

Cognitive Impairment Intervention Protocol (CIIP) for a Person with Cognitive Impairment

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TASK AND DAILY ROUTINES

INTRODUCTION AND INSTRUCTIONS

INTRODUCTION

This Cognitive Impairment Intervention Protocol (CIIP) is designed to be used with the Cognitive Impairment Assessment Protocol (CIAP). The CIIP gives a list of possible interventions for each response on the CIAP that suggests the structure and timing of tasks and daily routines need to more closely accommodate the abilities, needs, and desires of the person with cognitive impairment.

The four parts of the CIIP and CIAP, and the factors they address are: Cognition of the Person, Environment, Caregiver Interactions, and Task and Daily Routines. This part of the CIIP relates to the task and daily routines. Each part of the CIIP has its own introduction and instructions.

This part of the CIIP relates to the task and daily routines. Use the CIIP Task and Daily Routines and the CIAP Task and Daily Routines together.

The Task and Daily Routines CIAP is composed of two documents with the same questions in each document:

1. Yes/No Response Sheet
2. Four Point Scale Response Sheet

There is information in each of the CIAP Task and Daily Routines documents that will help you understand and use the Task and Daily Routines CIIP. All of the questions in the CIAP are included verbatim in the CIIP.

An important asset of both the CIAP and the CIIP is their ability to individualize assessment and intervention to a particular person with cognitive impairment at a particular time. Because the abilities and desires of a person with cognitive impairment will be different from every other person with cognitive impairment, and might fluctuate and change over time, it is important to assess frequently and to frequently modify interventions to adapt to the changes. As a person changes, the task must change.

The brain has more difficulty figuring out what to do in the absence of enough or the right kind of adaptation of a task or daily schedule, or when a task or daily schedule is

unfamiliar. A person may feel overwhelmed when faced with a task and not know how to begin. Organizing the task steps and task objects may be crucial to enabling a person to perform the task. Often the cognitive impairment of a person becomes increasingly severe over time due to changes in the brain. As this person changes, discreet changes must be made to the task, while still preserving the familiarity and predictability of the task steps, objects, and timing as much as possible.

The goal of this Task and Daily Routines CIIP is to suggest ways to structure a task and its timing to foster competence and comfort for a particular person with cognitive impairment by: drawing on the strengths and abilities of this person, making task performance and participation easier for this person, compensating for her/his specific impairments, stimulating this person to grow beyond her/his abilities, and most of all, helping this person feel pleasure and contentment.

In general, task and daily routines that are structured to support a person:

1. Help a person with cognitive impairment to feel comfortable and be safe.
2. Stimulate a person to have energy and a desire to do something.
3. Tell this person what is happening and will happen, and provide options of what to do and how to participate.
4. Help this person save energy for other pleasurable or difficult tasks by making the performance of this task as easy and relaxing as possible.
5. Help this person feel competent, independent, respected, and engaged.
6. Support only as much as this person needs or wants; not too much or too little.

At all times the task's steps, objects, goals, and timing should be chosen and organized in a way that help this person relax and feel comfortable and competent. The predictability of a task and its timing, a focus on this person and her/his feelings more than on the successful performance of the task, and the discernment and accommodation of this person's goals for the task are all particularly important.

The CIAP questions will help you assess the tasks and daily routines to see if they are supportive of a particular person at a specific time. Your responses to the questions provide a profile of strengths and weaknesses regarding the effectiveness of the organization of this person's tasks and daily routines at this time.

The list of CIIP intervention ideas that accompany each CIAP question offers you possible strategies to improve the effectiveness of the tasks and daily routines performed by and with this person.

INSTRUCTIONS

1. Complete the Task and Daily Routines CIAP Yes/No Response Sheet or the Four Point Scale Response Sheet by following the CIAP instructions.

2. For each of your responses to the questions in the CIAP that is a "No" or a "1" or "2" find the corresponding question in the CIIP. All of the questions in the CIAP are included verbatim in the CIIP.
3. Study the intervention ideas listed in the CIIP for each of the questions identified in step #2 above. Choose interventions to try that are appropriate for this person and her/his circumstances.
4. Evaluate the effectiveness of the implementation of the interventions you've chosen by completing the Task and Daily Routines CIAP again.
5. Do steps #1-4 periodically or whenever you recognize a change needs to be made. It is often helpful to go through these steps with other people, sometimes including the person with the cognitive impairment.

Cognitive Impairment Intervention Protocol (CIIP) for Task and Daily Routines of a Person with Cognitive Impairment

I. TASK STEPS

Look for ways to ensure the task steps are not:

- Too many
- Too complex
- Too unfamiliar
- Too abstract

A. Does the caregiver break the task down into steps?

1. Think of each task as a series of task steps. For example, to put on a shirt, one must see the shirt, reach for the shirt, pick up the shirt, find the entrance to a sleeve, put the correct arm into the sleeve, pull the sleeve to the shoulder, find the other sleeve, put the free arm into the sleeve, pull the shirt over the shoulders, and fasten each button.
2. Make each task step small enough for this person to successfully perform at this time.
3. Write each task step down to help you remember.
4. Make sure each task step is completed before initiating the next task step.
5. Change the task steps as the person changes over time.

B. Does the caregiver perform, adapt, or assist with steps that are difficult for this person, so this person feels competent and comfortable, and can perform as many task steps as possible?

1. Encourage this person to perform as many of the task steps as possible, while still feeling comfortable. Help her/him feel as successful, independent, and competent as possible.
2. Avoid encouraging her/him to perform more task steps than she/he is comfortable with. Note her/his preference and comfort as well as her/his ability, to determine when to provide assistance.
3. Remind yourself that this person can likely perform at least one small task step, for example, seeing the shirt or putting an arm into a sleeve that is held for her/him.
4. Discern which task steps are too difficult for this person to perform independently and comfortably.
5. Assist this person with each difficult task step. Examples of assistance might include reminding the person with words, a gesture, or a touch; orienting the object, such as the shirt; or guiding her/his arm or hand to the appropriate position.
6. Avoid helping with a task step more than is necessary, unless she/he appears to prefer assistance.
7. When help is necessary, provide the assistance discreetly to avoid embarrassing this person. Avoid drawing attention to your assistance. Help her/him feel competent and successful.

8. If a task step is too difficult, adapt the task to this person's ability and preference. Examples of adaptation include: using a shirt that clearly contrasts with the surface it is lying on; reducing the number of buttons to fasten; increasing the size of the buttons; encouraging this person to put both hands into the sleeves in front of her/him, then reaching both arms up while the caregiver pulls the shirt down over the head (rather than reaching behind her/himself to find the second sleeve with the second hand).
9. When a task step cannot be adapted enough to ensure successful and independent performance, then do the task step yourself. For example, pick up the shirt and slip the sleeve over her/his hand and encourage her/him to pull the shirt up to her/his shoulder.
10. When a task step is too difficult, encourage her/him to perform the task step while you are performing it, so that she/he feels as though she/he is doing the task step or at least participating in the task. For example, give her/him a wash cloth to use while you wash her/him, even if she/he doesn't seem to use the wash cloth successfully.

C. Is the pace of the steps adapted to this person?

1. Help this person perform each task step without interruption between steps. Avoid unnecessary pauses.
2. Watch this person to discern the proper pace at this time.
3. Slow the pace when she/he shows evidence of anxiety, confusion, or distress.
4. Avoid a pace that is so slow this person becomes uncertain which task step she/he is trying to perform.

D. If necessary, are task steps spread out over time, such as washing her/his upper body in the morning and her/his lower body later in the day?

1. Pay attention to the amount of time, focus, and energy this person is comfortable devoting to this task.
2. Perform the task steps at two or more times, if this helps her/him feel more comfortable. For example, eat some of the breakfast in bed and the remainder later in the morning.

E. Are complex task steps simplified, such as this person washing one arm and the caregiver washing the other arm?

1. Remind yourself that a high number and variety of task steps will likely make a task more complex for this person.
2. When a task is too complex, decrease the number of task steps by performing some of the steps yourself. For example, this person might remove dishes from the counter, put them in the dish water, wash them and put them into the rinse water, while you rinse them, put them in the drying rack, dry them, and put them away in the cupboard.
3. Eliminate task steps that are not necessary, when a task is too complex. For example, allow the dishes to drip dry, or skip the make-up on some days.
4. Simplify a task by decreasing the variety of task steps. For example, encourage this person to insert 20 folded letters into 20 envelopes, rather than to fold 10 letters and then insert them into 10 envelopes.
5. Remind yourself to simplify the task without making the task seem childlike.

F. Are the task steps familiar to this person, such as taking a bath rather than a shower?

1. Make the task steps as similar as possible to the way this person did them throughout her/his adult life. For example, if she/he put a sock and shoe on one foot before putting a sock on the other foot, encourage her/him to do the same now. If she/he took a bath rather than shower, encourage her/him to take a bath.
2. Avoid adding task steps that reflect a cultural bias that is not shared by this person, such as saying grace before a meal.

G. Are the task steps concrete enough, such as showing this person pants and blouse rather than simply asking her/him to get dressed?

1. Make the task steps as concrete as necessary. For example, encourage her/him to sort playing cards according to suit or color, rather than to play a game of solitaire or bridge.
2. Encourage this person to perform the concrete steps of a task, and you perform the more abstract ones. For example, while baking a cake, you might measure the flour in a measuring cup, and she/he might pour the flour into a bowl and mix it.
3. If you are unable to perform an abstract task step that is too difficult for this person, then eliminate it. For example, eliminate the gargling step of the teeth brushing task.

Cognitive Impairment Intervention Protocol (CIIP) for Task and Daily Routines of a Person with Cognitive Impairment

II. MODIFICATION OF STEPS

Look for ways to modify task steps:

- To make them less difficult for this person
- To accommodate changes over time in this person's cognitive functioning resulting in changes in needs or preferences

A. Does the order of the task steps meet this person's needs and preferences? For example, does washing this person's feet first help her/him get used to the water or match the way she/he used to wash?

1. Watch for the best order of the task steps for this person; then use the same order consistently until her/his needs or preferences change.
2. Use the order of task steps that this person has used throughout her/his adult life, such as putting socks on before the pants. Change this order only when necessary.
3. Modify the order of the task steps as this person's needs and preferences change over time. Respond immediately to this person's changing needs and preferences.
4. Modify the order of the task steps as this person's needs and preferences change during a task. Respond immediately to this person's changing needs and preferences.

B. Are particular needs or preferences met by modifying the way a task is done? For example, is modesty or temperature sensitivity addressed by covering this person so that a minimum of this person's body is exposed during dressing and bathing?

1. Be alert to this person's needs or preferences at this moment. Note needs and preferences that are physical (such as feeling cold or in pain), emotional (such as modesty or vulnerability when all clothes are removed), sensory (such as being able to hear the caregiver over the running water), and cognitive (such as not being able to understand why she/he is removing clothes when the caregiver isn't).
2. Watch this person's face and body and listen to her/his words and vocalizations to discern whether the current way of doing the task feels comfortable.
3. Respond immediately to evidence of discomfort by pausing to reassure or explain or by modifying the way the task is done. For example, if this person is distressed when her/his face is washed, apologize and reassure, then start washing her/his hands or arms instead.

C. Are physiological, emotional, and cognitive changes accommodated, such as a towel draped over this person, so the spray from the shower nozzle doesn't touch her/his skin directly?

1. Remind yourself to assess changes in all aspects of this person, including her/his physiological, emotional, and cognitive status.
2. Assess regularly so that any changes are noted and accommodated immediately. For example, be alert to whether at this moment this person feels a touch to the arm like a hit, or experiences a soft water spray like pellets or needles in the arm. Immediately cover the shower nozzle with a washcloth to diffuse the spray, or cover her/his arm with a towel and spray through the draped towel.
3. When assessing physiological status, consider this person's physical abilities, sensory and motor functions, medical status, and physical stamina. Consider physiological status in general and at this particular time. Remind yourself that physical abilities and needs may fluctuate from moment to moment.
4. Modify task steps to accommodate changes in physical abilities and needs. For example, encourage sitting in the shower when balance is uncertain; or when pain is present, move a joint more slowly and gently. Start the shower before she/he enters the room, so the room is warm from the beginning.
5. When assessing emotional status, consider her/his emotions in general, at this particular time, and about this particular task. Remind yourself that her/his emotions may change rapidly from moment to moment.
6. Modify task steps to accommodate changes in emotions. For example, if this person is very distressed about taking a shower or bath, make the shower or bath more appealing, even luxurious. Create a relaxing spa-like atmosphere with a warm, colorful, and beautiful décor; or offer food or sweets to eat during the shower, such as pie and ice cream in the tub or chocolates in the shower.
7. Add task steps to help distract her/his attention during a distressing task. For example, offer food or converse about this person's family.
8. When assessing this person's cognitive status, consider all cognitive functions and needs. For example, consider her/his brain's ability to recognize sensory information, such as the ability to recognize objects and where they are in space or to interpret the temperature of water. Assess, for example, the ability to interpret events, switch gears, remember information, and know how to perform tasks.
9. Assess this person's cognitive abilities and needs in general and at this particular time. Remind yourself that cognitive abilities and needs often fluctuate from moment to moment.
10. Modify task steps to accommodate changes in cognitive abilities and needs. For example, help this person understand the task and feel more involved and in control, by encouraging her/him to hold and use a task object, such as a comb, while the caregiver uses a second similar task object to perform the task. If water poured on this person's head is distressing, wash and rinse her/his hair with a damp washcloth instead.

D. Is the location of each task step adapted to this person, such as washing her/his hair in the bedroom with a wet washcloth rather than in the shower?

1. Perform a task and each task step in the location this person has performed the task throughout her/his adult life. For example, if she/he always brushed her/his hair in the bathroom, then continue to brush her/his hair in the bathroom rather than the bedroom.
2. Adapt the location and environment of a task to increase the chance of success and to help this her/him understand the task steps and feel comfortable. Avoid confusion, embarrassment, or anxiety by thinking about the best place to do each task step. For example, if the bath or shower room seems frightening or overwhelming, do some of the task steps in another room: shower in the bathroom but wash hair in the bedroom with a damp washcloth.
3. Keep the location of task steps consistent over time, so that the location and environment can act as cues to the intent of the task steps. For example, this person may dress in the morning on one side of the room and undress at night on the other side.
4. When a task step, such as taking off clothes, creates anxiety, stay in the same location to perform task steps that will "fix" the tasks steps that created the anxiety, thus making it clear to this person that the problem has been resolved. For example, stay in the same location when taking clothes off and putting other clothes on, whether she/he is about to bathe or dress, so that for bathing, take clothes off and put others on afterwards in the bathroom. Moving from one room to another without clothes or wrapped in a robe or blanket (such as from the bedroom to the bathroom) might be embarrassing or provoke anxiety.

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III. MODIFICATION OF OBJECTS

Look for ways to:

- Adapt objects used during the task to fit this person's changing needs and preferences
- Accommodate this person's need for familiarity

A. Are objects modified to accommodate changes in this person's needs, such as zippers replaced with Velcro, foods difficult to chew or swallow cooked until soft, finger foods offered when using utensils or sitting is difficult?

5. Discern the best objects to use during a task with this person, and then use the same objects consistently until her/his needs or preferences change.
6. Use task objects this person has used throughout her/his adult life, such as bar soap rather than liquid soap or toothpaste in a tube rather than in a pump bottle. Change the objects only when the benefits of simplifying the objects (for example, replacing tube toothpaste with pump bottle toothpaste) outweigh the challenges of reduced familiarity.
7. Modify the objects used in the task as this person's needs and preferences change over time. Respond immediately to her/his changing needs and preferences.
8. Modify the objects used in the task as this person's needs and preferences change during a task, from moment to moment. Respond immediately to her/his changing needs and preferences.
9. Discern this person's needs or preferences at this moment. Note needs and preferences that are physical (such as trying to lift an object that is too heavy), emotional (such as using an object that is unfamiliar or frightening), sensory (such as not being able to see the object), and cognitive (such as not being able to recognize the object or locate it in space).
10. Modify objects to accommodate changes in cognitive abilities and needs. For example, help this person understand the task and feel involved and in control by encouraging her/him to hold and use a task object, such as a washcloth, while the caregiver uses a second similar task object to perform the task. When this person can no longer easily hold a washcloth, offer a washcloth that fits like a pocket over her/his hand.
11. Use an appropriate number of objects to accommodate changes in cognitive abilities and needs. As the ability to use multiple objects declines, decrease the number of objects used in the task. For example, this person might be able to fold three towels but not 10.
12. Watch this person's face and body and listen to her/his words and vocalizations for evidence that she/he is comfortable with the objects currently used during the task.
13. Respond immediately to evidence of discomfort by pausing to reassure or explain, or by changing the task object. For example, if this person is distressed when her/his face is washed with a washcloth, apologize and reassure, then start washing with your hands or a softer washcloth.

B. Do the modifications keep the objects as similar as possible to what this person is used to, such as easy-to-use bathtubs that still look normal, buttons changed to snaps rather than Velcro, or soft foods that look normal, rather than unrecognizable pureed food?

1. Use task objects this person has used throughout her/his adult life, such as bar soap rather than liquid soap or toothpaste in a tube rather than in a pump bottle. Change the objects only when the benefits of simplifying the objects (for example, replacing tube toothpaste with pump bottle toothpaste) outweigh the challenges of reduced familiarity.
2. When changing a task object becomes necessary, make the changes as minimal as possible. Address only the feature that makes the object difficult for this person to use. For example, if a white towel is hard for this person to see because it blends into the surfaces around it, change only the color of the towel so that it contrasts with the surfaces around it and leave the size, shape, and texture the same as it was.
3. When changing a task object becomes necessary, keep the object appearing and feeling as similar as possible to what this person is used to. For example, when a bathtub needs to be changed to allow easier access, keep it and the faucets looking normal, easily recognizable, and familiar.

C. Do modifications reduce the need for significant range of motion, such as replacing shirts pulled over the head with shirts with buttons?

1. Modify the task objects to accommodate changes in this person's physical abilities and needs, such as increased stiffness and pain on movement. When she/he has difficulty moving joints comfortably, modify or use clothing that requires little movement or twisting of joints and body parts. For instance, instead of sweatshirts that pull over the head and require arms to be extended, use cardigan sweaters that button down the front.
2. When this person has trouble reaching out for objects, modify the objects to avoid the need for reaching. For example, put longer pull strings on lamp light switches.

D. Are emerging anxieties or preferences accommodated, such as replacing a woman's slacks with a skirt when removing slacks becomes upsetting, or using dry shampoo to keep her/his hair from getting wet?

1. Modify the task objects to accommodate changes in emotions and preferences. For example, when this person's preferences regarding color, texture or taste in food changes, modify the color, texture, or taste of food offered.
2. Use task objects that don't require this person to do task steps she/he has difficulty with or would rather not do. For example, use clothes that require no ironing when this person can no longer iron safely and independently. Use ready made tomato sauces, rather than creating a sauce with raw tomatoes, when making spaghetti. Use clothing (like a skirt) that is easier to adjust or remove when using the toilet as incontinence becomes an issue.

E. Are changes in sensory or perceptual functions accommodated, such as covering the shower nozzle with a washcloth when skin sensitivity to the water spray makes the spray uncomfortable, painful, or frightening?

11. Assess this person's sensory and perceptual functions regularly so that any changes are noted and accommodated immediately. For example, be alert to whether, at this moment, a touch to the arm feels like a hit to this person or a soft water spray feels like pellets or needles in the arm. Immediately cover the shower nozzle with a washcloth to diffuse the spray, or cover her/his arm with a towel and spray through the draped towel.
12. Change the sensory modality required to use objects, when necessary. For example, when hearing becomes difficult, change the phone or door bell rings to visual light flashes to attract this person's attention.
13. When patterns on objects or on surrounding surfaces prevent this person from easily seeing or recognizing an object and its location, change the color, figures, or patterns of the object or the surrounding area. For example, avoid patterns on chairs and sofas, or on a table cloth that might obscure the dishes on the table. Especially avoid those patterns, like plaids or stripes, which appear to "move" when this person moves. Such "moving" patterns can cause nausea, dizziness, loss of balance, and confusion.

F. Are emotionally pleasing objects used to increase the appeal of the task, such as soft and colorful towels for drying, or eating ice cream during a bath or candy during a shower?

1. When assessing this person's emotional status, consider her/his emotions in general, at this particular time, and about this particular task. Remind yourself that her/his emotions may change rapidly from moment to moment.
2. Modify task objects to accommodate changes in emotions. For example, if this person is very distressed about taking a shower or bath, make the shower or bath more appealing, even luxurious. Create a relaxing spa-like atmosphere with a warm, colorful, and beautiful décor; or offer food or sweets to eat during the shower, such as pie and ice cream in the tub or chocolates in the shower.
3. Use objects that have an emotional attraction for this person because they are familiar or reminiscent of past experience. For example, use a familiar bedspread, favorite clothing, or photos of her/his family or childhood.
4. Add task objects to help distract this person's attention during a distressing task. For example, offer food or nice smelling creams or soft warm textured clothing to stroke over her/his arms when dressing.
5. When necessary, have several of certain items, so this person feels as though they are the same item. For example, when a shirt is a favorite, have several that look exactly the same.
6. When changing an object to accommodate physical or cognitive changes, ensure the emotional appeal of the object remains unchanged. For example, while modifying the height of a toilet seat, keep the toilet looking very similar to what this person has used throughout her/his adulthood, and keep it aesthetically pleasing by adding soft cloth coverings.

**Cognitive Impairment Intervention Protocol (CIIP) for
Task and Daily Routines of a Person with Cognitive Impairment
IV. TIMING**

Look for ways to accommodate this person's needs and preferences in:

- How the whole 24-hour day of this person is usually spent
- How similar this person's daily schedule is to the schedule she/he used to have throughout most of her/his adult life
- How appropriate the daily schedule is for this person now
- How the past 48 hours or longer have been going for this person
- What events or tasks usually precede this task

A. Is the daily time of routines as normal and familiar to this person as possible, so that the tasks are done at the time of day this person has done them throughout most of her/his adult life?

1. Find out the times of day this person performed all routine tasks. Ask people who knew her/him well.
2. Help this person schedule her/his day to perform the tasks the same time as she/he did throughout most of her/his adult life.

B. Is the daily time of routines appropriate for this person now, for example does a bath at midnight soothe her/him, while a morning bath is upsetting?

1. Adapt the time of routines to accommodate this person's needs and preferences now. Help her/him perform tasks when she/he is ready, even if it deviates from her/his past. For example, in spite of a life-long routine, if this person now seems anxious about bathing in the morning, see if she/he is less anxious bathing at night when she/he is awake and restless. Bathing might feel soothing and help her/him sleep more easily.
2. If conditions during the task are more challenging at the familiar time of day, choose another time when conditions are less challenging. Examples: Perform difficult tasks when there is less distraction, such as at night when there are fewer sounds. Attend a smaller weekday worship service, rather than a weekend service where the crowd is larger.

C. Is the time of each task the same every day?

1. Help this person choose the best time of day to perform each routine task.
2. Help this person perform each routine task at the same time every day, so the routine feels familiar and she/he expects it, even if she/he doesn't consciously know the time of the task.

D. Is the daily order of routines as normal and familiar to this person as possible, so that the tasks are done in the same order this person has done them throughout most of her/his adult life, for example, getting out of bed, washing, dressing, and eating breakfast?

1. Find out the order this person performed all routine tasks. Ask people who knew her/him well. Write the order of tasks down so you and other caregivers remember it. For example, get out of bed, look at the newspaper, eat breakfast, shower, dress, brush teeth.
2. Help this person schedule her/his day to perform the tasks in the same order as she/he did throughout most of her/his adult life.

E. Is the daily order of routines appropriate for this person now, for example eating breakfast in bed rather than dressing before breakfast?

1. Adapt the order of routine tasks to accommodate this person's needs and preferences now. Help this person perform tasks in the order she/he is most comfortable with, even if this order deviates from her/his past. For example, help her/him eat breakfast in bed, if she/he is now more comfortable with that.
2. If difficult tasks are too challenging to perform after easier tasks, due to a build up of fatigue or frustration, then help this person with the most difficult tasks before she/he does the easier tasks. For example, she/he may be able to bathe more easily if she/he does it before eating breakfast so she/he is less tired.
3. If this person needs to have more difficult tasks after easier tasks, so she can gradually prepare herself for the difficult task by taking time to focus, then adjust the order of the tasks to accommodate this need. For example, eating a leisurely breakfast before bathing may allow this person to gradually wake up and become more oriented to the day.

F. Is the order of routines the same each day?

1. Help this person choose the best order of daily routine tasks.
2. Help this person perform each routine task in the same order every day, so the routine feels familiar and she/he expects the next task, even if she/he doesn't consciously know the order of the tasks.

G. Is there a familiar and appropriate pace of daily routines so the logic of the sequence is obvious to this person? For example, is the time between getting dressed and eating breakfast the same length as she/he is used to throughout her/his adult life?

1. Find out the amount of time between routine tasks that this person was accustomed to throughout most of her/his adult life. For example, find out if she/he used to dress, then immediately eat breakfast without a pause. Ask people who knew her/him well.

2. Find out the amount of time this person used throughout most of her/his adult life to perform each routine task. For example, find out if she/he used to dress quickly, but eat breakfast slowly. Ask people who knew her/him well.
3. Help this person continue the same amount of time between routine tasks that she/he was accustomed to throughout most of her/his adult life.
4. Help this person continue to use the same amount of time during a routine task that she/he used throughout most of her/his adult life. For example, if she/he lingered over tea during breakfast, then continue that now.
5. Keep the amount of time between routine tasks the same every day. Establish a rhythm and avoid changing it or disregarding it, so this person can better predict what will come next.
6. Keep the amount of time used to perform each routine task the same every day.
7. As this person's needs and preferences change, change the time between tasks or during tasks, but only as little as possible, and only when necessary.

H. Have the past few hours before each task been typical and not upsetting?

1. Note how the past two or three hours were spent before beginning a task. If the hours were unusual, confusing, or upsetting to this person, then allow extra time to help her/him relax and to become comfortable with you before initiating a task.
2. Before initiating a task, help this person take time to transition or change focus from one task to another or from sitting still and relaxing to focusing on a task.

I. Is there enough time between tasks to allow for rest and recuperation?

1. Allow enough time between tasks for this person to rest and recuperate, especially after difficult tasks. For example, allow time to rest after bathing and before eating breakfast, when the bathing task is upsetting or difficult.
2. If it isn't possible to allow enough time to rest after a task, then change the order or time of routine tasks to allow for rest after each task that is difficult.
3. If performing all the tasks is too tiring or distressing, perform some of the tasks, or parts of a task later in the day, after she/he has rested and is more relaxed.
4. Adapt the pace, order, and performance of tasks to match this person's needs and preferences at this moment.

J. Is enough time allowed to complete the task successfully and comfortably?

1. Remind yourself that planning your time with this person and the multiple tasks to be performed will save time and frustration for her/him and for yourself.
2. Establish goals and priorities regarding this task. Consider this person's own goals first, then your goals. For example, during a shower or bath, this person may want to feel relaxed, pain free, and luxurious, while you simply want this person to be clean.
3. Plan your time and schedule of tasks to allow enough time to get the most important tasks and parts of task done, so that the goals of this person and yourself will most likely be met.

4. To reduce frustration or confusion that could increase the time needed for a task, plan for the most challenging tasks and task steps to occur when this person is best able to perform them. For example, plan to do the most difficult tasks when she/he is less fatigued or frustrated, or do the most appealing task steps first to entice her/him to begin the task and to be better able to understand and perform the more challenging task steps.
5. Allow enough time to approach this person leisurely and calmly to prepare her/him emotionally for the task.
6. Watch this person to discern her/his most comfortable pace while performing this task.
7. Note evidence of fatigue or anxiety during a task, and modify the pace of the task to reassure her/him or to help her/him rest and relax.
8. To reduce distraction that could increase the time required for a task, prepare for the task out of this person's sight and hearing. For example, collect and organize task items, such as washcloths and basins, before you enter her/his room. Arrange the task so this person sees and hears only those task steps in which she/he can directly participate.
9. Perform quickly, efficiently and out of this person's sight and hearing, the task steps that are not meaningful or helpful to this person.
10. When you are with this person, perform the task steps slowly enough for her/him to participate, to understand what you are doing, and to remain relaxed and comfortable.

K. Is the task performed as often as is appropriate?

1. Discern how often a task actually needs to be performed to meet this person's needs and preferences regarding comfort, health, and safety.
2. Examine your own cultural and other biases that may not agree with her/his expectations. For example, there are often generational and cultural differences regarding hygiene and the frequency of bathing. Discern how often it is necessary for this person to bathe to meet her/his own needs and preferences and not the preferences of someone else.
3. Identify those tasks that need to be increased as this person's needs and preferences change over time. For example, the need for planned exercise and range of motion of body parts may increase as this person's impairment increases.

Cognitive Impairment Intervention Protocol (CIIP) for Task and Daily Routines of a Person with Cognitive Impairment

V. CONSISTENCY

Look for ways to ensure that each time the task is performed, it is:

- With the same caregiver
- Done the same way
- At the same time of day
- In the same place

A. Is the same caregiver assisting each time the task is done?

1. Discern who the best caregiver is to assist with each task.
2. At all times, as much as possible, have the same caregiver help with a given task.
3. Have the same caregiver help even when the primary caregiver has time away from caregiving.
4. When an unfamiliar caregiver must help, provide information about the primary caregiver's routines, so this new caregiver can help perform the tasks in as familiar a way as possible.
5. As this person's needs and preferences change, change to a different caregiver if necessary.
6. When a caregiver is no longer the best caregiver to assist with a given task, then change to a different caregiver.

B. Is the caregiver helping with the task the same way each time?

1. Discern the best way to help this person with each task.
2. Perform a task with this person the same way each time. For example, wash the same part of the body first each time.
3. As this person's needs and preferences change, adapt the way you help with a task.
4. Adapt a task to this person's current desires and needs only as much as necessary, so you can keep the task as familiar as possible.
5. Make the task as predictable as possible to this person, even if this person doesn't seem to know or to be able to say what the task is.

C. Have the task steps become routine and predictable to this person?

1. Break the task down into steps appropriate for this person at this moment.
2. Perform the task steps in an order that meets this person's needs and preferences.
3. Perform the task steps in the same order each time the task is done.
4. Make the task as predictable as possible to this person, even if this person doesn't seem to know or to be able to say what the task is.
5. As this person's needs and preferences change, change the task steps, but only as much as is necessary.

D. Are the same task objects used each time?

1. Help this person choose task objects that are appropriate for her/him.
2. Use the same task objects each time the task is performed.
3. Have several objects that look exactly alike, so when one is lost there are other similar objects to replace it.
4. As this person's needs and preferences change, change the task objects, but only as much as is necessary.

E. Is the task done in the same order with other tasks each time?

3. Help this person choose the best order of daily routine tasks.
4. Help this person perform each routine task in the same order every day, so the routine feels familiar and she/he expects the next task, even if she/he doesn't consciously know the order of the tasks.
5. As this person's needs and preferences change, change the order of tasks, but only as much as is necessary.

F. Is the task done at the same time each day?

3. Help this person choose the best time of day to perform each routine task.
4. Help this person schedule her/his day to perform the tasks the same time every day.
5. As this person's needs and preferences change, change the time of the task when necessary. For example, this person may need to sleep in longer in the morning, or more difficult tasks may need to be spread out over the course of the day to reduce fatigue.
6. If conditions during the task become more challenging at the familiar time of day, choose another time when conditions are less challenging. Examples: Perform difficult tasks when there is less distraction, such as at night when there are fewer sounds. Attend a smaller weekday worship service, rather than a weekend service where the crowd is larger.

G. Is the task done at the same place each time, such as getting dressed in the morning on one side of the room and undressed at night on the other side?

1. Help this person choose a room or a place in the room to regularly perform each task.
2. Perform this task in the same room and same place in the room each time the task is performed. For example, help this person get dressed on one side of the room and undressed on the other side of the room.
3. As this person's needs and preferences change, change the location of the task, but only as much as is necessary.

Cognitive Impairment Intervention Protocol (CIIP) for Task and Daily Routines of a Person with Cognitive Impairment

VI. TASK GOALS

Look for ways to ensure that:

- This person receives what she/he wants and needs from this task
- The caregiver receives what she/he wants and needs from this task

A. Are this person's goals clearly identified, such as to feel safe, warm, relaxed, and comfortable?

1. Remind yourself that this person and her/his feelings are more important than the task you are helping her/him perform.
2. Remind yourself that this person's comfort is more important than her/his independent performance of a task step. Success and independence are important only if they help this person feel good. If she/he can do a task step, but is physically or emotionally uncomfortable doing it, then assist or perform the task step for her/him.
3. Discern this person's goals for this task, even when she/he doesn't state them or seem to know them.
4. Remind yourself that this person has goals, though sometimes they may be hard to discern.
5. Find out what goals she/he has had throughout most of her/his adult life. Ask people who knew them well what kind of person she/he seemed to want to be, or what characteristics were high priority for her/him when trying to be successful as a person, for example, accomplished, compassionate, admired, busy, elegant, and socially popular.
6. Imagine and write down how each half hour of a 24-hour day might have been spent and enjoyed if she/he did not have cognitive or physical impairment. Then write down how she/he spends each half hour of a typical 24-hour day now. Compare the two lists. Creatively explore how the caregiver can help this person live a 24-hour day the way she/he would if she/he could. Convert the desired 24-hour day to a set of goals this person might have.
7. Frequently examine this person's goals, needs, and preferences to recognize when they change.
8. Be creative when discerning what she/he might want or need.
9. Remind yourself that this person can make choices and express preferences even when very severely impaired.
10. When this person is unable to communicate goals, present options so she/he can reject them or indicate preferences. For example, if this person is nonverbal or unable to see or recognize objects, try putting a small taste of each option in her/his mouth and watch for her/his response to each option.
11. Frequently assess this person's ability to recognize and choose among options, and adapt your approach and presentation of options accordingly.
12. As this person becomes increasingly confused, and less able to understand multiple or abstract options, simplify how you present her/his options. For example, rather than asking, "Do you want eggs or oatmeal?" show her/him eggs and oatmeal to make the options more concrete and visible.

13. At all times, watch and listen to this person to see how she/he is reacting to what you are doing and saying during a task. Immediately change what you are doing or how you are doing it, when you see or hear negative reactions.

B. Are the caregiver's goals clearly identified, such as for this person to be clean?

1. Examine your own goals for this task as a caregiver.
2. Compare your caregiving goals with this person's goals.
3. Remind yourself that this person's goals must be considered first.
4. If caregiver goals are in conflict with this person's goals, creatively discern how to meet this person's goals and then how to meet your caregiving goals.
5. Examine your own feelings, for example anger or dislike, to see if you unintentionally have goals that are harmful to this person or are irrelevant to this task.
6. Recognize those goals that are intended to give the caregiver pleasure, such as going out for ice cream, reminiscing with this person, receiving affection from this person, getting a break from caregiving.
7. Find ways to meet the goals of the caregiver that also meet this person's goals. When there is a conflict, discern the importance of each of the goals. For example, if it is very important for the caregiver to have a break, arrange the task to meet the most important goals and to minimize the impact of not meeting other goals. If the caregiver's need for a break is in conflict with this person's need for a consistent caregiver, then provide a caregiver that is familiar to this person or is similar to the primary caregiver. Have the unfamiliar caregiver help perform the task in a way that is as similar to the primary caregiver's as possible.

C. Does the caregiver distinguish what is necessary from what is desired, such as cleaning a wound for health reasons versus washing to meet cultural norms?

1. Examine caregiver goals to discern how well they meet this person's needs and preferences.
2. Ask yourself how important it is to meet the caregiver goals. For example, if this person doesn't want to take a shower, ask yourself why you think she/he needs a shower. Consider other ways of meeting her/his goal to avoid a shower, and your goal of cleanliness, such as a sponge bath at the sink.
3. Examine this person's cultural norms and past habits to see if they differ from the caregiver's. Avoid imposing caregiver cultural expectations on this person, for example frequent showers, showers versus baths, speaking softly, or grace before meals.
4. Recognize the importance of meeting the caregiver's goals of pleasure. For example, if the caregiver wants to see evidence of this person's strengths or abilities to help cope with the caregiver's grief regarding this person's impairment, then look for ways to creatively provide an opportunity for this person's strengths to be exposed without overly challenging or frustrating her/him. For example, reminisce over old photographs rather than quizzing this person about individual names.

D. Will modifying caregiver expectations adequately meet the goals of both this person and the caregiver, such as bathing once a week rather than twice?

1. Adjust caregiver expectations to include the goals of this person. For example, serving soft cooked carrots so she/he can use fingers to eat, rather than insisting this person use a fork to eat, or accepting a blouse that clashes with a skirt rather than insisting this person change her blouse to match the skirt.
2. Prioritize the goals of both this person and the caregiver. Discern what is most important to accomplish with this task. For example, the goal of washing dishes to help this person feel like she/he is participating in a useful task is more important than the goal of cleaning the dishes. Later, the dishes can be put into the dishwasher if they are not clean enough.
3. At all times, watch and listen to this person to see how she/he is reacting to what you are doing and saying during a task. Immediately change what you are doing or how you are doing it, when you see or hear negative reactions.
4. Modify caregiver expectations as this person's needs and preferences change over time, day to day, and moment to moment.

E. Will skipping the task or doing an alternative adequately meet the goals of both this person and the caregiver, such as a bed bath rather than a shower?

1. Clarify the goals of both this person and the caregiver. Identify those goals that are most important to meet this person's needs and preferences.
2. Discern how necessary it is to perform a task that this person prefers to avoid. For example, if this person prefers to avoid showering or bathing, and the caregiver wants to ensure this person is clean, consider alternatives to the bath or shower, such as sponge baths at the sink, bed baths, and a gel that sanitizes the skin without water.
3. As this person becomes more impaired and needs and preferences change, examine the priorities of the goals of both this person and the caregiver. Eliminate unnecessary tasks that become too difficult, for example celebrating a holiday with the entire family in a family member's home. Celebrating quietly with only one person or not celebrating at all may be preferable to this person, though painful for the family.
4. Examine the necessity of each task as this person's needs and preferences change over time, day to day, and moment to moment.

F. Will doing only part of the task adequately meet the goals of both this person and the caregiver, such as washing only the lower half of this person's body?

1. Clarify the goals of both this person and the caregiver. Identify those goals that are most important to meet this person's needs and preferences.
2. Do only as much of the task as is necessary to accomplish the caregiver's goals to meet this person's needs, remembering she/he may not recognize this as desirable. For example, if this person prefers to avoid washing, identify parts of her/his body that must be cleaned every day and those parts that can be cleaned every few days. Focus on doing only as much of the task as is necessary to meet these goals.
3. Plan your time for the task before you approach her/him with a task to be performed. Allow enough time to get the most important parts of the task done so that the goals of both this person and the caregiver will most likely be met.
4. Examine the necessity of performing the entire task as this person's needs and preferences change over time, day to day, and moment to moment.

G. Will modifying the task adequately meet the goals of both this person and the caregiver, such as washing her/his hair with a damp washcloth rather than getting the hair dripping wet?

1. Clarify the goals of both this person and the caregiver. Identify those goals that are most important to meet this person's needs and preferences.
2. Modify the task to meet the goals of both this person and the caregiver. For example, folding the clothes of small children rather than of big adults, or folding dish towels rather than larger bath towels.
3. Modify each task as this person's needs and preferences change over time, day to day, and moment to moment.
4. At all times, watch and listen to this person to see how she/he is reacting to what you are doing and saying during a task. Immediately change what you are doing or how you are doing it, when you see or hear negative reactions.

H. Is enough time allowed for the task to meet the goals of both this person and the caregiver?

1. Plan and adjust the time the task is performed to allow enough time to accommodate the goals, preferences, and needs of both this person and the caregiver.
2. Plan and adjust the duration of the task to allow enough time to accommodate the goals, preferences, and needs of both this person and the caregiver.
3. Adapt the time and duration of each task as this person's goals, needs and preferences change over time, day to day, and moment to moment.
4. Adapt the time and duration of each task as the caregiver's goals, needs and preferences change over time.
5. Plan the details of how this time for the task will be organized before approaching her/him with a task to be performed. Remind yourself that planning your time and the multiple tasks to be performed will save time and frustration for this person and for yourself.
6. Plan your time and schedule of tasks to allow enough time to get the most important tasks and parts of task done, so that the goals of this person and yourself will most likely be met.
7. Establish goals and priorities regarding this task. Consider this person's own goals first, then your goals. For example, during a shower or bath, this person may want to feel relaxed, pain free, and luxurious, while you simply want this person to be clean.
8. To reduce frustration or confusion that could increase the time required for a task, plan for the most challenging tasks and task steps to occur when this person is best able to perform them. For example, plan to do the most difficult tasks when she/he is less fatigued or frustrated, or do the most appealing task steps first to entice her/him to begin the task and to be better able to understand and perform the more challenging task steps.
9. Allow enough time to approach this person leisurely and calmly to prepare her/him emotionally for the task.
10. Watch this person to discern her/his most comfortable pace while performing this task.
11. Note evidence of fatigue or anxiety during a task, and modify the pace of the task to reassure her/him or to help her/him rest and relax.
12. To reduce distraction that could increase the time required for a task, prepare for the task out of this person's sight and hearing. For example, collect and organize task items, such as washcloths and basins, before you enter her/his room. Arrange the task so this person sees and hears only those task steps in which she/he can directly participate.
13. Perform quickly, efficiently and out of this person's sight and hearing, the task steps that are not meaningful or helpful to this person.
14. When you are with this person, perform the task steps slowly enough for her/him to participate, to understand what you are doing, and to remain relaxed and comfortable.