

## *Culturally Competent Materials on Communication and Dementia*

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North Carolina demographics show the state to be a new nexus for immigration of second-language and aging persons, making it a good place to develop and evaluate a national model of communication training. Nationally, the projected increase in diversity necessitates additional attention to language access and equity in care.

In addition to exceeding national projections for aging citizens, including those expected to develop Alzheimer's Disease (AD), NC also typifies the expanded national need for workforce

recruiting, retention and upgrading through training, given regional and national shortages of caregivers, including certified nursing assistants (CNAs) and other direct-care workers.

### **Reaching out to every level: dementia, communication, and Nurse Aide training**

We report on the first year's implementation with four control groups and one target ESL group of students, of a pilot set of culturally-sensitive multimedia materials and training modules about communication, aging and dementia, designed for Nurse Aide training. The materials, developed by university faculty with funding from the national Alzheimer's Association, are being implemented and evaluated at the community-college level. Their primary focus is to teach entry-level direct-care workers how to increase successful social interaction with speakers with AD. Since this portion of the health care workforce is increasing in its numbers of second-language adults, the materials also teach how to identify and to employ culturally appropriate collaborative conversational techniques.

The course for CNA certification is being implemented through collaboration by the Nurse Aide Health Education and English as a Second Language wings of a community college in partnership with area medical institutions. The Alzheimer's Association - Western Carolina Chapter sponsors dissemination to a wider audience through workshops in Professional Training and Family/Community Education. The kinds of collaboration needed for team-building across educational hierarchies, institutions, disciplines and content areas are both a challenge and a resource: teaching each other to communicate has been as important as teaching Nurse Aide students.

Each stage in materials development and delivery has been keyed to the response of family members, nursing instructors, adult learners seeking initial certification as Nurse Aides, practicing direct-care workers seeking continuing education, and Alzheimer's Association regional staff. Because so much of the formal care for aging persons with dementia is given by direct-care workers, we target second-language direct-care workers with our initial efforts in creating culturally-sensitive materials for training about communication and dementia. They're a tough and discerning audience; they know what is clear, useful, and culturally appropriate. Materials that pass their screening are then used to reach out to family members.

### **Goals for Year One**

We are happy to report that we exceeded all of our goals for Year 1, and each objective. They are:

- (a) materials development, implementation and evaluation;

- (b) delivery through multiple media formats;
- (c) student retention and pass rates in local and state certification examinations
- (d) approval by families and staff at local training sessions sponsored by the Western North Carolina Regional Chapter of the Alzheimer's Association.

The primary Goal for Year One was to create two of five modules on culture and communication in dementia care. Since we and the staff at the community college wanted to incorporate all materials into their online course management package for Nurse Aides by mid-December 2005, to try them in January with control groups and new instructors, we drafted and pre-tested all five modules as visual and printable materials with 3 sets of reviewers during Fall 2005. Then we inserted them into the contents package developed and maintained by our community-college partner Nursing instructors, for use and evaluation by students, instructors, and family/community groups.

### **Languages other than English are now incorporated**

The encouraging reviews of the materials; outstanding student retention and performance in target classes; response in family/caregiver community workshops; and the near-unanimity of their suggestions for improvement during Year One has led to our new design for interactive, multilingual multimedia. We have expanded our partnerships in technology and nursing education and are now revising our original PowerPoint slides into interactive courseware in three languages (English, Spanish and Chinese), enhanced with authentic, consented audio and video and deliverable in two different formats: online and CD/DVD. **Figure 1** shows the new format of one part of the courseware. The implementation, evaluation and revision of the new courseware formats for second-language and international Nurse Aide students, direct-care workers, health care personnel, and family members will be our primary goal for our second year of funding.

### **Milestones**

#### **a. Recruiting: students in control groups, and students in target (ESL) group**

--Control groups register themselves; average 18 students of whom at least 20% are second-language/ESL. Unless the ESL students are high intermediate in proficiency, generally, 1 in 2 drop.  
 --VESL division held 3 Recruiting Orientations, screened 49 students, selected 20 students; 17 enrolled; 14 completed the course; 12 became state-certified. 1 in 4 who is interested will attend.

#### **b. materials development**

Thirty-three sets of materials in printable and PowerPoint formats were developed with informational content, thematic focus on cultural features of caregiving skills: see **Table 1**, Appendix.

#### **c. pre-implementation evaluations of materials for content and cultural sensitivity by**

Nursing/gerontology students in classes at urban research and historically black universities;  
 Nursing instructors and ESL instructors at delivery-site community college;  
 Regional staff, Western Carolina Region Alzheimer's Association office.

#### **From Minutes, Team Meeting October 19, 2005: Preliminary decisions based on trial #1**

Content of our materials will be keyed to communication in dementia, using topics from the Association's workshop outline (changes in memory, comprehension, linguistic skills, social communication; dementia stages; non-verbals; question-answer interactions), **plus**

- o communication needs of persons with AD
- o specific interventions
- o techniques and vocabulary for communication with AD speakers around bathing, eating, personal care and hygiene, exercise or activity, agitation.

These 11 topics align with the ones used in the regular Nurse Aide-I course as uploaded to Moodle and meet regional/national certification standards, which is necessary also for re-certification. These topics align with the Association outline; materials will work into new workshops in later stages of the project, as well as into web/CD/video formats.

#### d. evaluations in 4 control courses and 1 target course

We use a mixed methods procedure on the assumption that collecting diverse types of data will support interpretive assessment of the culturally sensitive content and format for materials, some notion of preferred delivery system, and their impact in formal and informal caregiver training. Accordingly, we evaluate student learning about cross-cultural communication in aging and dementia in terms of content mastery, skills acquisition, and attitude change.

- Content

- Evaluations of materials

Satisfaction with content, projected use, and delivery of materials used a 4-point Likert scale for online recording after each activity and on full topics. Anything below a 4 was considered a problem calling for redesign or revision.

4	I WAS PLEASED AND FOUND THE PRESENTATION HELPFUL
3	I THOUGHT IT WAS OK, BUT I'M NOT SURE HOW TO USE IT AT WORK
2	I WAS NOT VERY HAPPY, BECAUSE I THOUGHT THE WORDS WERE TOO DIFFICULT
1	I WAS DISAPPOINTED WITH THE PRESENTATION & FOUND IT A WASTE OF TIME

We had inserted most of our materials into the course package section on Communication, where the average rating for each set of materials ranged from 3.5 to 4, with the 3.5 caused by responses selecting #3, typically entered by younger (<25 years) Nurse Aide students who had never worked with older persons. Several full topics included only a few materials on communication and dementia, and participants reported revision was needed in those areas quite loudly, with 50% of each group scoring three full topics as below our goal: (1) Nutrition and Hydration, (2) Personal Health Care, (3) Mental Health and Social Service Needs: Psychological Needs of the Elderly.

Subsequent discussion groups identified that participants wanted cultural and faith-based information about issues of food and personal privacy, and better illustrations of dementia; **see # f**, below. With our Taiwan partners, we have designed an interactive audio, graphics and text resource for culture and faith-based traditions, and an interactive video tutorial illustrating communication in dementia.

- Retention and Pass Rates for Certification

Retention and passrates are the same or higher for healthcare and nursing training than for most adult and ESL adult learners in general. For example, in 1999, 43% of high intermediate and low advanced ESL enrollees in Kentucky community colleges – the level recommended for admission to Nurse Aide and similar technical programs - surpassed the target of 32% for attaining functional proficiency; the current (2006) target is 55% ([www.kyae.ky.gov/](http://www.kyae.ky.gov/)).

ESL is not part of Central Piedmont's 2005 report on Enhanced Accountability Measures and Performance-based Funding - 2004/2005. (<http://www.cpcc.edu/planning/>) However, that report notes that CPCC was one of 30 colleges meeting the minimum accepted performance level of 70% on all reported licensure examinations. Davidson County Community College illustrates the NC Performance Measures as shown in the breakout in **Figure 2** (Appendix).

Our materials-infused Nurse Aide Control classes averaged 95% retention and state licensure pass rate; the ESL-only Nurse Aide course had 85% retention and 83% state licensure pass-rate. While this is above the national average for ESL adult persistence, we want to see it rise.

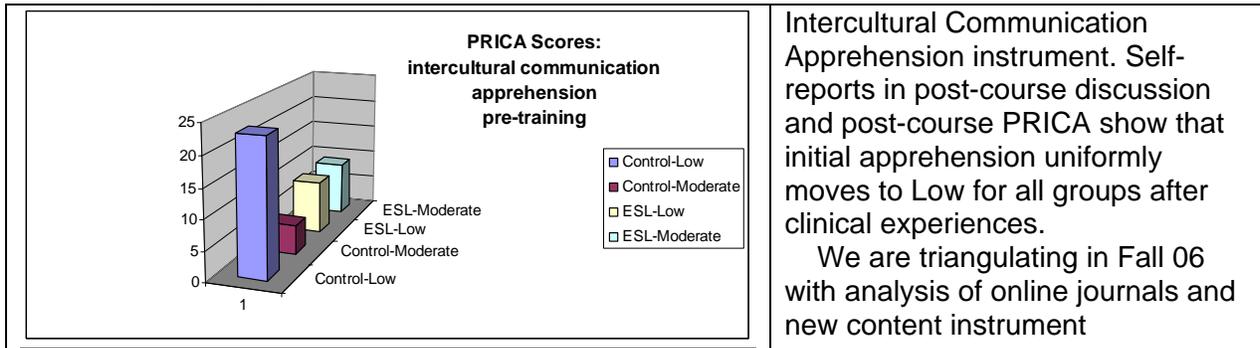
- Skills:

- KATHY checklist

Tabulations of observational checklists are based on Try, Do It, Do it Well for initiating communication. While half of ESL students lag first-language English at outset, all students move to Do It Well in a culturally appropriate sequence by the end of Clinical. We are revising how often this checklist should be used; three times in clinical is too much for Supervisors.

Attitude

o PRICA :



Intercultural Communication Apprehension instrument. Self-reports in post-course discussion and post-course PRICA show that initial apprehension uniformly moves to Low for all groups after clinical experiences.

We are triangulating in Fall 06 with analysis of online journals and new content instrument

**e. evaluation from 5 Alzheimer’s Association seminars**

Across 5 seminars (2 family, 3 professional), 75% of the participants, both family and professional caregivers approved of the content and sensitivity of the materials as adapted for interactive workshops. Roughly 20% of each group were second-language caregivers or families; 70% or more were women. Between 30 and 50% of each group were minority and international. **Figure 3**, Appendix, illustrates the breakout.

**f. Evaluative discussions by groups of Nurse Aide students: Wishlist for revisions**

Four Control Groups, Nurse Aide Students (75% English language; 25% Second-language)	Target Group, Second-Language Students Only, with ESL support class
<ul style="list-style-type: none"> <li>• Richer, more detailed scenarios</li> <li>• Videos showing typical response to scenarios</li> <li>• More information on dysphasia/aphasia.</li> <li>• Information on non verbal communication</li> <li>• Information on communication in the advanced stages of dementia</li> <li>• Printable lists of resources</li> <li>• More audio clips</li> <li>• Information on cultural and faith-based traditions for food and personal care</li> <li>• More opportunity for reflections</li> </ul>	<ul style="list-style-type: none"> <li>• More pictures</li> <li>• More audio for vocabulary and pronunciation</li> <li>• Richer explanations of why a particular choice would be made in the scenarios</li> <li>• More case studies or short scenarios, perhaps in video format</li> <li>• More exercises with medical keywords</li> <li>• More information on dementia communication</li> <li>• Information on the cultural context of healthcare in America e.g. family support and the use of long term care and facility care.</li> </ul>

**g. evaluative discussion by focus group, 2005-6 Nurse Aide course instructors**

Nursing instructors discussed the performance of the ESL-only class, using the new materials: they found the students to be shy, but better prepared, and “more knowledgeable.” By using the materials, instructors saw “more of them passing the quizzes, the exams, any of the material that they’re getting in the classroom. . . . Where before, say like a year or two ago, more of them would be failing, the quizzes, some of the practice things we have in class, because they really didn’t understand”

**h. dissemination**

Team members have published one article (2006) on identifying language problems in developing Nursing English materials and have 1 presentation accepted for fall 06; other presentations are under review. Initiating fuller dissemination is part of our Future Aims.

Davis, B. & L. Russell-Pinson (2006). *Going + to*: An example of using a regional corpus in preparing healthcare materials, *TELL*, 2, 1-15.

Smith, M., B. Davis & D. Shenk. (2006). Communication at Every Level: Dementia, Communication, and Nurse Aide Training AACH Research and Teaching Forum, Atlanta,

### Future Aims:

- Materials:** We plan revision for delivery in multiple languages: we will complete implementation of Mandarin and Spanish, and seek additional collaboration, e.g. Japanese and German. Our courseware team, based in Taiwan, is working to refine database-driven, browser-deliverable templates which can incorporate additional audio, video, and scripts for interactive multimedia courseware.
- Analysis** Implementation and evaluation of courseware usability, sociability, and deliverables in multiple media formats; we will continue to revise and add culture-based content keyed to focus groups and evaluations by students, practitioners and families.
- Dissemination** In addition to conventional academic and wider medical/health care venues for presentations and articles by team members, we want to expand our relationship with our regional chapter and with the national office of the Alzheimer's Association.

### Future Aims: Envisioned Timetable for Year 2, 2006-2007

<b>Fall 06 for Jan 07</b>	Cross-cultural trainings on high/low context interactional styles for instructors; training in second-language writing, handling plagiarism for instructors.
<b>Fall 06 for Jan 07</b>	Training module for all: what is Nursing Culture? Medical Culture in the US?
<b>√ &amp; revise Fall 06</b>	Cultural vignettes keyed to religion: for food, gender-care preferences, clothing, privacy
<b>√ &amp; revise Fall 06</b>	Increased number of audio/video vignettes and increase A/V in the ones we have
<b>√ &amp; revise Fall 06</b>	Increased interactivity in all areas of materials
<b>√ &amp; revise Fall and Win 06 Spanish, Chinese</b>	Expanded translatability to other languages; vocabulary definitions in English with cursor pass-over. Chinese: two scripts (Mainland China and Taiwan), audio in Mandarin. Spanish translations. Spanish audio pronunciation is Latin American, reviewed by speakers of Mexican and continental varieties of Spanish.
<b>Fall-Win 06</b>	Solicit Japanese and German collaboration and partnerships for translations
<b>Fall-Win 06, Spr 07</b>	Trialing new Pre-course for L2 students as recruitment tool, focus on health career exploration. Work with and by ESL instructors to refine ESL support class
<b>√ &amp; revise Fall 06</b>	Expand overview of dementia, with illustrations: incorporate in new video vignettes
<b>√</b>	Minor revisions of pencil-paper activities: Put into Moodle for September 06
<b>√ &amp; revise Fall 06</b>	Revised Moodle section: most PowerPoints vanish; materials link to another server
<b>√ &amp; revise Fall and Win 06</b>	New media assessment process, keyed to usability of new formats incorporating new collaboration and participants from Kaohsiung Univ. of Applied Sciences, Shu Te University, Kaohsiung Medical University
<b>Fall 06 for Jan 07</b>	New presentation/formats and assessment instruments for the Association's Train-the-Trainer presentation
<b>Win 06, Spr 07</b>	Evaluations, Student Control Groups at CCCC, Fall 06/Spr 07; Target Group Spr 07
<b>Win 06, Spr 07</b>	Evaluations from Chinese Nursing Students, KMU; Alzheimer's Association staffs
<b>Fall 06 - Spr 07</b>	Implement Dissemination Goal: each team member is a presenter; each is a writer, in collaboration with each other, for local, regional, national, international dissemination.
<b>Spr 07</b>	Upgrade media for Alzheimer Association Community and Professional Workshops
<b>Spr 07, Sum 07</b>	Outline fuller implementation and seek collaboration with Latin American partners
<b>Spr 07, Sum 07</b>	Validate pre-/post-inventory of content knowledge about communication and dementia
<b>Fall 06 – Spr 07</b>	Implement Trial workshop for CEU for RN Instructors illustrating materials and training how to implement them in teaching about communication and dementia
<b>Fall 06 – Spr 07</b>	Analysis of online journals to locate Buy-In to course and/or Apprehension Diminution

Figure 1: CD-ROM or Web, Browser-format courseware  
Thirteen interactive, culture-rich scenarios about communication and dementia

Courseware designed by Dr. S-C Tsai.  
His team includes Drs. Y-C Wang and Joel Stocker; R. H. Davis



Here, the user has chosen to click option B – which activates both audio and text, so the user can both listen to and read the answer.



**Figure 2:  
Performance Measure 1, Davidson County Community College  
Showing passrates for Basic Skills students and for licensures/certification**

Davidson County Community College  
**Summary Report on Performance Measures and Standards  
2004-05 (2006 Performance Measures and Standards)**

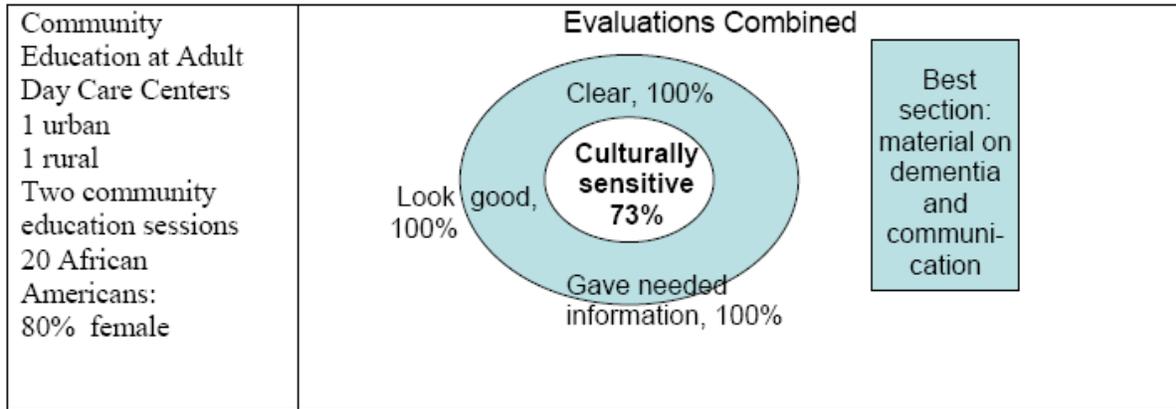
Measure (Performance Funding Measure = P)	State Standard	All NC Community Colleges	Davidson County Community College		
			# Attempts	# Successful	% Successful
<b>A. Progress of Basic Skills Students (P)</b> <ul style="list-style-type: none"> <li>• The percentage of students in Adult Basic Education, Adult High School, Compensatory Education, English as a Second Language, and General Educational Development:               <ul style="list-style-type: none"> <li>◆ Progressing within a level of literacy</li> <li>◆ Completing a level entered or a predetermined goal</li> <li>◆ Completing the level entered and advancing to a higher level</li> </ul> </li> </ul>	75%	81%	3,024	2,701	89% (Y)
<b>B. Passing Rates on Licensure and Certification Exams (P)</b> <ul style="list-style-type: none"> <li>• The percentage of first-time test-takers from community colleges passing an examination required for North Carolina licensure or certification prior to practicing in the profession.</li> <li>• Results by Exam:<sup>a</sup> <ul style="list-style-type: none"> <li>• Basic Law Enforcement Training</li> <li>• Cosmetic Arts:               <ul style="list-style-type: none"> <li>• Cosmetology</li> <li>• Esthetics</li> <li>• Manicurist</li> <li>• Apprentice</li> </ul> </li> <li>• Emergency Medical Technician:               <ul style="list-style-type: none"> <li>• EMT</li> <li>• EMD</li> <li>• EMT – I</li> <li>• EMT – P</li> </ul> </li> <li>• Nursing:               <ul style="list-style-type: none"> <li>• Practical Nursing</li> <li>• Registered Nursing</li> </ul> </li> <li>• Real Estate               <ul style="list-style-type: none"> <li>• Sales</li> </ul> </li> </ul> </li> </ul>	80% (Note: State Standard is aggregate 80% passing rate with no exam lower than 70% passing rate)	85%  93%	187  60  DNA DNA DNA DNA  54 0 12 6  0 47  8	169  59  DNA DNA DNA DNA  47 NA 6 6  0 46  5	90% (N) SI  98  DNA DNA DNA DNA  87% NA 50% 100%  NA 98%  63%

Note: Practical and RN pass rates are noted, but not Nurse Assistants

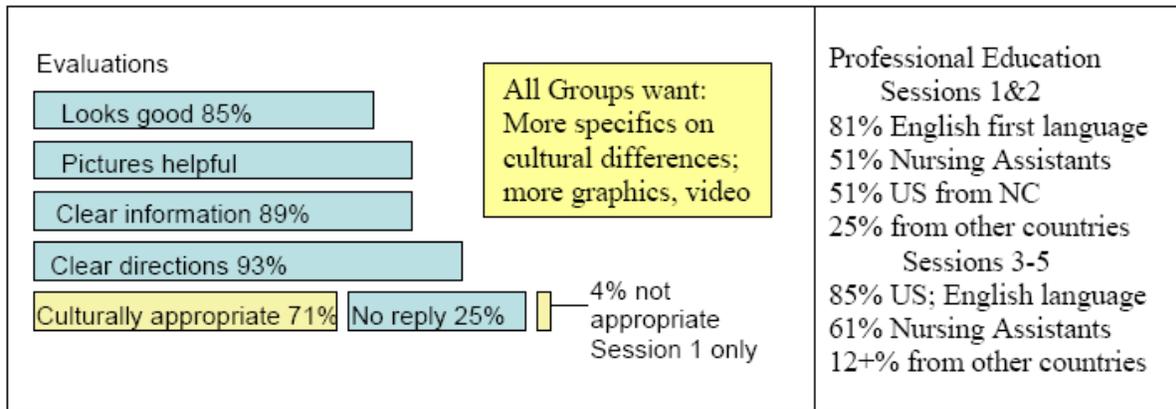
**Figure 3**

**Year 1, 2005-06**

**UNC Charlotte and Western Carolina Chapter, Alzheimer's Association:  
Community Education Sessions**



**UNC Charlotte and Western Carolina Chapter, Alzheimer's Association:  
Professional Education Sessions**



# Materials Planning Chart

## By Modules

January 10, 2006

All materials listed as Drafted/Input were inserted into the Online Course Management Package for Nurse Aide Level I, and trialed during Spring and Summer 2006.

PowerPoint slides for scenarios have been revised into interactive multilingual courseware, and are being trialed Fall 06; others are being redesigned for Spring 07.

Pencil-Paper materials now an online booklet for instructor distribution for review sessions

Module 1	Activities and PowerPoints	Stages of Development
<b>Caregiver roles: qualities, definitions, responsibilities</b>	<ul style="list-style-type: none"> <li>• <b>Who are we? Role &amp; Talk</b> (PowerPoint focusing on role on communicating)</li> <li>• <b>Who Am I? – Part I</b> (review of key team members in health care; fill-in-the-blank activity; language focus = vocabulary)</li> <li>• <b>Who Am I? – Part II</b> (review of key team members in health care; fill-in-the-blank activity; language focus = vocabulary)</li> <li>• <b>Vocabulary Related to Caring for Aging Persons</b> (review of vocabulary related to caring for older persons; matching activity; language focus = vocabulary)</li> </ul>	<p style="text-align: right;">Drafted/Input</p> <p style="text-align: right;">Drafted/Input</p> <p style="text-align: right;">Drafted/Input</p> <p style="text-align: right;">Drafted/Input</p>
<b>Culture: overview, impact on family; forms of address, greetings, taboos; conversation starters</b>	<ul style="list-style-type: none"> <li>• <b>Role &amp; Talk</b> (PowerPoints suggest family dynamics indirectly):               <ul style="list-style-type: none"> <li>○ Mrs. Patel and perseverative repetition</li> <li>○ Mr Tretyakov and a different language</li> <li>○ Ms. Oxendine and the stigma of AD</li> </ul> </li> <li>• <b>Caregiver's Phrasebook</b> (focus on greetings and starters)</li> <li>• <b>Cultural perceptions: space, time and situation</b> (PowerPoint slides of scenarios)</li> <li>• <b>Go-aheads</b> (PowerPoint illustrates how to use phrasal contours to sustain talk)</li> <li>• <b>Quilting</b> (PowerPoint slides illustrating technique to facilitate reminiscence)</li> <li>• <b>Taboos and conflicts</b> (PowerPoint slides on insults, arguments, co-workers)</li> <li>• <b>Swearing (in AD speech)</b>(PowerPoint slides on swearing in dementia)</li> <li>• <b>Social Changes in Aging</b> (focus on how aging affects the self and family; chart activity; language focus = vocabulary, writing definitions, listing)</li> </ul>	<p style="text-align: right;">Drafted/Input</p>
<b>Question/answer sequences, patient-provider scenarios, note-taking, form completion</b>	<ul style="list-style-type: none"> <li>• <b>Reading a Sample Kardex</b> (based on medical form; language focus = reading comprehension linked to medical forms; vocabulary; understanding abbreviations)</li> <li>• <b>Indirect Questions</b> (PowerPoint slides outlining how to ask indirect questions)</li> <li>• <b>Reading an Activities-of-Daily-Living Flow Sheet</b> (based on medical form; language focus = reading comprehension linked to medical charts; vocabulary; understanding abbreviations and dates)</li> </ul>	<p style="text-align: right;">Drafted/Input</p> <p style="text-align: right;">Drafted/Input</p> <p style="text-align: right;">Drafted/Input</p>

	<ul style="list-style-type: none"> <li>• <b>Reading a Graphic Sheet</b> (based on medical form; language focus = reading comprehension linked to medical forms; vocabulary; reading graphs; understanding abbreviations, dates and times)</li> </ul>	Drafted/Input
Module 2	Activities and PowerPoints	Stages of Development
Daily living: eating, feeding, bathing, elimination and hygiene, dressing, locomotion	<ul style="list-style-type: none"> <li>• <b>Role &amp; Talk</b> (PowerPoint slides including each ADL) <ul style="list-style-type: none"> <li>○ <b>Mr. Narita</b> and bathing</li> <li>○ <b>Ms. Mason</b> and diabetes/nutrition</li> <li>○ <b>Mrs. Tanaka</b> and lactose intolerance</li> <li>○ <b>Mr. Whitney</b> and sundowning</li> </ul> </li> <li>• <b>At Ease with the Elderly</b> (review of caring for elderly residents; fill-in-the-blank activity; language focus = affirmative, negative and passive verb forms in the simple present tense)</li> </ul>	Drafted/Input Drafted/Input Drafted/Input Drafted/Input Drafted/Input
Cultural interpretations of disease: gaining cultural sensitivity to focus on needs of individual	<ul style="list-style-type: none"> <li>• <b>Role and Talk</b> (PowerPoint slides including each ADL for different cultural groups) <ul style="list-style-type: none"> <li>○ <b>Mrs. Morales</b> and Hispanic mealtimes</li> <li>○ <b>Grandmother Alonso</b> &amp; Filipino beliefs</li> <li>○ <b>Mr. Wilkins</b> and joining activities</li> </ul> </li> </ul>	Drafted/Input Drafted/Input Drafted/Input Drafted/Input
Vocabulary related to the body and mind	<ul style="list-style-type: none"> <li>• <b>Get Connected</b> (review of types of bones and joints; matching activity; language focus = vocabulary)</li> <li>• <b>Physical Changes in Aging</b> (review of physical changes in older persons and the bodily systems affected; matching activity; language focus = vocabulary)</li> </ul>	Drafted/Input Drafted/Input
Module 3	Activities and PowerPoints	Stages of Development
Interacting during daily activities	<ul style="list-style-type: none"> <li>• <b>Role &amp; Talk</b> (PowerPoint slides, each ADL)</li> </ul>	Drafted/Input
Culturally appropriate verbal and non-verbal communication techniques	<ul style="list-style-type: none"> <li>• <b>Matching Messages</b> (review of effective listening strategies; matching activity; language focus = imperative verb forms)</li> <li>• <b>Role &amp; Talk: PowerPoint slide</b> <ul style="list-style-type: none"> <li>○ <b>Using honorifics:</b> Esme Johnson</li> </ul> </li> <li>• <b>Caregiver's Phrasebook</b> (focus on non-verbals)</li> <li>• <b>Do this! Don't do that!</b> (review of general communication skills; T/F activity; language focus = imperative verb forms)</li> <li>• <b>Communicating with Confidence</b> (focus on effective communication skills; fill-in-the-blank activity; language focus = affirmative, negative, passive and imperative verb forms in the simple present tense)</li> </ul>	Drafted/Input Drafted/Input Drafted/Input Drafted/Input
Small-talk, story-starters, vocabulary expansion	<ul style="list-style-type: none"> <li>• <b>Caregiver's Phrasebook</b> (focus on story-starters and proverbs)</li> <li>• <b>Mouth, Gums, Teeth and Tongue</b> (focus on assisting with oral hygiene, as noted in</li> </ul>	Drafted/Input Drafted/Input

related to eating, feeding, bathing, elimination and hygiene, dressing, locomotion	<p>the Performance Checklist; multiple-choice activity; language focus = vocabulary; reading and understanding procedures, including imperative verb forms)</p> <ul style="list-style-type: none"> <li>• <b>Role &amp; Talk</b> (PowerPoint slides): <ul style="list-style-type: none"> <li>○ <b>Mr. Narita</b> and bathing</li> <li>○ <b>Mr. Khan</b>, dental care/same-sex care</li> </ul> </li> </ul>	<p>Drafted/Input Drafted/Input</p>
<b>Module 4</b>	<b>Activities and PowerPoints</b>	<b>Stages of Development</b>
Religious and spiritual traditions around food/eating	<ul style="list-style-type: none"> <li>• <b>Role &amp; Talk</b> (PowerPoint slide) <ul style="list-style-type: none"> <li>○ <b>Mr. Mason</b> includes link to information: religious strictures for food</li> </ul> </li> </ul>	Drafted/Input
Procedural knowledge, conversational collaboration, narrative co-construction	<ul style="list-style-type: none"> <li>• <b>And Then What Happens?</b> (review of introductory/KASIEWAP procedures; fill-in-the-blank activity; language focus = imperative verb forms)</li> <li>• <b>First Things First!</b> (review of introductory/KASIEWAP procedures; matching activity; language focus = imperative verb forms)</li> <li>• <b>Promoting Safety</b> multiple-choice activity; language focus = vocabulary; reading comprehension)</li> <li>• <b>Quilting</b> (PowerPoint slides on sustaining reminiscence in co-constructed conversation)</li> <li>• <b>Language in Aging</b> (informational PowerPoint slides)</li> <li>• <b>Alzheimer Talk over Time</b> (informational PowerPoint slides)</li> </ul>	<p>Drafted/Input  Drafted/Input  Drafted/Input  Drafted/Input  Drafted/Input</p>
Small-talk routines and story-starters, vocabulary expansion related to eating, feeding, bathing, elimination and hygiene, dressing, locomotion	<ul style="list-style-type: none"> <li>• <b>Caregiver's Phrasebook</b></li> <li>• <b>Exercising Care</b> (focus on performing range of motion exercises, as noted in the Performance Checklist; true/false, fill-in-the-blank, ordering, multiple-choice activity; language focus = vocabulary; reading and understanding procedures, including imperative verb forms)</li> <li>• <b>Bathing Basics</b> (focus on giving a complete bed bath, as noted in the Performance Checklist; multiple-choice, true/false, fill-in-the-blank activity; language focus = vocabulary; reading and understanding procedures, including imperative verb forms)</li> </ul>	<p>Drafted/Input Drafted/Input          Drafted/Input</p>
<b>Module 5</b>	<b>Activities and PowerPoints</b>	<b>Stages of Development</b>
Access to healthcare and the body, appropriateness of touch, cultural notions of privacy	<ul style="list-style-type: none"> <li>• <b>Role &amp; Talk</b> (PowerPoint slides) <ul style="list-style-type: none"> <li>○ <b>Mr. Khan</b>, dental/same-sex care</li> <li>○ <b>Mr. Narita</b>, bathing</li> <li>○ <b>Mr. Nguyen</b>, wandering &amp; incontinence</li> </ul> </li> <li>• <b>Sexuality and Aging</b> (review of information about sexuality among older persons; true/false, fill-in-the-blank, listing and</li> </ul>	<p>Drafted/Input Drafted/Input Drafted/Input Drafted/Input</p>

	discussion activity; language focus = reading comprehensions)	
<b>Attitudes about alternative health care and emergencies</b>	<ul style="list-style-type: none"> <li>• <b>Role &amp; Talk</b> (PowerPoint slides) <ul style="list-style-type: none"> <li>○ <b>Grandmother Alonso</b> slide includes links to NIH's Complementary Medicine site</li> </ul> </li> </ul>	Drafted/Input
<b>Vocabulary expansion related to internal and external parts of the body, illnesses, memory loss</b>	<ul style="list-style-type: none"> <li>• <b>Gray Matters</b> (review of the brain; fill-in-the-blank activity; language focus = vocabulary)</li> </ul>	Drafted/Input
	<ul style="list-style-type: none"> <li>• <b>In the Eye of the Beholder</b> (review of the eye; fill-in-the-blank activity; language focus = vocabulary)</li> </ul>	Drafted/Input
	<ul style="list-style-type: none"> <li>• <b>What is Alzheimer's Disease?</b> (basic review of Alzheimer's Disease; fill-in-the-blank activity; language focus = simple present verb forms)</li> </ul>	Drafted/Input
	<ul style="list-style-type: none"> <li>• <b>The Hand Bone's Connected to the...</b>(review of bones and joints; fill-in-the-blank, multiple choice and labeling activity; language focus = vocabulary)</li> </ul>	Drafted/Input
	<ul style="list-style-type: none"> <li>• <b>On the Surface and Below</b> (review of the integumentary system; matching, listing and labeling activity; language focus = vocabulary)</li> </ul>	Drafted/Input
	<ul style="list-style-type: none"> <li>• <b>Where Is It?</b> (review of arteries; matching activity; language focus = vocabulary)</li> </ul>	Drafted/Input
<b>Other Materials</b>	<b>Supplementary Handouts</b>	<b>Stages of Development</b>
<b>Language Points</b>	<ul style="list-style-type: none"> <li>• <b>Imperatives</b> (overview of what imperatives are, how they are formed and when they are used in written academic nursing language)</li> </ul>	Drafted/Input
	<ul style="list-style-type: none"> <li>• <b>Simple Present Tense Verbs</b> (overview of how the simple present tense is formed in a variety of constructions, including passives and modals, and how it is commonly used in written academic nursing language)</li> </ul>	Drafted/Input
	<ul style="list-style-type: none"> <li>• <b>Negation</b> (overview of how the negative is formed)</li> </ul>	Drafted/Input