administrative Guide for Vocational Qualifications'* (A850).

This unit is a shared unit. It is located within the subject/sector classification system 01.3 Health and Social Care.