

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

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COGNITIVE FUNCTIONS

INTRODUCTION AND INSTRUCTIONS

INTRODUCTION

The 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 abilities, needs, and desires of the person with cognitive impairment need to be more effectively addressed and accommodated.

The four parts of the CIIP and CIAP, and the factors they address are:

1. Cognitive functions of this person
2. Environment
3. Caregiver Interactions with this person
4. Task and Daily Routines.

Each part of the CIIP has its own introduction and instructions.

This part of the CIIP relates to the person and in particular to the person's cognitive functions. Use the CIIP Cognitive Functions and the CIAP Cognitive Functions together.

The Cognitive Functions 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 Cognitive Functions documents that will help you understand and use the Cognitive Functions 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.

Often the cognitive impairment of a person becomes increasingly severe over time due to changes in the brain. The brain's ability to figure out what to do becomes more impaired in the absence of enough or the right kind of support from the environment, caregiver interactions, and the task or daily schedule.

When the environment, caregiver interactions, and task and daily routines are not supportive enough, that is, they are too demanding or they overestimate or underestimate the cognitive abilities of a person, the person may show evidence of this "mismatch" in a variety of ways, including:

1. Fatigue, withdrawal, or lethargy
2. Emotional distress, anxiety, confusion, or irritation.
3. Reduced success in performing a function, task, or task step.
4. Engaging in a behavior that reflects fatigue, unmet needs, or distress. Other people may call the behavior a "difficult behavior" because it causes danger or distress to the person with the cognitive impairment or to other people. It may also simply be a behavior that reflects distress in response to the behavior of a caregiver. The caregiver's behavior may feel to the person with cognitive impairment like a "difficult behavior" because it confuses and upsets her/him, by overestimating or underestimating her/his level of cognitive functioning.

The goal of this Cognitive Functions CIIP is to suggest ways to modify the environment, caregiver interaction, and the task or daily routines 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 interactions with others 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, accommodating the cognitive functions of a person with cognitive impairment:

1. Helps a person feel comfortable and be safe.
2. Stimulates a person to have energy and a desire to do something.
3. Tells this person what is happening and will happen, and provides options of what to do and how to participate.
4. Helps this person save energy for other pleasurable or difficult tasks by making the performance of this task as easy and relaxing as possible.
5. Helps this person feel competent, independent, respected, and engaged.

Careful observation is key to recognizing insufficient accommodation of cognitive functioning, as is described more specifically in the observation section of the Cognitive Functions CIIP. When a person's body becomes tense or her/his face and eyes reflect confusion, anxiety, or irritation suggesting this person's cognitive functioning is either overestimated or underestimated, then immediately use an intervention from the Cognitive

Functions CIIP (for example, slow down to give her/him time). At all times, try to accurately match the demands of the task, environment, and your interactions with this person's abilities, needs, and desires as reflected in the Cognitive Functions CIAP to help this person relax and feel comfortable and competent.

The CIIP interventions modify the environment, caregiver interactions, and a task to:

1. Help a person grow in her/his ability to perform some cognitive functions and to acquire new skills or strategies that (at least temporarily) accommodate changes in other cognitive functions (for example, increasing the contrast between an object and its background, so the ability to scan an area to find an object is more often used and improves as the ability to remember where an object is declines; or nurturing artistic, music, and singing skills as speech declines).
2. Rely on an intact cognitive function (for example, pointing to an object as you name it, if this person doesn't recognize the object when she/he sees it, but does recognize the name of the object when it's said aloud).
3. Make a particular skill, function, or task step easier (for example, singing a rhythmic song with a person on the way to lunch, so walking becomes easier).
4. Compensate for a cognitive impairment by performing the function or task step for this person (for example, buttoning this person's shirt for her/him).

The CIAP questions will help you assess this person's cognitive functions to see if they are being addressed and accommodated in a way that is supportive of a particular person at a specific time. Your responses to the questions provide a profile of strengths and weaknesses regarding the abilities and needs of this person at this time.

The list of CIIP intervention ideas for each CIAP question offers you possible strategies to improve the effectiveness of efforts to accommodate this person's cognitive functions.

INSTRUCTIONS

1. Complete the Cognitive Functions 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 Cognitive Functions 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 Cognitive Functions of a Person with Cognitive Impairment: I. SENSORY FUNCTIONS

Look for ways to help this person receive information from the environment through the five senses, by helping her/him to more easily:

- See and hear
- Feel or experience touch
- Taste and smell

A. If this person needs glasses, is she/he using them?

1. Find out if this person has, or needs to have, prescription or reading glasses.
2. Encourage her/him to wear her/his glasses.
3. Help this person have regular eye examinations.
4. Make sure her/his glasses match the most current prescription from the eye exam.
5. Make sure the glasses feel comfortable on this person's ears, nose, and sides of head. If not, have the glasses adjusted.
6. If this person is not wearing the glasses that she/he needs, then compensate for the reduced vision by increasing reliance on her/his other senses of hearing, touching, smelling, and tasting. For example, tell her/him what you are doing and where things are; touch her/his arm and move her/his hand to an object; encourage her/him to smell or taste food to better understand what it is.

B. If this person needs glasses, are they clean?

1. Clean this person's glasses every morning and as often as necessary throughout the day.
2. For any tasks that require intact vision, make an extra effort to ensure her/his glasses are clean.

C. Does this person see well enough during this task to focus on an object or to follow an object when it moves?

1. Discern which part of this person's visual field is optimal, that is, discern the spot in the environment where, if she/he stares straight ahead without moving her/his head, she/he sees objects and people most easily, quickly, and accurately.
2. Hold any object you want this person to see, in the optimal part of her/his visual field. Avoid holding the object too far away, too close, too high, too low, too far to the left, or too far to the right.
3. Ensure there is enough light on an object so it is easy to see.
4. Ensure the area surrounding an object contrasts with the object so it is easy to see. For example, make sure the pill is lighter or darker than the spoon which holds it, or the washcloth is lighter or darker than the bathtub or sink behind it.

5. Ensure the area surrounding an object is not confusing or patterned, causing the object to be camouflaged or lost in the background.
6. Allow enough time for this person to shift attention to an object and to focus on it.
7. When an object moves, watch this person's eyes to ensure they are following the object.
8. Move an object slowly enough for her/his eyes to move with it.
9. Avoid moving an object any more often than is necessary.
10. Move an object as short a distance as possible. Avoid making the person move her/his head to follow the object.
11. If this person cannot see well, then compensate by increasing reliance on her/his other senses of hearing, touching, smelling, and tasting. For example, tell her/him what you are doing, and what and where an object is; touch her/his arm and move her/his hand to an object; or encourage her/him to touch the object as a way of recognizing and then using it.
12. Continue to watch this person closely to discern how well she/he is seeing you, an object, or an event that is occurring at this moment in time. Adjust your communication, the environment, and the task to help her/him see more easily or to compensate for her/his reduced ability. (Please see other sections of this CIIP for specific suggestions.)
13. Remind yourself that this reduced vision is most likely due to changes in this person's eyes or her/his brain's ability to recognize what she/he sees. It is rarely due to this person's desire or intention. The comment "She/he sees what or when she/he wants to see" is usually false and a misinterpretation of this person's abilities or desires. Be compassionate, patient, and tolerant.

D. Does this person see objects as small as the size of letters in the text of a magazine article?

1. Make sure letters on paper, signs and labels are as large as necessary for this person to read them easily.
2. Avoid small dark print on a white background. For signs, use light lettering on dark background.
3. Highlight objects and parts of an object she/he may not be able to see, such as the laces on her/his shoes, by making them lighter or darker than the area surrounding them.
4. If this person cannot see small things or details well, then compensate by increasing reliance on her/his other senses of hearing, touching, smelling, and tasting. For example, read the print for her/him or read the words she/he can't see, or point to the pea on the dinner plate that she/he is trying to pick up with a fork.
5. Identify for this person the small details that might differentiate one object from another. For example, mention and point to the different shape of the green beans versus peas on the dinner plate.
6. Bring this person's eye gaze to the object or part of the object by holding your finger in front of her/his eyes and moving it to the object or object part.
7. Continue to watch this person closely to discern how well she/he is seeing an object or parts of an object at this moment in time. Adjust your communication, the environment, and the task to help her/him see more easily or to compensate for her/his reduced ability. (Please see other sections of this CIIP for specific suggestions.)

8. Remind yourself that this reduced vision is most likely due to changes in this person's eyes or her/his brain's ability to recognize what she/he sees. It is rarely due to this person's desire or intention. The comment "She/he sees what or when she/he wants to see" is usually false and a misinterpretation of this person's abilities or desires.

E. If this person needs a hearing aid, is she/he using it?

1. Find out if this person has, or needs to have, a hearing aid.
2. Encourage her/him to wear her/his hearing aid.
3. Replace the hearing aid when it is lost, broken, or no longer works well.
4. Help this person have hearing examinations regularly.
5. If this person is not wearing a hearing aid that she/he needs, then compensate for the reduced hearing by increasing reliance on her/his other senses of seeing, touching, smelling, and tasting. For example, show her/him what you plan to do and where things are; to get her/his attention, move into the optimal part of her/his visual field and touch her/his arm.

F. If this person needs a hearing aid, is it adjusted properly?

1. Make sure this person is wearing the hearing aid properly.
2. Make sure the hearing aid fits her/his ear well, and the battery is charged.
3. Make sure the hearing aid matches her/his most current prescription.
4. Update this person's prescription as often as necessary.
5. Make sure the hearing aid is working well for her/him.
6. Help this person have her/his hearing aid professionally evaluated and adjusted regularly.

G. Does this person hear well enough to respond to a sound by, for example, looking toward the sound, moving, or responding with a sound?

1. Discern if this person hears more easily, quickly, or accurately out of one ear rather than the other. If so, then present any sound so that it is closer to the "better" ear, though still in a spot where she/he can see the source of the sound to help her/him better understand and interpret the sound.
2. Discern what sounds are easier for her/him to hear, such as low or high pitched sounds, certain consonants, certain familiar voices. Remind yourself that normal age related hearing changes can cause this person to have difficulty hearing high pitched consonants such as "f", "d", and "s", including words such as "bath", "shower", and "food". Adjust the sound to make it easier to hear. For example, lower the pitch of your voice when speaking.
3. Discern how loud a sound must be to be heard easily by this person at this time. Increase the volume of sound as needed.
4. Reduce background noise so she/he can hear more easily. For example, before speaking, turn off the radio, TV, fans, running water, and close the doors and windows.
5. If this person cannot hear well, then compensate by increasing reliance on her/his other senses of seeing, touching, smelling, and tasting. For example, use gestures to point to or show her/him where an object is and what you plan to do; to get her/his attention, move into the optimal part of her/his visual field and touch her/his arm.

6. Face this person and position yourself closely enough so she/he can see your face and mouth when you speak.
7. Get this person's attention before speaking.
8. Use gestures. For example, gesture with your hand and arm when asking this person to come with you.
9. Use visual cues. For example, show or point to objects when referring to them.
10. Continue to watch this person closely to discern how well she/he is hearing sounds, you, or an event that is occurring at this moment in time. Adjust your communication, the environment, and the task to help her/him hear more easily or to compensate for her/his reduced ability. (Please see other sections of this CIIP for specific suggestions.)
11. Remind yourself that this reduced ability to hear is most likely due to changes in this person's ears or her/his brain's ability to recognize what she/he hears. It is rarely due to this person's desire or intention. The comment "She/he hears what or when she/he wants to hear" is usually false and a misinterpretation of this person's abilities or desires. Be alert for conditions, such as a car driving by or other background sounds that you may not notice easily, but which could affect this person's ability to hear at a given moment. Be compassionate, patient, and tolerant.

H. Does this person hear sounds as quiet as a woman saying "Hello" beside her/him in a calm voice normally heard by most people, when there is no other noise? That is, can a woman say "Hello" without raising her voice, and be heard by this person?

1. Discern how loud a sound must be to be heard easily by this person at this time. Increase the volume of sound as needed.
2. Reduce other quieter noises to reduce possible interference with the louder clearer sounds. For example, speak to this person when alone in a quiet place. Avoid doing noisy tasks, such as running water while you are talking.
3. Modify your voice so it can be heard more easily. For example, lower the pitch of your voice, talk more distinctly, use the same words every time you ask a particular question, such as "Do you want to eat?".
4. Modify body position so this person can see you or the sound more easily.
5. If this person cannot hear a sound, then compensate by increasing reliance on her/his other senses of seeing, touching, smelling, and tasting. For example, use gestures, or point to, or show a specific object. Encourage this person to hold or touch an object before talking about it. Direct her/his attention to the sound or to you when you want to speak. Maintain eye contact or keep your hand on her/his arm to maintain her/his attention.
6. Continue to watch this person closely to discern how well she/he is hearing sounds, you, or an event that is occurring at this moment in time. Adjust your communication, the environment, and the task to help her/him see more easily or to compensate for her/his reduced ability. (Please see other sections of this CIIP for specific suggestions.)
7. Assess this person's hearing regularly and adapt sounds as her/his hearing changes. Remind yourself that hearing may fluctuate frequently and may be affected by temporary conditions such as ear wax.

8. Remind yourself that this reduced ability to hear is most likely due to changes in this person's ears or her/his brain's ability to recognize what she/he hears. It is rarely due to this person's desire or intention. The comment "She/he hears what or when she/he wants to hear" is usually false and a misinterpretation of this person's abilities or desires. Be alert for conditions, such as your hand blocking her/his view of your mouth that you may not notice easily, but which could affect this person's ability to hear or understand at a given moment. Be compassionate, patient, and tolerant.

I. Does this person appear to feel touch to her/his skin, regardless of the body part touched? For example, does she/he appear to know I am touching her/his arm? For evidence, note a verbal or nonverbal response, such as a glance toward the touched body part, a wince, or movement of the body part when it is touched. Note if there is no response until additional pressure is gently applied.

1. Discern how much pressure needs to be exerted on this person's skin for her/him to feel a touch at this moment in time. Use a very light pressure first, and then slowly increase the pressure to discern how much pressure is necessary and optimal. Continue to use sufficient yet gentle pressure to allow this person to feel your touch. Be very careful to avoid applying too much pressure, since this person may feel pain easily or may injure easily.
2. When this person has difficulty feeling your touch, stroke or move your hand back and forth over the skin to increase the chance she/he will notice your touch. Be very careful to stroke gently, since this person's skin may tear easily or may be so dry, that the stroking feels uncomfortable or painful.
3. Remind yourself that this person's sensitivity to touch may fluctuate or be unpredictable at any given moment. If you touch the same spot a short time later, there might be a different response.
4. Remind yourself that this reduced sensitivity to touch may be due to changes in the skin's ability to sense the touch, or in her/his brain's ability to recognize the touch. It is rarely due to this person's desire or intention to ignore the touch. The comment "She/he notices a touch when she/he wants to" is usually false and a misinterpretation of this person's abilities or desires. Be compassionate, patient, and tolerant.

J. Do all parts of this person's body appear to experience touch equally (that is, there are no body parts that are more or less sensitive or more or less painful than other body parts when touched)? List any body parts that appear to be more or less sensitive or more or less painful (include left and right):

1. Discern if there is a side of the body, body part or spot on a body part where this person has difficulty sensing touch compared to other parts of her/his body at this moment in time. If there is, then avoid touching that spot or body part, or tell her/him when you are touching it.

2. Discern how much pressure needs to be exerted on the spot or body part for this person to be able to feel the touch at this moment in time. Use a very light pressure first, and then slowly increase the pressure to discern how much pressure is necessary and optimal on this particular spot. Continue to use sufficient yet gentle pressure to allow this person to feel your touch. Be very careful to avoid applying too much pressure, since this person may feel pain easily or may injure easily.
3. Discern if there is a body part or spot on a body part where this person experiences pain or discomfort when touched compared to other parts of her/his body. If there is, then avoid touching that spot or body part, or touch it very carefully and slowly, touching as small an area of the sensitive skin as possible. As you touch, constantly listen to the words or sounds this person makes, and notice visible evidence of pain or discomfort in her/his face and body such as, stiffening, jerking, withdrawal, going very still, a frown, wince, shifting her/his eye gaze with eyes darting, blinking, widening, or closing. Notice if your soft touch feels to her/him like a hit. Notice if she/he tries to remove clothing or anything that touches certain parts of her/his body. Listen for frequent references to parts of the body when she/he talks.
4. Discern how much pressure needs to be exerted on the spot or body part for this person to begin feeling pain or discomfort at this moment in time. Reduce the amount of pressure to avoid causing pain or discomfort.
5. Remind yourself that this person's sensitivity to touch or experience of pain or discomfort on any body part may fluctuate or be unpredictable at any given moment. If you touch a short time later, there might be a different response. Continually watch this person to notice how she/he reacts to touching any part of her/his body at any moment in time.
6. When this person has difficulty feeling your touch, stroke or move your hand back and forth over the spot or body part to increase the chance she/he will feel your touch. Be very careful to stroke gently, since this person's skin may tear easily or may be so dry that the stroking feels uncomfortable or painful.
7. If the discomfort this person experiences when a particular body part is touched includes a sense of pins and needles, tickling, bugs crawling on or under the skin, extreme hot or cold temperature, or a sense that that body part has "fallen asleep", then gently increase pressure on that part of the body. Watch this person carefully for evidence you are decreasing the discomfort rather than increasing it.
8. When touch causes pain, discomfort, or a startled response, touch slowly, ask permission or gently tell this person before touching so she/he can prepare for your touch, reduce the amount of touching, and modify your touch. Touch with your palm rather than fingers to reduce the number of points of contact. Use sustained pressure, that is, avoid changing the amount of pressure once the optimal amount of pressure is reached. Reduce the number of times your hand leaves and returns to this person's body, since she/he may have difficulty adjusting to the initiation of touch. Maintain eye contact and talk about something to divert her/his attention. Touch and stroke other body parts first, before approaching the body part that hurts when touched. Touch the peripheral parts of the body first before touching the torso.
9. Remind yourself that this increase in pain or discomfort may be due to changes in the skin's response to the touch, or in her/his brain's perception of the touch. It is rarely due to this person's desire or intention to manipulate you or to get attention or sympathy.

10. Use as much pain medication as necessary to help this person feel comfortable. Seek the advice of a healthcare professional. Avoid underestimating or overestimating the amount of pain this person feels. Assess frequently for pain. Use both nonverbal and verbal methods of pain assessment. For example, use touch or gentle movement of the body part, and use words this person will understand to assess for pain. Remind yourself this person may have difficulty understanding you and expressing how she/he feels. She/he may respond with words that don't actually match her/his level of pain, such as saying "no" when she/he means "yes", or not understanding your question, or not recognizing her/his own pain as pain. Watch this person constantly to observe evidence of pain.

K. Does the touch appear to feel as soft or as hard as the amount of pressure used, so that the person seems to feel it as most people would? For evidence, note that there is no negative or exaggerated verbal or nonverbal response to touch, such as an accusation of being hit when she/he was simply touched. Note also if there is no response even when additional pressure is gently applied.

1. Remind yourself that this person's sensitivity to touch or experience of pain or may fluctuate or be unpredictable at any given moment. If you touch a short time later, there might be a different response.
2. Discern the optimal amount of pressure to be exerted on this person's skin for her/him to feel comfortable when touched. Discern when the touch is hard enough to be felt, but not so hard that it hurts. Use a very light pressure first, and then slowly increase the pressure to discern how much pressure is optimal on this particular spot. Continue to use sufficient yet gentle pressure to allow this person to feel your touch. Be very careful to avoid applying too much pressure, since this person may feel pain easily or may injure easily.
3. Continue to watch this person carefully for evidence of an unexpected reaction to touch. Remind yourself that a soft shower spray may feel to this person like pins and needles or pellets hitting her/his skin. Adjust how you touch this person, your communication, the environment, and the task to help her/him feel more comfortable.
4. When a touch feels unexpectedly hard, place a barrier or buffer between this person's skin and the object applying pressure. For example, place a washcloth over the shower nozzle or a washcloth, towel or clothing over the skin when using a shower nozzle. Place a soft towel between your hand and the person's arm as you lift the arm.
5. When touch causes pain, discomfort, or a startled response, reduce the amount of touching, touch slowly, ask for permission or gently tell this person before touching so she/he can prepare for the touch, and distract while touching.
6. Modify your touch. Maintain the optimal amount of pressure in your touch. Reduce the number of times your hand leaves and returns to this person's body.
7. Remind yourself that each spot or part of this person's body may experience touch and pressure in a different way. Continue to watch this person to see how she/he is experiencing touch and pressure at this moment in time on this particular spot on the skin.

L. Does the cloth, water, or surface appear to feel comfortable? For evidence, note that there is no negative verbal or nonverbal response, such as this person trying to remove clothing or a washcloth, or reacting by wincing, withdrawing, or resisting when she/he comes in contact with a surface or water.

1. Discern which types of cloth, water or surface appear to be most comfortable for this person, and use only those as much as possible. For example, use a washcloth that is made from a smooth material rather than terry cloth, or a soft rather than an itchy wool sweater.
2. Movement of the cloth, water, or surface over this person's skin may increase the discomfort. When contact with uncomfortable items is necessary, reduce the amount of movement. For example, use a bath rather than a shower, reduce fans or wind that might blow the sleeve of a blouse over the person's arm, pat the arm dry with the towel rather than rubbing it dry.
3. Remind yourself that the sensitivity of this person's body to contact with a cloth, water, or surface may fluctuate or be unpredictable at any given moment. There might be a different response to contact a short time later. When contact is uncomfortable at one time, try again another time.
4. Remind yourself that each spot or part of this person's body may experience contact with a cloth, water, or surface in a different way. Continue to observe this person to see how she/he is experiencing touch and pressure at this moment in time on this particular spot on the skin.

M. Does the temperature of air or water appear to feel the same to this person as it would to most people?

1. Remind yourself that the sensitivity of this person's body to temperature may fluctuate or be unpredictable at any given moment. There might be a different response a short time later.
2. Remind yourself that each spot or part of this person's body may experience temperature in a different way. Continue to observe this person to see how she/he is experiencing temperature at this moment in time on this particular part of the body. Address the discomfort for each part of the body individually. For example, keep the left side of this person's body, or just the arm, covered if that is the only part of the body that is cold.
3. Adjust the temperature of the air or water to make this person comfortable, even if it makes you uncomfortable. Assume this person is accurate in perceiving how hot or cold the air or water feels. If adjusting water or air to this person's preference is dangerous, such as water that is so hot it scalds or burns her/his skin, or too uncomfortable for most other people in this space, then change her/his experience of the temperature in other ways. For example, place a warm washcloth between the skin and the shower spray, keep her/him covered with warm towels throughout the shower, layer clothing and thermal underwear, even if it is summer. If she/he begins to perspire and still says she/he is cold, then evaluate for a physical disorder.

N. Does this person appear to feel that the air or water temperature is stable and not changing from one minute to the next?

1. Accommodate this person's experience of temperature, regardless of how often she/he changes what she/he says about her/his comfort level. For example, if she/he says the water is too cold and then a short time later says it is too hot, adjust the temperature accordingly as long as it is safe to do so. Continue to adjust as she/he requests.
2. Remind yourself that this change or fluctuation in experience of temperature may be due to changes in this person's skin or in her/his brain's perception of temperature. It is rarely due to this person's desire or intention to manipulate you.
3. Remind yourself that each spot or part of this person's body may experience temperature in a different way. Continue to observe this person to see how she/he is experiencing temperature at this moment in time on this particular part of the body.
4. Address the discomfort of each part of this person's body individually. For example, use a different water temperature when washing this person's left arm versus her/his right arm, when each arm experiences temperature differently.

O. Does this person appear to taste? For evidence, note that she/he appears to notice differences in foods or responds verbally or nonverbally to tastes she/he doesn't like by, for example, turning away or wincing.

1. Monitor changes and fluctuations in this person's sense of taste and change the foods offered to accommodate the changes. Observe especially closely for changes in tastes when she/he seems to be undergoing other changes physically, emotionally, or medically. Note changes due to normal aging, to various medical disorders, to medications, and to environmental conditions, such as smells from paint.
2. Examine medications this person is taking or applying to her/his skin to discern the effects of the medications on her/his ability to taste, the tastes she/he is most sensitive to, and which tastes become more or less pleasurable.
3. Accommodate this person's cognitive changes that might change her/his appetite or sense of taste. For example, she/he may not recognize food when she/he sees it.
4. Make ground or pureed food as similar to the way it looks unpureed as possible. For example, shape pureed chicken to look like a drumstick on the plate.
5. If this person's sense of taste is generally decreased, then increase the intensity of flavors in the food. For example, add flavorings and spices that this person likes.
6. Discern the changes in types of flavors for this person and modify the flavors accordingly. For example, some foods may need to be sweetened or avoided if they seem more bitter to this person than they used to.
7. Accommodate this person's changes in the flavors she/he finds pleasurable. For example, offer more sour foods, such as lemon if that is what she/he seems to like more now.
8. Avoid foods that this person doesn't like.
9. Increase the aroma of the food.
10. Remind yourself that this person's sense of taste may fluctuate or be unpredictable at any given moment. Her/his sense of taste might change from one time or moment to the next.

11. Remind yourself that these changes in taste may be due to changes in this person's tongue's response to tastes, or in her/his brain's perception of the tastes. It is less likely due to this person's desire or intention to manipulate you. Be compassionate, patient, and tolerant.

P. Does this person appear to smell? For evidence, note that she/he responds to changes in smell, such as food baking, or by turning away or wrinkling her/his nose at smells she/he doesn't like.

1. Monitor changes and fluctuations in this person's sense of smell, and change smells in the environment to accommodate them. Observe especially closely for changes in smelling when she/he seems to be undergoing other changes physically, emotionally, or medically. Note changes due to normal aging, to various medical disorders, to medications, and to environmental conditions, such as overpowering smells like paint.
2. Examine medications this person is taking or applying to her/his skin to discern the effects of the medications on her/his ability to smell, the smells she/he is most sensitive to, and which smells become more or less pleasurable.
3. Accommodate this person's cognitive changes that might change her/his sense of smell. For example, she/he may not recognize a smell when she/he smells it.
4. If this person's sense of smell is generally decreased, then increase the intensity of smells in the environment and in her/his food.
5. Accommodate this person's changes in the smells she/he finds pleasurable. For example, increase those smells in the environment generally and in the kitchen or bathroom.
6. Avoid smells that this person doesn't like.
7. Help this person smell objects more easily by drawing her/his attention to them and by holding them close to her/his nose and in a position where she/he can see what they are. For example when rubbing cream into her/his skin, hold the cream close to her/his nose and comment on its smell.

Cognitive Impairment Intervention Protocol (CIIP) for Cognitive Functions of a Person with Cognitive Impairment: II. COMPREHENSION/PERCEPTION

Look for ways to help this person recognize and understand information received through the senses, by helping her/him to more easily:

- Understand what she/he sees and hears
- Recognize where an object or sound is in space

A. Does this person know what an object is when she/he sees it?

1. Make sure an object looks familiar and normal to this person.
2. Remind yourself that this person may know what an object is, but have difficulty naming it, knowing how it is used, or how to use it. Watch this person carefully to discern how well this person can do each of these.
3. Ensure this person can easily see the complete object. Adjust the lighting; make sure there is no confusing pattern behind or surrounding the object; make sure the object is highlighted; and make sure that the person's attention is drawn to the correct object.
4. If this person doesn't seem to recognize an object, tell her/him what it is and what you and she/he will do with it.
5. Encourage this person to hold and manipulate an object to better understand what it is.
6. Label objects in the environment. For example, put signs on drawers or have a menu that lists the food items served that day.
7. If this person has difficulty recognizing faces or people, identify yourself and other people when approaching. Reduce the number of new people she/he sees. Strive for consistency in whom she/he sees and how these people appear. For example, avoid dramatic changes in clothing or hairstyles. Wear a name tag that looks stylish and personal, yet clearly legible. Introduce topics, words, and ways of speaking that are familiar to this person and can be identified with you and your relationship with her/him. For example, have a pleasant visit with this person before asking her/him to come with you for a shower.
8. If this person thinks you are someone else, identify yourself frequently and try to look different from the person she/he has confused you with. For example, if you are this person's son but look like her husband, try to change your appearance or wear clothing or a hairstyle that her husband would be unlikely to wear.
9. Remind yourself that this person's ability to recognize objects and people may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to recognize the object or person more easily.
10. Continue to watch this person closely to discern how well she/he recognizes an object, you, or other people at this moment in time. Adjust your communication, the environment, and the task to help her/him recognize objects and people more easily or to compensate for her/his reduced ability. (Please see other sections of this CIIP for specific suggestions.)

11. Remind yourself that this reduced ability to recognize objects and people is most likely due to changes in this person's eyes or her/his brain's ability to recognize what she/he sees. It is rarely due to this person's desire or intention. The comment "She/he sees what or when she/he wants to see" is usually false and a misinterpretation of this person's abilities or desires. Be compassionate, patient, and tolerant.

B. Does this person recognize various colors?

1. Avoid using colors that this person does not recognize for clothing, for cues or to highlight objects.
2. Monitor changes in this person's ability to recognize colors. Remind yourself that this person may know what a color is, but have difficulty naming it.
3. Increase the difference between colors when using them for cues or to highlight objects. For example, when highlighting the edge of a step, use a color on the edge that is different from the rest of the step, rather than using the same color with different light-dark intensity.

C. Is this person able to read?

1. Monitor changes in this person's ability to read words and letters in notes, magazines, newspapers, signs, labels and other pieces of information in the environment. Remind yourself that this person may be able to read one piece of information, such as a newspaper, but not another, such as a note.
2. Remind yourself that this person may be able to read silently but not aloud, or vice versa.
3. Accommodate any impairment in this person's vision. For example, increase the size of the letters if this person has difficulty seeing them.
4. Create environmental conditions that enhance her/his ability to read. For example, increase lighting and reduce noise to allow for better attention, focus, and concentration.
5. Remind yourself that this person's ability to read may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to read more easily.

D. Does this person understand what she/he reads, such as her/his own name or instructions that she/he reads silently?

1. Present the information, such as a note of instructions aloud when she/he does not understand what she/he reads silently. Encourage this person to read aloud or have someone else read it aloud for her/him, so that she/he can hear the words.
2. Remind yourself that this person may be able to read something aloud, but not understand what she/he read or heard. Discuss with her/him what she/he read to discern whether she/he understood it.
3. Watch this person to see if she/he recognizes when action is expected regarding what she/he has read. For example, after she/he reads a note that suggests she/he put the cup in the sink, watch to see if she/he does put the cup in the sink, indicating that she/he understands that the note is expected to result in her/his action.
4. When writing a note, use as few words as necessary; use short and familiar words; and make the content of the note as concrete as possible. For example, instead of writing "I will see

you tomorrow. You will be fine until then." write "I will come to your room tomorrow at 2:00 pm. I love you." or instead of "Relax, I'll clean up next time I come to see you" write "Please leave the dishes on the table. I will wash them."

5. Remind yourself that this person's ability to understand what she/he reads may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to understand more easily.
6. Create environmental conditions that enhance her/his ability to understand what she/he is reading. For example, reduce noise to allow for better attention, focus, and concentration.
7. Continue to watch this person closely to discern how well she/he understands what she/he reads at this moment in time. Adjust your communication, the environment, and the task to help her/him understand what she/he reads more easily or to compensate for her/his reduced ability. (Please see other sections of this CIIP for specific suggestions.)

E. Does this person recognize pictures, such as pictures of objects or of familiar people?

1. Monitor changes in this person's ability to relate two dimensional pictures with three dimensional objects. Watch carefully to notice when picture cues no longer seem effective.
2. Avoid using pictures as cues, such as signs on doors, or for entertainment and conversation, such as photo albums, when she/he no longer recognizes what is in the pictures.
3. Use photos of people rather than drawings.
4. Use solid color pictures rather than penciled black and white sketches for cues.
5. Use solid, three dimensional cues when pictures no longer adequately communicate information. For example, when she/he is unable to find her/his bedroom or bathroom, keep the door to her/his bedroom or bathroom open, rather than posting a picture of a bed or toilet on the door as a cue.
6. Label photos when she/he no longer recognizes the people in them.
7. When this person does not recognize her/himself in a photo, remind yourself that she/he may be thinking of her/himself at a different age than the one she/he is in the photo. For example, a photo of this person at 30 years old may be a more effective cue for the bedroom than one at her/his current age.

F. Does this person recognize gestures?

1. Avoid gesturing when a person does not recognize the meaning of the gesture.
2. When this person has difficulty seeing exactly where objects are in space, use small gestures, and use gestures only when necessary. For example, in order to reduce this person's fatigue, avoid requiring her/him to follow the movement of your arm or hand
3. Keep gestures simple and familiar. For example, use a gesture to say "come with me" but avoid a gesture that illustrates the multiple steps necessary to fold a bath towel.
4. Make the gesture large enough to capture this person's attention and to be easily seen.
5. Ensure the gesture is not in front of a patterned blouse or a busy scene in a room.
6. Ensure that any clothing covering the gesturing arm stands out from the visual area behind the arm. For example, avoid wearing a long white sleeve when gesturing where to put her/his hand on a white sheet.

G. Does this person recognize what a word means when she/he hears it?

1. Make sure words are familiar and normal to this person.
2. Use words in her/his first language.
3. If this person doesn't seem to recognize a word, use a different word.
4. Ensure this person has actually heard the words. Reduce background noise and get her/his attention before saying words.
5. Show this person the object a word is describing or referring to.
6. Avoid using words as cues on signs or in your conversations with this person, if she/he no longer recognizes key words.
7. Reduce reliance on words to interact with this person. For example, use nonverbal gestures and fewer words when inviting her/him to lunch.
8. Use activities with this person rather than conversations when visiting. For example, knit or wind yarn or look at photos together, rather than talk about the grandchildren.
9. Obtain a professional evaluation of this person's language skills and recommendations for strategies to help her/him.
10. Remind yourself that this person's ability to recognize words may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to recognize words more easily.
11. Continue to watch this person closely to discern how well she/he is recognizing words at this moment in time. Adjust your communication, the environment, and the task to help her/him recognize words more easily or to compensate for the decrease in comprehension. (Please see other sections of this CIIP for specific suggestions.)
12. Remind yourself that this reduced ability to recognize words is most likely due to changes in this person's brain's ability to understand language. It is rarely due to this person's desire or intention. Be compassionate, patient, and tolerant.

H. Does this person recognize that a body part is hers/his when she/he sees it?

1. Remind yourself that this person may not respond to a request because she/he doesn't recognize a part of her/his body as belonging to her/him. For example, if she/he doesn't respond when asked to lift her/his arm while dressing, try to discern if she/he knows where her/his arm is and that it is hers/his.
2. If, when she/he doesn't see it, this person has difficulty recognizing where her/his body part is in space, moving it, or knowing whether it is her/his own, then make sure she/he can easily see it.
3. Tell this person that the body part is hers/his; then ask her/him to move it.
4. Call her/his attention to her/his body part by touching it, by moving your finger in front of her/his eye and drawing her/his gaze to the body part, or by partially moving the body part yourself.
5. If recognizing the body part as hers/his is too tiring for her/him, then simply move the body part yourself, without drawing attention to it.
6. Remind yourself that this person's ability to recognize a body part as her/his own may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to recognize a body part as her/his own more easily.

7. Remind yourself that this reduced ability to recognize a body part as her/his own is most likely due to changes in this person's brain. It is rarely due to this person's desire or intention. Be compassionate, patient, and tolerant.

I. Does this person easily notice objects in all parts of her/his visual field?

Circle the areas of most difficulty: Upper left; Lower left; Upper right; Lower right

1. Discern in which parts of this person's visual field she/he has more difficulty noticing objects and people. That is, discern the spot in the environment where, if she/he stares straight ahead without moving her/his head, she/he doesn't see or notice objects and people as easily, quickly, and accurately.
2. Discern which part of this person's visual field is optimal. That is, discern the spot in the environment where, if she/he stares straight ahead without moving her/his head she/he sees or notices objects and people the most easily, quickly, and accurately.
3. Hold any object you want this person to see, in the optimal part of her/his visual field. Avoid holding the object too far away, too close, too high, too low, too far to the left, or too far to the right. For example, avoid holding a glass of water too close to her/his chest, since when she/he looks down she/he may not notice it; or avoid commenting on stains on the front of her/his shirt since she/he may not notice the shirt when looking down.
4. When approaching this person, approach on the side or part of her/his visual field that is optimal. Avoid positioning your body, particularly face, hands, and arms too far away, too close, too high, too low, too far to the left, or too far to the right.
5. Ensure there is enough light to easily see you and any object.
6. Reduce excess clutter in the environment.
7. Ensure the area surrounding you and any object contrasts with you and the object so you and the object are more easily seen. For example, make sure the pill is lighter or darker than the spoon which holds it, or the washcloth is lighter or darker than the bathtub or sink behind it. Make sure your clothing stands out from the visual area behind it. For example avoid wearing a long white sleeve when gesturing where to put her/his hand on a white sheet.
8. Ensure the area surrounding you or the object is not confusing or patterned, causing you or the object to be camouflaged or lost in the background. For example, avoid wearing a highly patterned blouse that might be hard to distinguish from the busy environment behind you.
9. Allow enough time for this person to shift attention to you and to an object and to focus on you or the object.
10. When you or an object moves, watch this person's eyes and move slowly enough to ensure her/his eyes are following you or the object.
11. Avoid moving yourself and your body parts or an object any more often than is necessary.
12. Move yourself, your body parts, or an object as short a distance as possible. Avoid making the person move her/his head to follow you or the object.
13. When gesturing, use small gestures and use gestures only when necessary. For example, in order to reduce this person's fatigue, avoid requiring her/him to follow the movement of your arm or hand. Make any gesture large enough to capture this person's attention and to be easily seen.

14. Remind yourself that this person's ability to notice objects and people in a particular part of her/his visual field may fluctuate or be unpredictable at any given moment. If you return later, she/he may be able to notice the object or person in that spot more easily.
15. Continue to watch this person closely to discern how well she/he is noticing objects, you, or other people in a particular part of her/his visual field at this moment in time. Adjust your communication, the environment, and the task to help her/him notice objects and people more easily or to compensate for her/his reduced ability. (Please see other sections of this CIIP for specific suggestions.)
16. Remind yourself that this reduced ability to notice objects and people in a particular part of her/his visual field is most likely due to changes in this person's eyes or her/his brain's ability to recognize what she/he sees. It is rarely due to this person's desire or intention. The comment "She/he sees what or when she/he wants to see" is usually false and a misinterpretation of this person's abilities or desires.

J. Does this person accurately see how far away an object is from her/him?

1. Remind yourself, that this person's ability to accurately locate a person or an object in space may vary across different parts of her/his visual field. Discern which part of this person's visual field is optimal for locating objects and people easily, quickly, and accurately. This may be directly in front of her/his eyes.
2. When approaching or presenting an object for this person to see, position your body, particularly your face, hands, and arms or the object in the optimal part of this person's visual field. Avoid holding an object too far away, too close, too high, too low, too far to the left, or too far to the right. Presenting your face or an object at eye level with this person may be most effective.
3. When approaching this person, move slowly toward her/him to allow her/him time to figure out the changes in your location as you move. Watch her/his face to see evidence that you are moving too quickly. Avoid looking like you are rushing toward her/him.
4. When moving a body part, such as your arm to touch this person, move it slowly to reduce the chances the movement will be seen as aggressive because it looks like it is moving toward her/him more quickly than it really is, and is misinterpreted as an intention to hit her/him. For example, when helping her/him to eat, move the spoon slowly to her/his mouth to avoid her/his head backing up to better recognize the speed with which the spoon is approaching.
5. When moving an object or your body or body part, such as your arm to gesture or to hand the person something, move it slowly to reduce the chances the movement will be seen as being located somewhere else, or that you are handing something to someone else nearby.
6. When helping this person with a task, organize the task so that most of your movements are out of this person's sight.
7. During tasks that require much visual processing, allow time to rest before, during, and after the task. Respond gently to the irritability that might accompany the fatigue such tasks often cause.
8. Place objects close enough to this person to reduce the need to calculate long distances. For example, place the glass of water to the side of her/his plate, rather than beyond it, to reduce the chances she/he will put the glass down on the edge of the plate, rather than just beyond it. Offer her/him a remote control rather than requiring her/him to find the knob on the TV from a distance.

9. Reduce the number of objects near this person to reduce the need to calculate distances. For example, reduce the number of people talking to her/him and the number of items to pick up and use at the bathroom sink.
10. Move this person's hand to the object to help her/him locate it. For example, move her/his hand to her/his plate to more easily locate it.
11. Hand the object to this person directly, rather than expecting her/him to locate it on her/his own.
12. Modify furniture in the environment to reduce risk of injury if she/he bumps into it when walking. For example round the corners of tables.
13. Contrast grab bars, the edge of steps, and of thresholds to the shower with the wall, rest of the step, or area to ensure she/he accurately sees the location of the grab bars or edges and how high or deep they are.
14. Position multiple three dimensional landmarks down a hallway so this person has a better sense of how long the hallway is, or how far it is to a particular door or room.
15. When you, any part of your body, or an object moves, watch this person's eyes to ensure they are accurately following the movement. Avoid movement as much as possible, but move as often as necessary. Move short distances to avoid making this person's head move to follow the movement. When gesturing, use small gestures that are still large enough to capture her/his attention, but not so large they move out of the optimal part of this person's visual field.
16. Ensure there is enough light to easily see you and any object.
17. Reduce excess clutter in the environment.
18. Ensure the area surrounding you and an object contrasts with you and the object, so that your location and that of the object are more easily and accurately seen. For example, make sure the dinner plate is lighter or darker than the dining room table, or the paper to write on is lighter or darker than the desk it rest on. Make sure your clothing stands out from the visual area behind it. For example, avoid wearing a long dark sleeve when gesturing where to sit on a dark chair. Help with depth perception by coloring the bath water or putting lines on the side of the bathtub.
19. Ensure the area surrounding you or an object is not confusing or patterned, causing you or the object to be camouflaged or lost in the background. For example, avoid wearing a highly patterned blouse that might be hard to distinguish from the busy environment behind you.
20. Allow enough time for this person to shift attention to you and to an object and to focus on you or the object before talking about it or moving it.
21. Remind yourself that this person's ability to see the location of you, objects and other people in a particular part of her/his visual field may fluctuate or be unpredictable at any given moment. If you return another time, she/he may be able to see their location in that spot more easily.
22. Continue to watch this person closely to discern how well she/he is seeing the location of objects, you, or other people in a particular part of her/his visual field at this moment in time. Adjust your communication, the environment, and the task to help her/him see their location more easily or to compensate for her/his reduced ability. (Please see other sections of this CIIP for specific suggestions.)
23. Remind yourself that this reduced ability to see the accurate location of objects and people in a particular part of her/his visual field is most likely due to changes in this person's eyes or her/his brain's ability to recognize where objects are in space. It is rarely due to this person's desire or intention. Be compassionate, patient, and tolerant.

K. Does this person accurately see where objects are relative to other objects?

1. Remind yourself, that this person's ability to accurately locate a person or an object in space relative to other objects may vary across different parts of her/his visual field. Discern which part of this person's visual field is optimal for seeing the location of objects and people, with respect to each other, most easily, quickly, and accurately. Present objects in this optimal part of her/his visual field.
2. Reduce the number of objects and unnecessary distinctions in the environment. For example, reduce the number of people in the environment, and paint the wall all one color, instead of painting part of the wall and wall papering the other part. Reduce the need for this person to figure out that the wall is one wall and not two different surfaces.
3. Reduce the number of objects near this person to reduce the need to calculate distance between objects. For example, reduce the number of glasses and cups she/he has to drink from during a meal.
4. When helping this person with a task, organize the task so that objects that are not necessary for this person to use are out of her/his sight. For example, when helping this person wash the table, bring only the wet dish cloth, not a basin with soapy water in it.
5. Group similar objects together so they are easier to find and identify.
6. Avoid changing the familiar location of objects, so this person can rely on habit to find objects as much as possible.
7. Make an object that is important to this person stand out from other objects. Make the important object colorful, or increase the light-dark contrast between the important object and other objects. For example place a colorful place mat under a plain plate to draw this person's attention to the plate and to help her/him see exactly where it is.
8. Point to or touch an object intended for this person.
9. Move this person's hand to an object to help her/him locate it. For example, move her/his hand to the dinner plate and then to the glass to more easily locate them.
10. Hand the object to this person directly, rather than expecting her/him to locate it among other objects on her/his own.
11. Ensure the area surrounding an object (including yourself and parts of your body) contrasts with the object so the location of the object is more easily and accurately seen. For example, make sure the chair is lighter or darker than the floor, or the light switch is lighter or darker than the wall behind it.
12. Ensure the area surrounding you or the object is not confusing or patterned, causing you or the object to be camouflaged or lost in the background. For example, avoid wearing a highly patterned blouse that might be hard to distinguish from the busy environment behind you.
13. Ensure there is enough light to easily see any object.
14. Allow enough time for this person to shift attention and focus onto an object before talking about it or moving it.
15. Remind yourself that this person's ability to see the location of you, objects and other people in a particular part of her/his visual field may fluctuate or be unpredictable at any given moment. If you return later, she/he may be able to see their location more easily.

16. Continue to watch this person closely to discern how well she/he is seeing the location of objects, you, or other people in a particular part of her/his visual field at this moment in time. Adjust your communication, the environment, and the task to help her/him see their location more easily or to compensate for her/his reduced ability. (Please see other sections of this CIIP for specific suggestions.)
17. Remind yourself that this reduced ability to see the accurate location of objects and people in a particular part of her/his visual field is most likely due to changes in this person's eyes or her/his brain's ability to recognize where objects are in space. It is rarely due to this person's desire or intention. Be compassionate, patient, and tolerant.

L. Does this person know where all of her/his own body parts are at all times?

1. Remind yourself that this person may fall, bump into something, or not respond to a request because she/he doesn't recognize where a part of her/his body is in space. For example, if she/he doesn't respond when asked to lift her/his arm while dressing, try to discern if she/he knows where her/his arm is.
2. If, when she/he doesn't see it, this person has difficulty knowing her/his body part is there or difficulty moving it, then make sure she/he can easily see it.
3. Tell this person where the body part is; then ask her/him to move it.
4. Call her/his attention to her/his body part by touching it, by moving your finger in front of her/his eye and drawing her/his gaze to the body part, or by partially moving the body part yourself.
5. Gently guide this person's hand to a part of the body. For example, guide her/his hand to her/his face when she/he is trying to wash her/his face.
6. If recognizing where a body part is and moving it is too tiring for her/him, then simply move the body part yourself, without drawing attention to it.
7. Reduce the amount of furniture in the environment to reduce chances of this person bumping into things while walking.
8. Modify furniture in the environment to reduce risk of injury if she/he bumps into it when walking. For example round the corners of tables.
9. Remind yourself that this person's ability to recognize where a body part is may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to recognize where a body part is more easily.
10. Remind yourself that this reduced ability to recognize where a body part is most likely due to changes in this person's brain. It is rarely due to this person's desire or intention. Be compassionate, patient, and tolerant.

M. When this person hears a sound, does she/he seem to recognize where the sound is coming from?

1. Monitor changes in how easily this person locates the source of a sound that is to the left versus right of her/him. Look for evidence of this by how quickly, easily, and accurately she/he responds to a sound, identifies a sound, or turns to a sound that comes from various locations around her/him.
2. Talk to this person and present sounds to this person from the location around her/him that is most effective.

3. Discern if one ear of this person hears more easily, quickly, or accurately than the other. If it does, then present the sound so that it is closer to the 'better" ear.
4. Approach this person on the side she/he can most easily hear.
5. Discern what sounds are easier for her/him to hear, such as low or high pitched sounds certain consonants, certain familiar voices. Adjust the sound to make it easier to hear, especially those coming from locations that are less effective. For example, increase the volume, have a familiar person say the words, make the sound more pleasant, distinct or familiar, or lower the pitch of the sound, such as your voice when speaking.
6. Modify the environment to allow her/him to more easily hear the sound. For example, reduce background noise, such as fans and running water, change the location of the sound, or match the sound with what this person sees visually, such as a dog barking when she/he sees a dog.
7. Draw this person's attention to the sound.
8. Continue to watch this person closely to discern how well she/he is hearing sounds, you, or an event that is occurring at all locations at this moment in time. Adjust your communication, the environment, and the task to help her/him hear more easily or to compensate for her/his reduced ability to hear. (Please see other sections of this CIIP for specific suggestions.)
9. Remind yourself that this reduced ability to localize sound is most likely due to changes in this person's ears or her/his brain. It is rarely due to this person's desire or intention. The comment "She/he hears what or when she/he wants to hear" is usually false and a misinterpretation of this person's abilities or desires. Be alert for conditions, such as a car driving by or other background sounds that you may not notice easily, but which could affect this person's ability to hear at a given moment. Be compassionate, patient, and tolerant.

Cognitive Impairment Intervention Protocol (CIIP) for Cognitive Functions of a Person with Cognitive Impairment: III. EXECUTIVE FUNCTIONS

Look for ways to help this person categorize, organize, manipulate, and use information received, by helping her/him to more easily:

- Recognize the importance of various pieces of information
- Use information to solve problems
- Use information to make decisions and plan

A. Does this person pay attention to, and stay focused on a task, an object, or what I am saying?

1. Reduce distractions by modifying the environment, the task, and your interactions with this person, since this person may be easily distracted by other stimuli in the environment, even when she/he wants to pay attention. Remind yourself that her/his brain's ability to screen out or ignore irrelevant stimuli might be impaired.
2. This person may find her/his mind wandering when trying to concentrate, even when there are no distractions. Remind yourself that this person may have difficulty sustaining focus and attention on a task, object, or words if she/he has trouble concentrating. Help this person sustain focus and concentration by modifying the environment, the task, and your interactions with her/him.
3. Discern this person's level of interest or desire, at this time, regarding a task, object, or what you are saying. If she/he is disinterested, then try again at another time.
4. Present tasks, objects and comments only when this person is emotionally and physically ready to pay attention. For example, avoid presenting them when she/he is in pain or is emotionally distressed.
5. Get this person's attention before presenting a task, object, or comment.
6. Talk and/or touch this person, and look into her/his eyes, before presenting a task, object, or request to help her/him have time to shift attention to you.
7. Be the strongest stimulus in the environment, both before and throughout your interaction with this person
8. Get and keep this person's attention and focus through touch (when appropriate), placing your face close to hers/his, maintaining eye contact, speaking more loudly, or positioning yourself and contrasting with your surroundings, so as to be more visible to her/him. Avoid calling or talking to her/him from across the room.
9. When using touch to keep this person's attention, watch this person to ensure she/he is comfortable with the touch. Occasionally gently squeeze or stroke her/his hand, arm, or leg to draw her/his attention back to you or to help her/him relax.
10. When this person is engaged in a task, avoid distracting her/him with unnecessary interactions, such as asking questions or touching.
11. Avoid environmental distractions, such as noise and visual stimuli. For example, close the door, turn off the telephone ringer, and reduce the number of items in the area of the task, such as excess dishes from the dining room table.

12. When speaking to this person, make your most important point first while she/he is still focusing on your words.
13. Use short words and sentences.
14. Present one idea and request at a time.
15. Allow enough time to process each point you are making, but a short enough time to prevent her/him from forgetting or losing track of the thread of the conversation.
16. When this person is engaged in a behavior that is distressing to her/himself or others, consider allowing the behavior to continue for a short time, until it gradually stops due to this person's reduced ability to concentrate and focus on the task or to complete the behavior. For example, if someone is going into a room and looking through someone else's things, discern if it is more effective to wait until the person stops on her/his own before attempting other interventions, such as persuading her/him to stop the behavior or distracting her/him with some other activity.

B. Does this person figure out what I mean, even if she/he can't hear or understand me very well?

1. Remind yourself that if this person is an older adult, she/he may have age-related hearing and vision loss. Enhance this person's ability to hear you by presenting information in a low pitched and calm voice, slowly and clearly enunciated, and after you have her/his attention. Reduce noise and distractions in the environment.
2. Talk to this person when she/he is calm, relaxed, and well rested. Remind yourself that emotional distress and fatigue will likely decrease this person's ability to figure out what you are saying.
3. Discern if this person can hear you well enough to understand you.
4. Discern if this person can interpret what you are saying by guessing your content, even if she/he couldn't hear you. For example, you may see evidence of impaired ability to analyze a situation and interpret your words, if she/he says "drecked?" when you have said "dressed" when she/he is in pajamas.
5. Provide an obvious context for this person. For example, orient this person to the time and situation by saying it is morning and that she/he is in pajamas, before offering to help her/him get dressed.
6. Use nonverbal interactions, such as gestures and touch to communicate with this person. Watch her/him to ensure she/he is comfortable with your touch. Remind yourself that all touch is a form of communication. Use touch to help her/him understand what you are asking. For example, touch her/his body part when asking her/him to move it or if it hurts.
7. Modify your interactions and the environment to better accommodate sensory changes, since this person may have an increased dependence on sensory functions when her/his brain cannot compensate for impaired sensory functions.

C. Does this person remember what she/he sees, hears, or figures out?

1. Present information to this person in a way that increases her/his ability to remember it. For example, present information so she/he can both see and hear it, such as a towel when you say it is time for a shower.
2. Help this person to relax when she/he is receiving and trying to remember information, so she/he can think and remember more easily.

3. Present information when this person is comfortable, free of pain, and is emotionally calm. Avoid giving her/him information when she/he is distressed.
4. When giving information, get and keep this person's attention and focus through touch, (when appropriate), placing your face close to hers/his, maintaining eye contact, speaking more loudly, or positioning yourself and contrasting with your surroundings, so as to be more visible to her/him.
5. Ensure this person has adequately received any information to be remembered. That is, ensure that she/he has correctly seen and heard the information when it was initially presented. For example, when you said you would help her/him with a shower, make sure she/he heard "shower" and not "flower".
6. Ensure this person has adequately interpreted the information to be remembered. That is, ensure that she/he has correctly interpreted the information when it was initially presented. For example, she/he may have heard "shower" but didn't realize you meant she/he was going to take a shower, rather than you.
7. When this person's response seems inappropriate, see if she/he is remembering a piece of information incorrectly or is remembering different information than you expected and therefore is basing her/his response on an inaccurate assumption. For example, when you said you would help her/him with a shower, you were brushing the dog, and she/he assumed you were intending to give the dog a shower.
8. Present any information she/he needs to remember in a clear and concise manner. Avoid giving information when there is distraction, or while you are doing something else. Avoid giving confusing information or unintended cues. She/he may remember what she/he saw, instead of what she/he heard. For example, she/he may remember irrelevant information rather than the intended information when you told her/him, while clearing the breakfast dishes, that you would help her/him with a shower in a few minutes. She/he may remember the breakfast dishes she/he saw rather than what she/he heard you say, causing her/him to think she/he is supposed to eat rather than shower.
9. Present visual cues when telling this person information to remember. For example, when telling this person she/he will be going to the doctor in 20 minutes, give her/him a note with the same information.
10. Repeat suggestions, explanations, information, and requests to this person as often as is necessary to compensate for impaired memory. Use the same words when repeating them.
11. When this person asks the same question frequently in a short period of time, remind yourself that a repeated question may be due to forgetting that she/he had asked it or forgetting the answer. It could also be due to this person thinking, consciously or not, that it had been some time since she/he had last asked it. If it is due to memory loss, then simply repeat your response. Give the same response in the same way that you did when your response first satisfied her/him. For example, if she/he asks repeatedly when lunch is, respond with the same words, tone of voice, and hand gestures you used to respond when she was satisfied with your response. By simply repeating it, you will relieve your own frustration and fatigue. Avoid the temptation to vary your response until you come up with the one that stops the questions once and for all. Also, provide a note to remind her/him, invite her/him to help you make lunch, or offer her/him some food now if she/he is hungry. Respond in a warm reassuring tone of voice.
12. Be as consistent and predictable as possible. Avoid changes in the environment, schedule of events, the way tasks are performed, who helps this person with tasks, and the way in which caregivers and other people interact with her/him.

13. Use notes and other written cues. For example, use signs to inform this person where things are and when activities will occur.
14. Explain what you are doing and orient this person as often as necessary.
15. Avoid quizzing this person or putting her/him on the spot to produce a word or name. Pressure will likely make it more difficult for her/him to remember the word or name.
16. Introduce and identify people, even when she/he has met them before. Be subtle if this person might be embarrassed about not remembering names or recognizing who people are. Avoid quizzing this person or asking her/him to guess.
17. Give this person enough time to remember and respond during a conversation or to a question.
18. Avoid the temptation to test this person's memory or to encourage her/him to practice remembering, for example, with memory games, unless she/he particularly enjoys them.
19. Remind yourself that the memory might be there in the person's mind, but she/he just isn't finding it at the moment. Help orient this person to a change in topic, activity, or expectation, so she/he can "place" or find the different topic, fact, or skill in her/his mind. When changing the topic of conversation, for example, provide information about the topic before making your point about the topic, such as when talking about a relative starting a new job, say "Bill's daughter Mary also has a new job. Mary said she is sorry she chose the job she did." This gives time and orienting information to help this person shift from the first relative to Mary. It also helps her/him to focus on and to "place" in her/his mind who Mary is and what previous information she/he had about Mary's job situation.
20. Remind yourself that memory is very complex. Her/his ability to remember information from long ago may be more intact than her/his memory for events that occurred recently or a few moments ago. She/he may also be able to remember certain types of information more easily than others or at certain times of day more easily than at others. Information or skills that she/he used frequently throughout her/his life will likely be retained longer. For example, an engineer may be able to take apart and reassemble appliances even when very cognitively impaired.
21. Present tasks, task objects and methods of performing tasks in ways that are familiar to this person and are as similar as possible to the way she/he performed the tasks throughout most of her/his adult life. Rely on the skills and information this person has used throughout most of her/his adult life.
22. Ask this person questions with a "yes" or "no" response or that invite opinions, rather than facts.
23. Remind yourself that this person's ability to remember may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to remember more easily.
24. When this person has difficulty remembering, adjust your communication, the environment, and the task to help her/him remember more easily or to compensate for her/his memory loss. (Please see other sections of this CIIP for specific suggestions.)
25. Remind yourself that this reduced ability to remember is most likely due to changes in this person's brain's ability to remember or to express her/himself. It is rarely due to this person's desire, intention or to manipulation. Comments such as "She/he can remember what or when she/he wants to" is usually false and a misinterpretation of this person's abilities or desires.

D. Does this person easily make simple decisions, for example stating a preference or choosing among options, such as eggs rather than oatmeal for breakfast?

1. If this person has difficulty making decisions, present options to her/him.
2. Frequently assess this person's ability to recognize and choose among options.
3. Adapt your approach and presentation of options to this person's ability to choose among options. Remind yourself this person can make choices and express preferences regardless of her/his level of confusion or ability to process information, even when severely impaired.
4. Simplify your presentation of this person's options when she/he is making a choice, especially as she/he becomes increasingly confused and less able to understand multiple, unfamiliar, or abstract options.
5. Try to be creative when discerning what she/he might want or need.
6. If this person is nonverbal, encourage her/him to point to what she/he wants.
7. List specific options available. For example, say, "Would you like eggs, cereal, or a muffin for breakfast?" rather than "What would you like for breakfast?"
8. Use words that are familiar and recognizable to this person.
9. List fewer options at a time. For example, say, "Would you like eggs or cereal for breakfast?" rather than "Would you like eggs, cereal, or a muffin for breakfast?"
10. Present each option as a "yes/no" choice, when necessary. For example, say, "Would you like eggs for breakfast?" and then, regardless of her/his response say, "Would you like oatmeal for breakfast?" in order to better understand what her/his desires might be.
11. Show this person the options rather than simply naming them. For example, show her/him eggs and cereal, to make the options more concrete and visible.
12. Help this person feel or taste the options, if she/he is unable to see or recognize objects. For example, put a small taste of each option in her/his mouth and watch for her/his response to each option.
13. Present options slowly enough to allow time for her/him to process the information, but quickly enough so she/he doesn't forget the options presented.
14. Discern this person's preferences, needs, and goals at this moment in time, to increase the chances the options will be desirable.
15. If this person appears unable to make a decision or choose an option at this time, present the opportunity or choices again later.

E. Does this person easily shift from one activity to another?

1. Give this person enough time before and during the shift, to move from one thought or activity to another. For example, enter this person's visual space and wait for her/him to focus on you before speaking; when offering to help this person take a bath or shower, allow her/him time to process your words before handing her/him a robe or beginning to undress her/him.
2. Assume this person needs time and help shifting focus, even when she/he seems to be uninvolved in any activity, such as staring off into space or sitting with her/his eyes closed.
3. Avoid changes in routine, expectations, the environment, the tasks, and your interactions with this person.

4. Avoid rapid or unexpected shifts in conversation, activities, or expectations. For example, when passing this person in a hall or room, avoid saying a brief "Hi" and short comment before moving on. Remind yourself that this person may need to use too much energy to shift her/his focus and orientation to you. If you don't have time to help her/him shift gradually, then simply pass by with only a smile. If while passing she/he and you establish eye contact and it is clear she/he has shifted her/his attention to you, then slow down and smile. If she/he says something to you, then stop and say a few words in response to her/him comment. Stay and converse as long as you are able.
5. Orient this person to the shift in focus or activity. For example, orient this person to the time and situation by saying it is morning and that she/he is in pajamas, before offering to help her/him get dressed. When changing the topic of conversation, provide information about the topic before making your point about the topic. For example, when talking about a relative going on vacation, say "Bill's daughter Mary is also going on vacation. Mary said she is sorry she chose Florida instead of California." This gives time and orienting information to help this person shift from the first relative to Mary. It also helps her/him to focus on and to "place" in her/his mind who Mary is and what previous information she/he had about Mary's vacation.
6. Avoid assuming this person doesn't want to do a task, if she/he doesn't respond immediately to your suggestion. Assume she/he may need time to shift her/his focus to your suggestion or to the new task.
7. Show this person other people who are doing a task before suggesting she/he do it. For example, bring this person to the dining table after other people are already there, so this person can more quickly see it is time to eat lunch.

F. Does this person easily get started on a task or a response?

1. Remind yourself that this person's apparent lethargy or lack of initiative is most likely due to impaired brain functioning or an emotional disorder, such as depression. It is rarely due to laziness or this person's intention.
2. Have this person professionally diagnosed to discern how much her/his reduced initiative is due to impaired brain functioning, to an emotional disorder such as depression, or to something else. For example, if this person seems to be uninterested in engaging in most activities or stays in bed or lounges around, consult a medical professional for diagnosis and recommendations.
3. When this person's reduced initiative is due to impaired brain functioning, compensate for the reduced initiative by providing activities and suggestions. Use gentle and respectful humor, persuasion, and creativity to encourage her/him to participate in an activity or task. Participate in the task with her/him. Use objects of interest, aromas, and music in the environment to invite and stimulate her/him.
4. When an emotional disorder such as depression appears to be the cause of reduced initiative, seek medical advice and treatment.
5. When boredom seems to be the cause of the reduced initiative, introduce engaging stimulation and activities this person can easily do, rather than relying on conversation or a spectator type of stimulation, such as TV or watching someone else do an activity.
6. Remind yourself that this person's difficulty with initiation, that is, getting started on a specific task or movement, is most likely due to impaired brain functioning. It is rarely due to obstinacy or resistance or this person's desire or intention. Be compassionate and patient.

7. When this person has difficulty getting started on a task, such as standing up, allow adequate time between the request or invitation and the expectation of a response. Wait and/or repeat the request as often as necessary to allow adequate time and to help her/him remember the request.
8. Initiate the task for this person, so she/he can then continue it. For example, when she/he is sitting in front of a plate of food at the dining table, pick up the fork, put it in her/his hand and move her/his hand toward her/his mouth until she/he begins to do it on her/his own.
9. Avoid assuming this person doesn't want to do a task, if she/he doesn't respond immediately to your suggestion. Assume she/he may need time to get started on the task.
10. When this person stops or hesitates before entering doorways or small rooms, patiently encourage her/him to continue. Say that you are with her/him. Encourage her/him to focus on a line on the floor in the room and to approach it or step over it. Stand in front of her/him and ask her/him to focus on your face while walking forward. Have someone else enter ahead of this person. Try a little distraction to help her/him avoid noticing the doorway or room as much.

G. Does this person know how much time has passed, for example that she/he has been sitting at the dinner table for only two minutes rather than 20 minutes?

1. Have accurate clocks available throughout the environment.
2. Encourage this person to wear a watch and to use it.
3. Have signs or notes that indicate the starting and ending time of a task.
4. Tell this person verbally, but in a subtle way to avoid embarrassment, what time it is and how much time has passed since she/he began the task. For example, if she/he leaves the dining table within minutes of sitting down, say "It's 12:00 noon, should we take 10 more minutes to eat?"
5. Distract this person by singing or engaging in a lively conversation to prevent her/him from noticing the task or becoming uncomfortable with a perception that a lot of time is passing.
6. Inform this person as the task progresses what is being done and how close it is to being completed, so she/he focuses more on the task and less on how she/he feels or the passing of time. For example, show her/him the soap on her/his body when she/he wants to leave the shower too soon.
7. When this person asks the same question frequently in a short period of time, remind yourself that a repeated question may be due to this person thinking, consciously or not, that it had been some time since she/he had last asked it, rather than forgetting that she/he had asked it or forgetting the answer she/he had received. For example, if she/he asks repeatedly when lunch is, tell her/him that you haven't forgotten to call her/him, or invite her/him to help you make lunch, or offer her/him some food now if she/he is hungry.
8. When this person confuses the amount of time between events in the past, ignore the confusion and focus on the feelings and the point she/he is trying to make. For example, when she/he, who is now 90 years old, says she/he needs to go home to feed her/his children, reassure her/him that the children are being fed well and that she/he did a wonderful job of raising them, rather than saying the children are now adults and don't need to be fed. If she/he currently thinks of her/himself as 50 years younger than she/he is now, focus on her/his concerns rather than on correcting the facts of time and history.

H. Does this person recognize her/his own abilities, needs, desires, and mistakes?

1. Remind yourself that this reduced ability to recognize her/his own abilities, needs, desires, and mistakes, that is, a lack of insight, is most likely due to impaired brain functioning. It is rarely due to denial or this person's desire or intention. Be compassionate and tolerant.
2. Remind yourself that this person may not know that she/he knows something. For example, she/he may know which chair she/he always sits in for lunch, but may say she/he doesn't know, even as she/he walks to the chair on her/his own and sits down.
3. When this person doesn't seem to know she/he is impaired, or doesn't seem to realize how impaired she/he is, or doesn't understand the implications of her/his impairment, avoid calling her/his attention to the impairment or telling or explaining to her/him what she/he is able or unable to do.
4. Avoid giving this person information that is untrue. Withhold information that might be unnecessary, confusing, or painful, but ensure that the information you do give is accurate and honest.
5. Avoid asking questions that require self analysis and insight, such as "What do you want?" "What are you doing?" "Where are you going?" "Why are you crying?" "What is wrong?" "How are you feeling?" or "Why are you doing that?"
6. Discern what this person is trying to do or say and offer options or suggestions. For example, "Are you looking for your purse?" "You look sad." or "Let's find some tea."
7. Remind yourself that this person may ask for one thing when she/he actually wants or needs something else. For example, she/he may say she/he wants to go home, even when she/he is sitting in the home she/he has owned for 50 years. What she/he actually wants may be to use the bathroom, eat, leave a confusing environment or noise, do a task she/he feels she/he should be doing, such as feeding her/his children, be comforted because she/he is anxious and uncertain, get exercise, be relieved from boredom, or to return to her/his childhood home.
8. When this person says something that seems surprising or inappropriate, avoid correcting her/him or asking her/him for explanations, especially at night. Talk conversationally with her/him to discern if she/he is unclear about what is a dream, a memory, or a real event.
9. Discern how this person is feeling by observing her/his behaviors and comments. Avoid asking her/him questions about her/his feelings, such as "Are you feeling sad?"
10. Avoid confronting this person with her/his mistakes or inaccurate statements. Discreetly fix the mistake without calling attention to it. For example, when this person puts the milk pitcher in the oven, quietly move it to the refrigerator.
11. Avoid correcting this person's beliefs or statements. For example, say "That must be upsetting. I'll help you." rather than "No, they weren't stolen. You just put them somewhere and forgot."
12. When she/he makes a mistake in public, discern what she/he actually wants and discreetly help this person move to an appropriate space. For example, if she/he removes her/his clothes because she/he is hot or the clothes are uncomfortable against her/his skin, adjust the air temperature or help her/him to the bedroom to change clothes. Avoid telling her/him to stop the behavior. Instead, respond to her/his need or desire.
13. Avoid calling attention to this person's swearing or incorrect use of words. For example, when she/he says "No" when meaning "Yes", simply respond as though she/he said "Yes".
14. Encourage and reassure this person by telling her/him how well she/he is doing as a task progresses.

15. Avoid assuming she/he knows what she/he needs or wants, or will take initiative to ask for what she/he needs or wants. For example, when necessary assess for pain without asking questions. Do not wait until she/he asks for pain medication before giving it to her/him.
16. Help her/him recognize her/his needs and desires.
17. Use cues or information that draws this person emotionally rather than simply cognitively. For example, rather than using a sign that says "den" with an arrow to help this person come to a quiet den area when she/he feels the room she/he is in is too noisy, place a plant with a low-light cozy lamp in a spot that is visible from the noisy room. As she/he approaches the plant and lamp, she/he may be able to see the den and be drawn to it. This allows this person to meet her/his own needs emotionally without having to recognize them cognitively or to understand the word cues.
18. When this person tries to do something that is unsafe, or something she/he is not capable of doing, distract her/him or ask her/him to help you with something else, rather than telling her/him "No, you can't do that! You'll hurt yourself."
19. Observe this person closely to discern what she/he can do and understand. Avoid overestimating or underestimating this person's abilities. Assess frequently since her/his abilities will change over time and possibly from moment to moment.
20. Observe this person closely and frequently to discern her/his needs, goals, and desires, and to recognize when they change.
21. Find out what goals she/he has had throughout most of her/his adult life. Ask people who knew her/him well what kind of person she/he seemed to want to be. Discern what characteristics were high priorities for her/him when trying to be successful as a person, such as accomplished, compassionate, admired, busy, elegant, and socially popular.
22. Remind yourself that this person can make choices and express preferences even when very severely impaired. Be creative when discerning what she/he might want or need.
23. When this person is unable to recognize or communicate desires, present options in a way she/he can understand and 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 food option in her/his mouth and watch for her/his response to each option.
24. At all times, watch and listen to this person to see how she/he is reacting to what you are doing and saying. Immediately change what you are doing or how you are doing it, when you see or hear negative reactions.
25. Adapt your presentation of options over time and moment to moment to accommodate changes in this person's ability to recognize her/his own needs, desires, and preferences. Remind yourself this person can make choices and express preferences regardless of her/his level of confusion or ability to understand and process information.

I. Does this person stop doing a task or focusing on a thought when it is completed or when it needs to stop?

1. Remind yourself that this person may not know when a task or thought is completed or may not be able to stop her/himself when it is completed. For example, she/he may continue to wipe a table long after it is clean, say a sentence over and over again, or put on multiple shirts when dressing.
2. Keep daily routines and tasks as consistent and simple as possible. Avoid changes. Perform a task the same way each time with the same task objects, people, and order of task steps, so she/he can develop a sense of what the task consists of and when it is time to move onto the next task.

3. Discern how important it is to prevent this person from continuing to do a task or focusing on a thought, even when it is completed. If there is no harm in this person continuing the task or thought, then focus on what the person is feeling and respond to the feeling, or wait until she/he stops the task and thought before initiating another with her/him.
4. When she/he needs to stop doing a task, thought, or behavior, discern the reason for her/his continuing the behavior, thought, or task. Respond to her/his needs or desires and feelings, rather than focusing on the task, thought, or behavior. Avoid drawing her/his attention to the behavior.
5. Gently inform this person, clearly and kindly when the task is done or an activity is over.
6. Gently remove a task object or take this person's hand when the task is done.
7. Help this person shift attention and focus from this task or thought to the next task and thought. Distract her/him, use humor, or move to another room with her/him.
8. When you need to quickly stop this person from continuing a task or behavior, remain calm, reassuring, and comforting. Avoid using many words or a loud voice. Avoid arguing or rationalizing. Avoid touching her/him unless it is helpful or necessary. For example, if this person is reaching out to strike another person, place yourself between this person and the other person about to be struck. If she/he is about to pour boiling water onto her/his hand instead of a cup, remove or at least shift the direction of the tea kettle spout.
9. Respond positively to a persistent thought or idea, even when she/he needs to stop the thought or behavior. Avoid saying "No" or "Stop", since that would require this person to rapidly shift out of the idea or behavior. Offer a different idea, repeat key words she/he is using and initiate a conversation about them, or suggest you and she/he do something else first. For example, when she/he says she/he wants to go outside when it is too cold or dangerous, say "That would be fun. For now, I would like your help with supper." Then immediately engage her/him in the task to help shift her/his focus. Or ask her/him questions about when she/he used to go hiking in the mountains in the past.
10. When this person has problems with collecting too many things or putting things in places she/he cannot find later, ask if she/he would like help with cleaning or straightening up. If she/he refuses, and it is very important to reduce the number of items collected or hidden, quietly find or remove items a few at a time when she/he is out of the room.

J. Does this person easily control her/his impulsive responses to her/his own thoughts and feelings, by censoring, delaying, or pacing the responses?

1. When this person does or says something that immediately comes to her/his mind without first considering it and it offends you, remind yourself that this impulsive behavior is likely due to changes in this person's brain. It is rarely due to this person's true desire or intention. Avoid taking her/his actions or comments personally.
2. When this person says something that offends another person, ignore the comment and reassure the offended person.
3. Reassure family members and friends from the past, that these impulsive comments or behavior most likely do not reflect feelings this person has long held and hidden. They are more likely immediate impulsive reactions to current events and this person's distressing situation. This person may have intense feelings of anxiety and anger about her/his cognitive impairment that are then directed at other people.

4. Watch this person closely to see when she/he might say or do something without first "counting to 10" or considering the consequences. Gently distract her/him or remove the trigger for the thought or reaction. For example, if she/he is about to swear or say "her hair is ugly" about someone who is walking by, comment on the flowers in the vase or this person's own hair.
5. Remind yourself that even when she/he appears to be aware of what she/he is doing, it might not mean she/he can control it, or that she/he can understand or analyze it quickly enough to prevent the action. For example, if this person squeezes a caregiver's breast as she leans over to adjust something in this person's chair, then winks and grins at another caregiver, it doesn't mean this person could have easily controlled the behavior. She/he could have squeezed the breast before she/he could stop her/himself, but knew afterwards that she/he shouldn't have done it. Deciding that it was wrong took longer than did the action to squeeze. This person's next thought might have been, "but it felt good", so she/he winked at another caregiver. This person may not have been able to quickly appreciate the consequences of the wink and squeeze or the subtle differences between the effects of acting on a sexual impulse versus merely saying or thinking a sexual thought. She/he may not recognize the extent to which various actions are inappropriate, or the risks of offending caregivers she/he depends on.
6. Help this person to get adequate rest, since impulsivity might increase with fatigue.
7. Help this person stay busy to avoid boredom, irritation, and anxiety which could increase impulsive behaviors and comments that are offensive.
8. Modify the environment, tasks, and your interactions to prevent misinterpretation or unintended invitations for impulsive behaviors and comments.

K. Does this person know and follow a sequence of task steps or pieces of information or logic?

1. Keep tasks steps, person assisting, and task objects as consistent and familiar as possible. Avoid changing the order of the task steps from day to day.
2. Order the task steps in the same order she/he has performed the task throughout most of her/his adult life.
3. Discern when an order to task steps is necessary, and suggest the conventional order only when necessary. For example, if this person puts clothes on in an unusual order while dressing, such as one pant leg on before she/he puts each sock on, avoid calling her/his attention to it, unless the change in order confuses her/him further.
4. Write the order of task steps in a note or sign that this person can follow as she/he performs the task. Make sure this person can read and understand what she/he reads when she/he sees the note or sign.
5. Present each task step one at a time.
6. After each task step is done, tell this person what task step comes next, if necessary.
7. Avoid rationalizing or trying to convince this person when she/he is confused or disagrees with your logic. Instead, nurture her/his trust in you and your judgment and suggest alternative explanations or options.

8. Avoid correcting this person when she/he confuses the chronology of historical events in her/his own life. Ignore the confusion and focus on the feelings and the point she/he is trying to make. For example, when she/he who is now 90 years old, says she/he needs to go home to feed her/his children, reassure her/him that the children are being fed well and that she/he did a wonderful job of raising them, rather than saying the children are now adults and don't need to be fed. If she/he currently thinks of her/himself as 50 years younger than she/he is now, focus on her/his concerns rather than on correcting the facts of time and history.

L. Does this person do more than one thing or think more than one thought at a time?

1. When approaching this person, do only one thing at a time. Move into her/his visual field, then wait until she/he focuses on you, then touch if she/he welcomes touch, then speak. Begin speaking with a comment, such as "Hello, Mary" before asking her/him a question.
2. Present only one idea or one task step at a time. Avoid sentences with multiple ideas. Say "Let's walk to the bathroom." rather than "Let's go to the bathroom and take a shower."
3. Pause long enough between single-idea sentences to allow time for this person to process the idea before introducing the next idea.
4. Avoid using many words when this person is emotionally distressed, so she/he doesn't have to think and feel at the same time.
5. Avoid asking her/him to do something when she/he is emotionally distressed. For example avoid asking her/him to stop a behavior when she/he is focused on her/his emotions, since it may be difficult for her/him to figure out how to stop an action and to feel intense emotions at the same time.
6. Avoid calling attention to her/his behavior since it may be difficult for her/him to cope with embarrassment about the behavior and change the behavior at the same time.
7. Have one person assist at a time.
8. Help this person prioritize among a variety of options or task steps, since she/he may have difficulty holding all the options or task steps in her/his mind and choosing which one to do at the moment.

M. Does this person know what something is even when she/he can't see, hear, touch, taste, or smell it?

1. Remind yourself that this person may have difficulty imagining an object when she/he can't see, hear, touch, taste, or smell it. To her/him, it may not exist if it isn't in front of her/him.
2. Keep options concrete, if this person has difficulty creating a picture in her/his mind of an object. For example, show this person eggs and cereal as options for breakfast rather than simply showing her/him a menu or asking her/him which of those she/he wants.
3. Tell this person what an object is, if it is difficult to recognize or seems to be invisible. For example, tell her/him there is water in a glass even when the glass is clear, since the water can't be seen. When the glass is opaque, tell and show her/him what is inside it.
4. Provide calm and quiet areas within sight of caregivers. This person may want to be in a less confusing place, such as a bedroom, but may also want other people visible for security and in case she/he needs help.

N. Does this person's expression of emotions match the intensity of her/his emotions?

1. When this person expresses an emotion strongly, such as tears or appears sad, tell her/him "You look sad." If she/he replies, "No, I'm fine," it might indicate her/his expression of emotion is not matching the actual intensity of her/his emotion. Respond to her/his actual level of emotion and do not call further attention to her/his expression of emotion.
2. If she/he doesn't know how she/he feels, even when expressing emotion, reassure her/him and move to another topic.
3. Avoid asking her/him why she/he is feeling the emotion, since she/he may not know.
4. When she/he appears very angry, discern the actual level of intensity of the anger and respond to the actual level. For example, if a little irritation is producing profuse swearing, respond to the irritation without drawing attention to her/his swearing.
5. Remind yourself that this person's exaggerated or minimized expression of an emotion, or her/his switching from one emotion to another rapidly and without apparent reason, are likely due to changes in this person's brain. They are rarely due to this person's manipulation or intention. Be compassionate, patient, and tolerant.
6. Take this person's emotions and expression of emotions seriously, even when they appear to be exaggerated. Avoid trying to convince her/him she/he doesn't really feel that bad or dismissing the situation causing distress. Avoid talking about her/him in front of her/him. Reassure her/him and then distract with another topic or activity.
7. When this person looks intimidating or more angry and stubborn than she/he actually is, because of her/his slightly monotonic speech and rigid set face, remind yourself that this appearance may be due to changes in the brain. Inside, she/he may feel very differently. The brain changes may be causing a reduced variation in speed and range of movement. Her/his pattern of rhythm and cadence of speech and of movement of arms or legs while walking may become more abrupt and rigid. Avoid misinterpreting her/his physical changes as a reflection of her/his emotions.
8. Help this person feel she/he is in control, especially when she/he seems to focus anger about a lack of control or about her/his disabilities on other people.
9. When this person is angry, anxious, or sad, let her/him know you understand she/he is upset and reassure her/him.

O. Does this person adapt to new situations by problem solving and explaining to her/himself the circumstances?

1. Avoid changes in this person's environment. Keep the surrounding space and structure of tasks and daily schedules as consistent as possible.
2. Keep tasks and caregivers consistent over time.
3. When change is necessary, make as little change as possible and introduce the change slowly and carefully. She/he may feel anxious or unable to do a task in unfamiliar surroundings or with unfamiliar task objects. For example, she/he may have difficulty brushing her/his teeth with pump toothpaste rather than tube toothpaste, even though physically the pump toothpaste may be easier.
4. Keep tasks and routines consistent with how they were through most of her/his adult life.

5. Explain changes since she/he may not be able to explain or interpret unfamiliar surroundings and events to her/himself. For example, when eating in an unfamiliar space, say "Today we are eating here, but tomorrow we will be in our own dining room." Remind yourself that this person may not be able to understand your explanations, even though she/he may talk as though she/he does.
6. Watch her/him carefully to discern her/his needs, since she/he may not know how she/he feels and may not have ideas of how to help herself feel better. For example, if she/he appears to be distressed, suggest you and she/he go to another room where it is quieter. If she/he is bored, use information about her/his past experiences, interests, hobbies, and goals to initiate conversations and suggest activities to relieve the boredom. Be sensitive and careful when making suggestions, since she/he may be unaware of the boredom and have difficulty thinking of ways to alleviate the boredom.
7. When she/he is angry, frightened, or panicked and is accusing you of something that isn't true, avoid being defensive and taking it personally. Let her/him know you are on her/his side. Tell her/him you and she/he will solve the problem together. Remind yourself that she/he may not be able to think of possible explanations for an experience and may get stuck on an inaccurate explanation, because of changes in her/his brain. Avoid contradicting or correcting her/him. For example, if the water tastes odd due to medications she/he is taking, and she/he accuses you of poisoning her/him, say, "Oh the water tastes bad; let's find something else to drink."
8. Conserve this person's energy. Make tasks easier or do the tasks for her/him. Even if she/he can do a task, it is likely hard work and might take energy away from other more pleasurable or more difficult tasks and activities.
9. Think of this person as a unique individual at all times. Tailor your observations and responses to her/him in this specific situation at this particular time.
10. When you are frustrated, remind yourself of what you like and love about this person.

**Cognitive Impairment Intervention Protocol (CIIP) for
Cognitive Functions of a Person with Cognitive Impairment:
IV. EXPRESSIVE FUNCTIONS**

Look for ways to help this person's brain tell her/his body what to do, by helping her/him to more easily:

- Coordinate her/his body parts to perform a task
- Express a thought

A. Does this person easily produce correct words when speaking, that is, words come easily to this person, the words seem to match what she/he is trying to say, and the words are actual words rather than nonsense sounds?

1. Remind yourself that any reduced ability to produce words is most likely due to changes in this person's brain, affecting the ability to express her/himself with language, to tell her/his mouth how to say the words, or her/his mouth's ability to shape and say the words. It is rarely due to this person's desire, intention or manipulation. Be compassionate, patient, and tolerant.
2. Remind yourself that this person's ability to produce words may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to produce particular words more easily.
3. Continue to watch and listen to this person closely to discern what she/he may want to say at this moment in time. Adjust your communication, the environment, and the task to help her/him produce words more easily or to compensate for the decrease in her/his ability to express her/himself. (Please see other sections of this CIIP for more specific suggestions.)
4. Remind yourself that this person may be able to understand words more easily than produce words. Avoid underestimating her/his ability to understand what you are saying based on her/his ability to speak meaningful words.
5. Help this person to relax so she/he can think and speak more easily.
6. Avoid quizzing this person or putting her/him on the spot to produce a word or name. Pressure will likely make it more difficult for her/him to produce the word or name.
7. Ask this person questions that elicit a "yes" or "no" response, or an opinion, rather than a question that requests facts.
8. Have only people who are familiar to this person speaking with her/him.
9. Avoid situations where this person must speak on the phone.
10. Encourage this person to speak as often and as much as she/he would like.
11. Avoid encouraging her/him to talk more than she/he wants to.
12. Avoid calling this person's attention to mistakes she/he makes when speaking. For example, if she/he says "no" when she/he means "yes", respond as though she/he said "yes". If she/he uses incorrect words with similar sounds, such as "pip" when she/he means "pen", respond as though she/he said "pen".
13. When this person swears without emotion in the middle of a sentence, ignore the swear words and act as though she/he did not swear.
14. Discern what this person is trying to say and provide suggestions of words until they match what she/he is trying to express.

15. Allow this person time to produce words. Wait for her/him to complete a thought. Avoid rushing in too quickly to supply words.
16. Reduce reliance on words to interact with this person. For example, use nonverbal gestures to encourage her/him to gesture, and avoid asking her/him for more words when she/he is responding to a question.
17. When visiting, use activities with this person rather than conversations. For example, knit or wind yarn or look at photos together, rather than talk about the grandchildren.
18. Have objects available for her/him to point to, rather than having to say the words.
19. Label locations of frequently used items, so she/he can refer to written cues to help her/him say a word. For example, put a sign "socks" on her/his sock drawer, so she/he can easily see it and say "sock" when she/he is asking for her/his socks.

B. Does this person easily produce correct words when writing, that is, the words flow easily, the words seem to match what she/he is trying to write, and the words are actual words rather than nonsense markings?

1. Help this person to relax so she/he can think and write more easily.
2. Encourage this person to write as often and as much as she/he would like.
3. Avoid encouraging her/him to write more than she/he wants to.
4. Allow this person time to write the words. Wait for her/him to complete the task comfortably. Avoid rushing her/him.
5. Arrange the setting so this person is physically comfortable with the writing process, for example, adjust how high and close the chair and writing surface are, position the paper, and offer a pen that is easy to see and use and is familiar to this person. Address any physical pain or discomfort in her/his hand, fingers, and arm.
6. Avoid tasks or activities that require her/his writing.
7. Remind yourself that this person's ability to write words may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to write particular words or her/his name more easily.
8. Remind yourself that any reduced ability to write words is most likely due to changes in this person's brain, affecting the ability to express her/himself with written language, to tell her/his hand how to write the words, or her/his hand's ability to shape and "draw" the words. It is rarely due to this person's desire, intention or manipulation.

C. Does this person speak words as easily as she/he sings words? For evidence, note if she/he can sing a familiar song more easily than she/he can say the words, or if she/he speaks in rhymes or in simple songs.

1. Use music to help this person speak more easily, perform tasks, and feel comfortable.
2. Encourage this person to sing as much as she/he wants to.
3. When walking with this person, use a marching rhythm to help her/him walk more easily. Sing a song with a beat or have recorded music playing.
4. Use the same song and beat every time you walk to a particular destination.
5. Match songs to the content of your comments or conversation. For example, sing a song about food while inviting her/him to supper, or a song about water when bathing.

6. Sing a song as often as necessary, while performing tasks, such as "My Bonnie Lies over the Ocean", even if you sing it twenty times or more.
7. If this person uses rhymes or rhythm to talk, avoid calling her/his attention to it or discouraging her/him. In fact, use a similar rhyming or rhythm when helping her/him with a task or in conversation if it is helpful.

D. Does this person talk upon request as easily as she/he talks spontaneously?

1. Discern what conditions make it easier for this person to talk upon request.
2. Create a calm, quiet, comfortable environment by reducing noise, confusion, and the number of people in the room.
3. Have only one person talk with this person at a time.
4. Have only people who are familiar to this person speaking with her/him.
5. Help this person to relax so she/he can think and speak more easily.
6. Make comments to this person, rather than asking questions.
7. Avoid quizzing this person or putting her/him on the spot to produce a word, name, or fact. Pressure will likely make it more difficult for her/him to produce the words or name.
8. Ask this person questions that elicit a "yes" or "no" response, or an opinion, rather than a question that requests facts.
9. Speak in a casual and relaxed way with this person, in a manner that reflects a conversation, rather than a set of instructions or requests that demand responses.
10. Avoid situations where this person must speak on the phone.

E. Does this person do a task as easily upon request as she/he does spontaneously? For example, does she/he stand as easily when asked as opposed to when she/he isn't asked or simply does it on her/his own?

1. Remind yourself that any reduced ability to perform a task when asked is most likely due to changes in this person's brain, affecting the brain's ability to tell her/his body how or when to perform the task, or her/his body's ability to respond to the brain's instructions. It is rarely due to this person's desire or intention. The comment "She/he can do it when she/he wants to" is usually false and a misinterpretation of this person's abilities and desires. Be compassionate, patient, and tolerant.
2. Remind yourself that this person's ability to perform a task when asked may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to perform a task when asked more easily.
3. Continue to watch this person closely to discern when she/he is having difficulty performing a task upon request at this moment in time. Adjust your communication, the environment, and the task to help her/him perform the task more easily or to compensate for the decrease in her/his ability to perform the task. (Please see other sections of this CIIP for more specific suggestions.)
4. Help this person to relax so she/he can perform tasks more easily.
5. Reduce the need to tell this person when to perform a task. Set up conditions that inform this person without words that it is time to perform the task.
6. Follow a consistent order of tasks every day, so this person can more easily anticipate the next task to perform without being told.

7. Follow a consistent order of task steps every day, so this person can more easily anticipate the next task step to perform without being told.
8. Model the task to be performed. For example, sit at the table and eat your own dinner with this person when it is time to eat a meal.
9. Help this person perform the task in the same room and in the same part of the room each time the task is performed. For example, dress on one side of the bedroom and undress on the other side.
10. Help this person perform a task in a room and in a way that matches the place and way this person performed this task throughout most of her/his adult life.

F. Does this person do a task as easily when focusing on the task or thinking about how to do it, as opposed to doing the task automatically without thinking about it? For example, does she/he stand as easily when asked to “stand up” as opposed to “come to lunch”; or does she/he get dressed as easily when reminded of each task step, as opposed to being slightly distracted by a conversation about the weather?

1. Remind yourself that any reduced ability to perform a task when she/he thinks about it is most likely due to changes in this person's brain, affecting the ability to tell her/his body how or when to perform the task, or her/his body's ability to respond to the brain's instructions. It is rarely due to this person's desire or intention. The comment “She/he can do it when she/he wants to” is usually false and a misinterpretation of this person's abilities and desires.
2. Remind yourself that this person's ability to perform a task when she/he thinks about it may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to perform a task when she/he thinks about it more easily.
3. Continue to watch this person closely to discern whether at this moment in time, she/he is having difficulty performing a task because she/he is thinking about it. Adjust your communication, the environment, and the task to help her/him perform the task more easily or to compensate for the decrease in her/his ability to perform the task. (Please see other sections of this CIIP for more specific suggestions.)
4. Reduce the need to draw this person's attention to a task or task step. Set up conditions that help this person perform the task without thinking about it. Remind yourself that it is easier to tie your shoe if you don't think about each task step while doing it.
5. Slightly distract this person while performing a task. For example, sing songs or talk about the weather or upcoming activities while getting dressed.
6. Group tasks and task steps into chunks so this person performs them automatically. Discern how large a chunk or how small the task steps should be for this person to easily perform this task at this moment in time. For example, find the balance between thinking of a task as “taking medicine” versus breaking the task down into steps of putting the pill on a spoon, then putting it in her/his mouth, then sipping water and swallowing it. Watch to see if this person gets stuck on a task step, such as the last step of swallowing the water and pill.
7. Ask this person to think about a larger goal, so that she/he doesn't think about each step toward the goal. For example, ask her/him to come to lunch, rather than asking her/him to stand and then to walk toward the dining room.
8. Match the size of the goal of the task to this person's ability. For example, if the goal of taking a shower is too overwhelming, suggest a smaller goal of walking with you to the bathroom.

9. Avoid pauses between tasks and task steps, so that they flow smoothly into one another.
10. Follow a consistent order of tasks every day, so this person can more easily anticipate the next task to perform without being told.
11. Follow a consistent order of task steps every time a task is performed, so this person can more easily anticipate the next task step to perform without thinking about it.
12. Model the task to be performed. For example, sit at the table and eat your own dinner with this person when it is time to eat a meal.
13. Help this person perform the task in the same room and in the same part of the room each time the task is performed. For example, dress on one side of the bedroom and undress on the other side.
14. Help this person to relax so she/he can perform tasks more easily.
15. Help this person perform a task in a room and in a way that matches the place and way this person performed this task throughout most of her/his adult life.

G. Does this person move a body part as easily upon request as she/he does spontaneously?

1. Ensure this person is not in pain or discomfort when moving part of her/his body at this moment in time. When there is pain, have a professional diagnose and make recommendations of treatments to reduce the pain and discomfort.
2. Draw this person's attention to the body part to be moved.
3. Ask her/him to move it using a few simple words.
4. Touch the part of this person's body that needs to move, while asking her/him to move it. Watch this person to make sure she/he is comfortable with your touch. Either stop touching or modify your touch until she/he is comfortable.
5. Help this person move by stroking the body part and its joint, warming the joint with your hands or a warm washcloth, and cradling the joint while lifting it gently. Ask her/him to move a body part while she/he is relaxing in warm bath water.
6. Reduce the need to draw this person's attention to the task of moving her/his body part. Set up conditions that help this person perform the movement without thinking about it. For example, to help her/him move her/his arm, offer her/him an object so that she/he reaches for it without thinking about it.
7. Slightly distract this person while moving her/his body part. For example, talk about the weather or upcoming activities while helping to move her/his arm into the sleeve of a shirt.
8. Help this person to relax so she/he can move more easily.
9. Follow every day a consistent routine and order of tasks, and a consistent order of task steps each time a task is performed, so this person can more easily anticipate when to move each body part without being told or without thinking about it.
10. Help this person perform a task with the same body movements in the same room and in the same part of the room each time the task is performed.
11. Help this person perform a task with the same body movements in a room and in a way that matches where and how she/he performed this task throughout most of her/his adult life.
12. Continue to watch this person closely to discern when she/he is having difficulty moving a part of her/his body upon request at this moment in time. Adjust your communication, the environment, and the task to help her/him move a part of her/his body upon request more easily or to compensate for the decrease in her/his ability to move a part of her/his body upon request.
(Please see other sections of this CIIP for more specific suggestions.)

13. Remind yourself that this person's ability to move a part of her/his body upon request may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to move a part of her/his body upon request more easily.
14. Remind yourself that any reduced ability to move a part of her/his body upon request may be due to changes in this person's brain, affecting the brain's ability to tell her/his body how or when to move, or her/his body's ability to respond to the brain's instructions. It may be the body part is contracted due to a medical condition or a reflex that is hard to intentionally modify. It is rarely due to this person's desire or intention. Be compassionate, patient, and tolerant.

H. Does this person move or manipulate an object as easily upon request as she/he does spontaneously when doing a task such as eating?

1. Help this person to relax so she/he can use and manipulate objects more easily.
2. Draw this person's attention to the object to be moved or used.
3. Ask her/him with a few simple words to move or use it.
4. Hand this person the object that needs to be used, while asking her/him to use it.
5. Use the same objects this person has used throughout most of her/his adult life.
6. Use the same objects every day, so this person uses them automatically out of habit.
7. Avoid modifying the objects more than is necessary.
8. Modify an object to adapt to this person's changing needs when necessary and only if she/he can continue to use the object as it becomes less familiar.
9. Reduce the need to draw this person's attention to an object or a task. Set up conditions that help this person use the object without thinking about it.
10. Slightly distract this person while using an object. For example, talk about the weather or upcoming activities while peeling potatoes.
11. Ask this person to focus on the task rather than the particular object, so that she/he doesn't think about the object or how to use it. For example, ask her/him to eat lunch, rather than asking her/him to use the spoon, or ask her/him to peel the potatoes rather than saying, "Use this for the potatoes."
12. Model the use of the object. For example, peel potatoes with this person.
13. Remind yourself that this person's ability to move or manipulate an object upon request may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to move or manipulate an object more easily.
14. Continue to watch this person closely to discern when she/he is having difficulty moving or manipulating an object at this moment in time. Adjust your communication, the environment, and the task to help her/him move and manipulate the object more easily or to compensate for the decrease in her/his ability to move and manipulate the object. (Please see other sections of this CIIP for more specific suggestions.)
15. Remind yourself that any reduced ability to move or manipulate an object upon request is most likely due to changes in this person's brain, affecting the brain's ability to tell her/his body how or when to move or manipulate the object, or her/his body's ability to respond to the brain's instructions. It is rarely due to this person's desire or intention. Be compassionate, patient, and tolerant.

Cognitive Impairment Intervention Protocol (CIIP) for Cognitive Functions of a Person with Cognitive Impairment: V. MOTOR FUNCTIONS

Look for ways to help this person's body respond to her/his brain's instructions, by helping her/his body to be more:

- Healthy
- Strong
- Pain free

A. Is there full strength in every part of this person's body?

1. Ensure this person's medical needs are met and are frequently evaluated and treated.
2. Immediately report any changes in this person's strength to a medical professional.
3. Ensure there is no pain in any part of this person's body at this moment in time.
4. Encourage this person to exercise regularly.
5. Encourage this person to eat a healthy diet.
6. Ensure this person gets enough rest and sleep to avoid fatigue.
7. Avoid assuming this person's age is reason enough for reduced strength. Continue to encourage using muscles and building strength.
8. Encourage this person to use all parts of her/his body.
9. Identify and focus on the weaker parts of the body for exercise and strength building.
10. Ensure this person doesn't overuse parts of her/his body.
11. Reduce the weight and distance of objects this person needs to lift and use.
12. When a task requires more strength than this person seems capable of or feels comfortable with at this moment, provide assistance with task steps or do the challenging task steps for her/him.
13. Help this person with final task steps when she/he has become fatigued after completing earlier task steps.
14. Monitor changes in this person's strength and modify the task and expectations as appropriate.
15. Adjust task steps and task objects to accommodate changes only in the body part particularly affected. For example, help this person put on her/his sweater when the task step requires using her/his weaker arm, but not when she/he is using her/his stronger arm.
16. Remind yourself that this person's strength in any part of the body may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may feel stronger.
17. Continue to watch and listen to this person closely to discern her/his level of strength in all body parts at this moment in time. Adjust your communication, the environment, and the task to help her/him feel stronger or to compensate for the decrease in her/his strength. (Please see other sections of this CIIP for more specific suggestions.)

B. Are all body parts equal in strength on both sides of the body? Circle the side that is the weakest: Left Right

1. Immediately report any changes in this person's strength in any part of her/his body to a medical professional.

2. Ensure this person's medical needs are met and are frequently evaluated and treated. Be alert for evidence of conditions such as stroke, and inform a medical professional.
3. Ensure there is no pain in any part of this person's entire body at this moment in time, focusing particularly on the weaker side.
4. Identify evidence of weakness on one side of the body relative to the other side. For example, notice if one hand grip is weaker than the other compared to what is typical for this person. Notice if one side of her/his mouth or face droops or she/he doesn't move one arm or leg as much as the other. Seek medical advice if there is any evidence of one-sided weakness.
5. Focus on the weaker parts of the body for exercise and strength building.
6. Approach this person on her/his stronger side.
7. Watch this person carefully for evidence of pain, discomfort, or unusual sensitivity to touch anywhere on her/his body, but in particular on the weaker side.
8. Discern the method of touching that this person is most comfortable with, including where to touch, the amount of pressure, the number of contact points (palm rather than fingers) between her/his skin and yours, and the amount (number and size of area) of stroking. Reduce the number of times you break contact and reinitiate contact with her/his skin, that is, how frequently you lift your hand from her/his skin and retouch her/him.
9. Watch for evidence this person has more difficulty noticing and responding to objects and people on the side of her/his visual field that is the same as the weaker side of her/his body. Present objects on the side of her/his visual field where it is easier for her/him.
10. Ensure this person gets enough rest and sleep to avoid fatigue.
11. Ensure this person doesn't overuse parts of her/his body.
12. When a task requires more strength than this person seems capable of or feels comfortable with at this moment, provide assistance with task steps or do the challenging task steps for her/him.
13. Help this person with final task steps when she/he has become fatigued after completing earlier task steps.
14. Monitor changes in this person's strength and modify the task and expectations as appropriate.
15. Adjust tasks and task objects to accommodate changes on the weaker side of the body. For example, help this person put on her/his sweater when the task step requires using her/his weaker arm, but not when she/he is using her/his stronger arm.
16. Remind yourself that this person's strength on either side of the body, but particularly on the weaker side, may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may feel stronger.
17. Continue to watch and listen to this person closely to discern her/his level of strength in all body parts on both sides at this moment in time. Adjust your communication, the environment, and the task to help her/him feel stronger or to compensate for the decrease in her/his strength on the weaker side of the body. (Please see other sections of this CIIP for more specific suggestions.)

C. Does each body part move immediately and easily?

1. Monitor this person closely for evidence of any changes in her/his ability to move each body part immediately and easily.
2. Respond immediately to changes by alerting a medical professional, modifying the task, and helping her/him with the parts of a task that require use of the weaker body part or reducing your help as a body part grows stronger.

3. Tell this person which part of the body you would like this person to move.
4. Touch the body part as you ask her/him to move it. Watch this person to ensure she/he is comfortable with your touch.
5. Help this person move by stroking the body part and its joint, warming the joint with your hands or a warm washcloth, and cradling the joint while lifting it gently. Ask her/him to move a body part while she/he is relaxing in warm bath water.
6. Begin moving this person's body part to help get her/him started.
7. Move this person's body part for her/him without drawing attention to it.
8. Ensure there is no pain in any part of this person's body at this moment in time.
9. Encourage this person to exercise each part of her/his body regularly.
10. Ensure this person gets enough rest and sleep to avoid fatigue.
11. Remind yourself that this person's ability to move any part of her/his body may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to move it more easily.
12. Remind yourself that this reduced ability to move a body part is most likely due to changes in this person's brain, affecting the brain's ability to tell her/his body to move or how to move, or her/his body's ability to follow the brain's instructions. It could also be due to physical weakness or rigidity, particularly in the joints. It may be a body part is contracted due to a medical condition or a reflex that is hard to intentionally modify. It is rarely due to this person's desire or intention. The comment, "She/he can move it when she/he wants to," is usually false and a misinterpretation of this person's abilities or desires. Be compassionate, patient, and tolerant.

D. Does each body part have sufficient range of motion?

1. Seek medical advice to discern how to help this person exercise properly, to access appropriate therapy, and to learn how to adapt to this person's needs at this time.
2. Immediately report any changes in this person's range of motion to a medical professional.
3. Ensure there is no pain in any part of this person's body at this moment in time, particularly as her/his joints, arms, and legs are moving.
4. Monitor changes in this person's range of motion and modify the task and expectations as appropriate. For example, hold an object close to this person so she/he doesn't have to reach for it.
5. Assist this person or do parts of a task for her/him that require more range of motion than she/he seems comfortable with at this moment in time. For example, lift this person's leg and support the leg under the knee while lifting her/his foot, rather than asking her/him to lift her foot to put on a sock.
6. Adjust the task and task objects to accommodate changes only in the body part particularly affected. For example, replace shirts that come on over the head with button down shirts that can be put on without this person lifting her/his arm; and replace faucets and knobs on cupboards that require fingers to turn or grip, with long-handled faucets or handles and rungs on cupboards that can be simply pulled.
7. Ensure this person gets enough rest and sleep to avoid fatigue.
8. Remind yourself that this person's range of motion in any part of the body may fluctuate or be unpredictable at any given moment. If you return a short time later, she/he may be able to move a body part farther.

9. Continue to watch this person closely to discern her/his range of motion in all body parts at this moment in time. Adjust your communication, the environment, and the task to help her/him move parts of her/his body farther or to compensate for the decrease in her/his range of motion. (Please see other sections of this CIIP for more specific suggestions.)

E. Does this person easily coordinate movements of various body parts?

1. If this person seems to have difficulty coordinating movements of her/his body parts, such as difficulty in walking, or her/his walking looks uncoordinated or unbalanced, seek medical advice to ensure proper diagnosis and treatment.
2. Encourage this person to slow down during the performance of a task. For example, if she/he is a pianist, but is having difficulty playing the notes in the correct order, suggest she/he play the piece more slowly.
3. Gently begin moving a body part to get her/him started on the action.
4. Slightly distract her/him so she/he isn't focusing on the movement of her/his body.
5. Break the movements down into smaller steps. For example, when she/he is putting on a shirt, ask her/him to move each body part one at a time, such as hold the shirt in her/his right hand, then reach for the sleeve hole with your left hand. Touch each body part as you talk about each step.
6. Ensure there is no pain in any part of this person's body at this moment in time.
7. Ensure this person gets enough rest and sleep to avoid fatigue.
8. Remind yourself that this reduced ability to coordinate movements of body parts is most likely due to changes in this person's brain, affecting the brain's ability to time the movement of her/his individual body parts, or to tell each of her/his body parts how to move, or her/his body's ability to follow the brain's instructions. It could also be due to physical weakness or rigidity. It is rarely due to this person's desire or intention.

F. Does this person walk long distances easily?

1. Inform a medical professional of this person's difficulty in walking long distances to ensure proper medical evaluation and treatment.
2. Ensure there is no pain when this person is walking at this moment in time.
3. Encourage this person to exercise and walk regularly.
4. When this person has difficulty performing a task, note whether she/he is tired from walking a long distance to get to the place where the task is performed.
5. Ensure this person gets enough rest, before, during, and after the walk, to avoid fatigue.
6. Reduce the need to walk long distances by having objects and other people close by or by offering activities close to rooms this person may need or want, such as a restroom.
7. Have chairs along the way and at the entrance to buildings to offer this person a chance to stop and rest as needed.
8. Encourage this person to use a cane, walker, or wheelchair when necessary.

G. Is each body part free of pain when it moves?

1. Take this person seriously when she/he says or indicates she/he is in pain, even if she/he is very confused. Assume she/he is in pain.
2. Seek medical advice to diagnose and treat the pain.

3. Immediately report any changes in this person's level of pain to a medical professional.
4. Watch this person's face and body constantly and listen to what she/he says to recognize evidence of the level of pain or the level of discomfort with touch and movement at this time.
5. Remind yourself that this person's pain may fluctuate or be unpredictable at any given moment.
6. Look at this person's diagnoses and physical health to see if there is an existing condition that might cause pain, such as arthritis.
7. Ask a medical professional how to help this person exercise properly.
8. Encourage this person to exercise regularly in a way that protects the body part in pain during movement.
9. When this person indicates verbally or nonverbally that she/he is in pain when she/he moves, stop the movement immediately.
10. Avoid or prevent movement that triggers pain. For example, if it hurts to turn her/his head, then stand in a position where she/he doesn't need to turn her/his head to see you.
11. Ask her/him to move the body part her/himself, so she/he can move it in a way that is most comfortable for her/him.
12. Give her/him plenty of time to prepare physically and emotionally for the movement and then to make the movement. Avoid pressuring her/him to start or to move quickly. Converse a while first, particularly if she/he is just waking up or has been in one position for a period of time.
13. Ask this person or alert her/him ahead of time when you are planning to move the body part for her/him.
14. Touch and stroke the body part before trying to move it.
15. Stroke, with the palm of your hand, the body part and joint to be moved, firmly but gently, before it is moved by either you or her/him, since the body part might be stiff or uncomfortable. Begin away from the joint or painful area, and stroke toward the joint and painful area.
16. Use warm water or warm, damp washcloths draped on the body part and joint, to reduce discomfort.
17. Gently support the body part and nearby joints when she/he or you move the body part, for example, by cradling it on your arm. Avoid lifting the body part from on top with your hand.
18. Minimize the number of starts and stops during the movement. Make the movement as smooth and uninterrupted as possible.
19. Maintain eye contact throughout the move. Direct her/his gaze to the movement when necessary, or talk about something else to distract her/him.
20. Adjust the task and task objects to accommodate changes only in the body part that is in pain. For example, replace shirts that come on over the head with button down shirts that can be put on without this person lifting her/his arm, and replace faucets and knobs on cupboards that require fingers to turn or grip with long-handled faucets or handles and rungs that can be pulled.
21. Help this person to recognize when she/he is in pain, where the pain is, what kind it is, and how severe it is. For example, ask questions to focus her/his attention on her/his body and its pain.
22. Help this person say spontaneously when she/he is in pain, or when she/he is asked if she/he is in pain. For example, show pictures of facial expressions if she/he is unable to speak.
23. Modify how you assess for pain to fit this person's ability to understand and express her/himself in words. For example, touch her/his arm when assessing for pain, rather than simply asking if her/his arm hurts.
24. When this person engages in a distressing behavior, discern whether or not pain or discomfort is a trigger for the behavior.
25. Ensure this person gets enough rest and sleep to avoid fatigue.

H. Is each body part free of pain when it is not moving?

1. Take this person seriously when she/he says or indicates she/he is in pain, even if she/he is very confused. Assume she/he is in pain. Reassure her/him that you are taking the pain seriously.
2. Remind yourself that this person's pain may fluctuate or be unpredictable at any given moment.
3. Seek medical advice to diagnose and treat the pain.
4. Avoid under treating for pain. Give enough medication for it to be effective.
5. Immediately report any changes in this person's level of pain to a medical professional.
6. Help this person to recognize when she/he is in pain, where the pain is, what kind it is, and how severe it is. For example, ask questions to focus her/his attention on her/his body and its pain.
7. Help this person say spontaneously when she/he is in pain, or when she/he is asked if she/he is in pain. Be specific and give examples.
8. Modify how you assess for pain to fit this person's ability to understand and express her/himself in words. For example, touch or gently move her/his arm when assessing for pain, rather than simply asking if her/his arm hurts; show pictures of facial expressions if words are difficult.
9. Use both verbal and nonverbal methods of assessing for pain. Remind yourself that this person may say "no" when she/he means "yes". Watch her/his eyes, facial expressions and body reactions to questions about pain or to touch and movements of body parts. Listen for changes in words, volume, pitch, and pacing of sounds for evidence of pain.
10. Remind yourself that this person may not know she/he is in pain or may think the pain is some other need, such as needing to use the bathroom or hunger. She/he may also think the pain is in a different part of her/his body, for example, she/he may say she/he has stomach pain when she/he actually has hip pain. If the pain is chronic, she/he may be so used to it she/he says "no" when asked if she/he hurts. She/he may also have various definitions of "pain" ranging from a skin pain from a scratch, to muscle pain, to joint pain or back pain. Her/his reply of "no" to a question about pain may refer to only one kind of pain, even though he has another kind.
11. When this person engages in a distressing behavior, discern whether or not pain or discomfort is a trigger for the behavior.
12. Assess for pain when this person repeatedly holds or mentions a particular body part, favors a body part or holds an unusual body posture, asks for help, moans, whimpers, or calls out frequently, grabs people's arms or hands, or stays in one position for a long time.
13. Watch this person's face and body constantly to recognize evidence of the level of pain or discomfort at this time. Look for stiffening, jerking, withdrawal, going very still, a frown, wince, shifting eye gaze with eyes darting, blinking, widening, or closing.
14. Look at this person's diagnoses and physical health to see if there is an existing condition that might cause pain, such as arthritis.
15. Ensure this person gets enough rest and sleep to avoid fatigue.
16. Encourage this person to shift body positions, walk, and exercise appropriately to reduce stiffness.
17. Ask a medical professional how to help this person exercise properly.