Dementia Day Service Guidelines

The Dementia Day Program provides specialized day care services to address the needs of eligible individuals, for those who service the dementia, Alzheimer’s, and cognitively disturbed populations.

In addition to meeting the expectations of the adult day health regulations at 130 CMR 404.000, programs that offer services to dementia populations should follow these guidelines.

(A) Philosophy. To provide therapeutic activities for debilitated older adults that maximize functional performance in areas such as cognition, health, mood, and behavior.

(B) Admission. Admission and reimbursement of dementia-specific programming is based on the complex level of care for adult day health. To receive complex level-of-care rates, the members must meet nursing facility eligibility as outlined in 130 CMR 456.409. Adult day health programs must maintain documentation that demonstrates the complex level of care.

(C) Member Care Plan. The member’s care plan should be developed to address the physical, psychosocial, behavioral, and activities of daily living needs of the member. The plan should include:

1. individual service needs;
2. measurable objectives of care for the member; and
3. a supportive service and activity plan designed to meet the psychosocial and therapeutic needs of the member.

(D) Program Specifications.

1. When a program serves both a demented and non-demented population, a separate space must be available for programming for the dementia population.
2. Services and activities should include helping members and families adjust physically and psychologically to the illness.
3. Activities should be appropriate and provided for high- and low-functioning groups.
4. Activities should be habilitative and provide:
   - opportunities to maximize functional independence;
   - enjoyable, pleasurable experiences;
   - a positive outlet for energy and emotions;
   - opportunities for self-expression;
   - structured time;
   - relaxation and stress release;
   - accommodations for wandering in a safe climate;
   - physical fitness activities;
   - continued contact with the community;
   - opportunities for peer relationships;
   - coordination with those involved in the provision of care; and
   - coordination with community service providers for needed therapies and resocialization.
(E) **Staffing and Education.**

(1) Programs who serve demented clients, with either Alzheimer’s or dementia, should ensure that they can safely serve that population. Staff should have adequate skills, education, and experience to serve the population in a manner consistent with the philosophy of the adult day health center.

(2) When a provider serves members at both basic and complex levels of care, direct care staff ratios should be blended to meet the needs of their members, as an aggregate to meet the ratio.

(3) The program must maintain a staff-to-member ratio of at least 1:4 on site.

(4) The program must provide the following education and training supports:

- dealing with dementia;
- verbal and non-verbal communication skills;
- behavior management skills;
- group process skills;
- family functioning;
- dealing with difficulty in group participation;
- dealing with high anxiety;
- dealing with aggressive behavior; and
- dealing with wandering.

(F) **Physical Plant.** The physical environment should create an atmosphere that helps individuals compensate for cognitive losses, by providing:

(1) a lower stimulation area or a room with reduced auditory and visual stimulation;

(2) wall coverings that are simple in design on non-shiny paper or flat painted walls;

(3) plant design, maintenance, and upkeep that incorporate current research findings that improve care for this population;

(4) exit doors that are alarmed or secured;

(5) security features to prevent unsupervised wandering; and

(6) dividers, partitions, and barriers that are secured.