Advanced Person-Centered Dementia Care Training Course

17 – 21 May 2027
Rome

AGILE LEADERS
Training Center

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Ref: 1437_206028 **Date:** 17 – 21 May 2027 **Location:** Rome **Fees:** 5700 Euro

Overview

Advanced Person-Centered Dementia Care Training Course is a one-week advanced course for dementia-care nurses, care coordinators, residential-care supervisors, allied health professionals, social-care practitioners, and family-support leads who leave with a Person-Centered Dementia Care Portfolio. Participants connect cognitive and functional profiles, life stories, communication, unmet-needs analysis, meaningful activity, daily living, family partnership, transitions, advance planning, workforce wellbeing, and quality review. Agile Leaders Training Center presents dementia care through personhood, evidence, and coordinated practice.

Who Should Attend

- Care functions responsible for person-centered assessment, daily support, and care-plan review
- Nursing functions responsible for health observation, medication support, pain, nutrition, and safety
- Therapy functions responsible for cognition, communication, mobility, activity, and environmental adaptation
- Coordination functions responsible for family partnership, referrals, transitions, and continuity
- Service leadership functions responsible for workforce support, safeguarding, quality, and improvement

The course assumes participants already support people living with dementia and leaves out initial professional qualification, prescribing, formal diagnosis, and general elderly-care operations.

Departments and Industries

The course supports departments and industries that provide or coordinate dementia-specific care across the disease course.

- Memory services and community dementia teams
- Residential, nursing, and long-term-care organizations
- Hospital, rehabilitation, and palliative-care services
- Home-care and social-care providers
- Family support, care navigation, and voluntary-sector services

Learning Objectives

By the end of this course, participants will be able to:

- Build person-centered cognitive and functional profiles
- Apply adapted communication and meaningful engagement methods
- Analyze behavior changes through unmet-needs evidence
- Use daily-living, nutrition, mobility, and safety supports
- Evaluate family partnership, transitions, and advance planning
- Prioritize workforce wellbeing and care-quality improvements

Course Agenda

Day 1: Person-Centered Assessment and Planning

- Personhood and Life Story Profile
- Cognitive and Functional Observation Map
- Strengths, Preferences, and Routine Register
- Collaborative Dementia Care Plan
- Dynamic Care Review Schedule

Day 2: Communication and Meaningful Engagement

- Adapted Dementia Communication Guide
- Nonverbal Cue Observation Tool
- Validation and Reassurance Response Method
- Meaningful Activity Matching Matrix
- Supportive Environment Review Checklist

Day 3: Behavior, Health, and Daily Living

- Unmet-Needs Behavior Analysis
- Structured Pain Observation Tool
- Nutrition and Hydration Support Plan
- Mobility and Falls Adaptation Map
- Medication and Health-Change Escalation Log

Day 4: Families, Transitions, and Quality

- Family Partnership and Support Map
- Dementia Care Navigation Pathway
- Care Transition Handover Record
- Advance Statement Review Framework
- Dementia Care Quality Scorecard

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Day 5: Dementia Care Practice

- Exercise: Build a Person-Centered Profile
- Exercise: Adapt a Communication Encounter
- Exercise: Analyze a Behavior Change
- Exercise: Plan a Care Transition
- Capstone Exercise: Person-Centered Dementia Care Portfolio

Practical Exercises

The course uses suggested activities from memory services, residential care, hospitals, rehabilitation, home care, and community support.

- Suggested activity: create a profile linking life story, strengths, preferences, cognition, function, routines, and care priorities.
- Suggested activity: adapt communication and meaningful activity to a person's abilities, cues, and emotional experience.
- Suggested activity: investigate a behavior change using pain, health, environment, communication, and unmet-needs evidence.
- Suggested activity: assemble a portfolio linking care plans, family partnership, transitions, workforce support, and quality actions.

FAQs

Who suits person-centered dementia care training, and what does it assume?

Person-centered dementia care training suits experienced care, nursing, therapy, coordination, social-care, and service-leadership functions. It assumes current involvement in dementia support rather than introductory elderly-care operations.

How does person-centered dementia care differ from general elderly-care management training?

Person-centered dementia care focuses on cognitive change, communication, behavior, life story, meaningful engagement, family partnership, transitions, and dementia-specific quality. General elderly-care management covers wider resident operations, staffing, safety, and service administration.

How should dementia-related behavior changes be assessed?

Behavior changes should be treated as communication and investigated for pain, illness, medication effects, environment, unmet needs, fear, fatigue, sensory barriers, and interaction patterns before support is adjusted.

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Why are life stories important in dementia care?

Life stories help care teams recognize identity, relationships, routines, preferences, abilities, and sources of meaning. They support individualized communication, activity, reassurance, and care planning as cognition and function change.

How can dementia care support family partners?

Dementia care can involve chosen family partners in decisions, education, observation, planning, transitions, and review while preserving the person's voice, privacy, rights, and preferences. Support also includes caregiver wellbeing and access to help.

Conclusion

The course integrates assessment, communication, engagement, behavior support, daily living, family partnership, transitions, and quality review. Participants take back a Person-Centered Dementia Care Portfolio. The portfolio changes how their teams interpret needs, coordinate support, involve families, protect continuity, and improve dementia-specific care.