



COURSE OUTLINE			
TERM: Fall 2024		COURSE NO: HCA 105	
INSTRUCTOR:		COURSE TITLE: Cognitive and/or Mental Health Challenges	
OFFICE:	LOCAL:	SECTION NO:	CREDITS: 3.0
EMAIL:	@capilanou.ca		
OFFICE HOURS:			
COURSE WEBSITE:			

Capilano University acknowledges with respect the Liłwat7úl (Lil'wat), x<sup>w</sup>məθk<sup>w</sup>əyəm (Musqueam), shíshálh (Sechelt), Skw̓xwú7mesh (Squamish), and Səlílwətaʔ/Selilwitulh (Tseil-Waututh) people on whose territories our campuses are located.

#### COURSE FORMAT

10 x 6.5 instructional hours, in-person and/or online, see elearn and HCA student manual for details. Several topics will be covered in each session. Minimum 60 instructional hours.

#### COURSE PREREQUISITES/CO-REQUISITES

None

#### COURSE DESCRIPTION

This course builds on content from other courses to assist students to explore concepts and caregiving approaches that will allow them to work effectively with individuals experiencing cognitive and/or mental health challenges. The emphasis in this course is on supporting clients with dementia, recognizing responsive behaviours, and identifying person-centred intervention strategies.

#### REQUIRED TEXTS AND/OR RESOURCES

Wilk, M. J., (2022) *Sorrentino's Canadian Textbook for the Support Worker* (5<sup>th</sup> ed.). Elsevier: Toronto, Ontario. This is bundled with a workbook.

Murray, K. (2020) *Integrating a Palliative Approach: Essentials for Personal Support Workers* [Textbook] (2<sup>nd</sup> ed.). Life and Death Matters: Victoria, BC

Murray, K. (2020) *Integrating a Palliative Approach: Essentials for Personal Support Workers* [Workbook] (2<sup>nd</sup> ed.). Life and Death Matters: Victoria, BC

**COURSE STUDENT LEARNING OUTCOMES**

**On successful completion of this course, students will be able to do the following:**

1. Describe ways to organize, provide, and evaluate person-centred care and assistance for clients experiencing cognitive challenges:
  - Explain the difference between confusion, delirium, and dementia.
  - Identify causes of reversible and irreversible dementia and describe the primary forms, causes, symptoms, and treatments, as well as the stages of dementia.
  - Discuss principles of person-and family-centred care used to care for individuals living with dementia.
  - Use effective communication strategies for interacting with persons with dementia.
  - Describe the behaviours and psychological symptoms of dementia, including factors influencing behaviours and strategies for preventing and responding to behaviours.
  - Describe appropriate techniques for assisting with personal care and dietary intake for persons with dementia.
  - Describe appropriate activities for individuals experiencing different levels of dementia.
  - Identify the needs of the families and professional caregivers and describe ways to support them.
2. Describe ways to organize, provide, and evaluate person-centred care and assistance for clients experiencing mental health challenges:
  - Explain the mental health continuum and identify factors that influence the mental health and well-being of individuals.
  - Describe the causes, symptoms, treatments, and prevalence of common mental health disorders and conditions.
  - Discuss stigma associated with mental health challenges and stigmatizing language.
  - Discuss how perceptions of mental health challenges may differ between diverse groups.
  - Describe the principles and approaches for person-centred care of the client and family.
  - Identify implications of involuntary admission under the Mental Health Act.
3. Describe effective approaches for responding to responsive and reactive behaviours:
  - Identify behavioural indicators that an individual or group is becoming reactive or exhibiting behaviours that could impact safety.
  - Describe appropriate verbal and non-verbal techniques to promote a calming atmosphere and de-escalate responsive behaviours.
  - Identify when and how to exit a potentially unsafe situation.
4. Describe effective approaches for recognizing, responding to, and preventing elder abuse.
  - Identify types of elder abuse.
  - Describe signs and symptoms of elder abuse.
  - Discuss risk factors and underlying causes of elder abuse.
  - Discuss strategies for preventing and responding to elder abuse.

## COURSE CONTENT

### Cognitive Challenges in Older Adulthood

- Confusion
- Neurocognitive disorders
  - Delirium
  - Dementia
    - Reversible vs. irreversible causes
    - Primary forms: Alzheimer's disease and other dementias
    - Pathology, processes, and characteristics
    - Protective factors and risk factors
    - Stages of dementia
- Person-centred and family-centred care for individuals with dementia.
  - Principles of person- and family-centred care.
  - Common person-centred care training programs for caregivers used in B.C.
  - Common person-centred care models for care facilities.
  - Stigma associated with cognitive challenges and stigmatizing language.
- Effective communication strategies for clients with dementia.
- Behavioural and psychological symptoms of dementia (BPSD).
  - Types of responsive behaviours.
  - Factors precipitating behaviours.
  - Strategies for preventing and responding to BPSD.
  - Knowing when to exit a potentially unsafe situation.
  - Importance of environment in relation to behaviours.
- Environmental design strategies: familiar, homelike, accessible, safe, comfortable, and navigable.
- Working with individuals experiencing early, moderate, or severe dementia.
  - Observing clients and situations.
  - Appropriate engagement and participation in care and activities for individuals experiencing differing levels of dementia.
  - Strategies for assisting with eating and drinking.
  - Non-pharmacological therapies (e.g., music, pets, art, multisensory, massage, bright light, aromatherapy, reminiscence, meaningful activities).
- Supporting family members experiencing grief and loss.
- Caregiver needs and support.

### Mental Health Challenges

- Mental health models.
- Factors that influence mental health and well-being in individuals and families, such as stress, illness, loss, and aging.
- Common mental health disorders, including causes, symptoms, treatments, and prevalence of:
  - Anxiety disorders
  - Affective (mood) disorders
  - Schizophrenia
  - Personality disorders
  - Substance-related and addictive disorders

- o Dual or multiple diagnoses
- o Suicide risks and prevention
- Stigma associated with mental health challenges and stigmatizing language.
- Perceptions of mental health challenges in diverse groups.
- Caring for the person and family.
  - o Principles and approaches used to plan and implement effective care.
  - o Person-centred care.
  - o Person-first language vs. identity-first language (e.g., person with a diagnosis of depression vs. depressed client).
  - o Introduction to trauma-informed care.
  - o When and what to report.
- Implications of involuntary admission under the Mental Health Act.
  - o Alteration of client's right to leave the care setting or to refuse treatment.

### Abuse

- Types of abuse (reportable incidents).
  - o Physical, emotional, sexual, financial, neglect (as per Residential Care Regulation).
  - o Self-neglect.
- Sign and symptoms of elder abuse, including physical injuries, changes in behaviour, emotional distress, financial manipulation, and neglect.
- Risk factors and causes of abuse, including ageism, caregiver stress, social isolation, and mental health challenges.
- Types of abusive relationships.
  - o Caregiver/client
  - o Family member/client
  - o Client/client
- Four stages of the cycle of abuse.
- Strategies for preventing abuse, including promoting awareness, building social networks, and access to supportive services and resources.
- Responding to and reporting signs of abuse

### EVALUATION PROFILE

Quiz 1	20%
Quiz 2	15%
Quiz 3	15%
Assignment 1	5%
Assignment 2	10%
Assignment 3	10%
Assignment 4	15%
Participation*	10%
<b>TOTAL</b>	<b>100%</b>

### Assignment Descriptions

All assessments will be completed and/or submitted online.

- Exams/quizzes – via eLearn
- Written submissions – via eLearn

### Participation\*

This mark is based on both the frequency and quality of the student's comments, questions, observations, and involvement, with the emphasis on quality. The quality is determined by among other things, the relevance, insight and clarity of remarks. Reading the required readings in advance will support a student's ability to participate. Not attending, being late to class or being late returning from breaks, will impact the overall participation grade.

### GRADING PROFILE

A+ = 90-100	B+ = 77-79	C+ = 67-69	D = 50-59
A = 85-89	B = 73-76	C = 63-66	F = 0-49
A- = 80-84	B- = 70-72	C- = 60-62	

### Incomplete Grades

Grades of Incomplete "I" are assigned only in exceptional circumstances when a student requests extra time to complete their coursework. Such agreements are made only at the request of the student, who is responsible to determine from the instructor the outstanding requirements of the course.

### Late Assignments

Assignments are due at the beginning of the class on the due date listed. If you anticipate handing in an assignment late, please consult with your instructor beforehand. Marks will be deducted for the late submission of assignments. The penalty for a late submission is 10% for each day. All assignments must be submitted in order to receive credit for the course.

### Missed Exams/Quizzes/Labs etc

Make-up exams, quizzes and/or tests are given at the discretion of the instructor. They are generally given only in medical emergencies or severe personal crises. Some missed labs or other activities may not be able to be accommodated. Please consult with your instructor. Accommodations can be made to honour community needs or traditional practices.

### Attendance

Students are expected to attend all classes and associated activities. A student who misses 10% of classes will be placed on Program Probation pending a faculty review, and may not receive credit for this course. If you are ill or caring for someone who is ill and/or need to self-isolate, please contact the instructor so that we can ensure that you are able to complete the course. See also the student manual regarding attendance, which applies to all courses in the HCA program.

**English Usage**

All assignments are marked for correct English usage, proofreading, and formatting. At the instructor's discretion, any assignment not reaching these standards may be returned for revision and resubmission.

**Electronic Devices**

Cell phones must be turned to vibrate or silent mode during class sessions unless being used as part of an in-class activity. Students that use their phones to call or text in class will be given one warning. If this behaviour continues, instructors may ask the student to leave the class. Students will receive a written warning that will go on their file. Use of cell phones during tests could be construed as cheating and the student may receive a score of zero. For privacy issues, no photographs can be taken in class, lab or clinical without the instructor's permission.

**On-line Communication**

Students in the HCA program are expected to check their Cap email at least once per day. Instructors will use this email address for important program and course related communications. Students must respond to the instructors using **only** their Cap email. Emails from personal email addresses will not be accepted.

**UNIVERSITY OPERATIONAL DETAILS****Tools for Success**

Many services are available to support student success for Capilano University students. A central navigation point for all services can be found at: <https://www.capilanou.ca/student-services/>

**Capilano University Security: download the [CapU Mobile Safety App](#)**

**Policy Statement (S2009-06)**

Capilano University has policies on Academic Appeals (including appeal of final grade), Student Conduct, Academic Integrity, Academic Probation and other educational issues. These and other policies are available on the University website.

**Academic Integrity (S2017-05)**

Any instance of academic dishonesty or breach of the standards of academic integrity is serious and students will be held accountable for their actions, whether acting alone or in a group. See policy and procedures S2017-05 Academic Integrity for more information:

<https://www.capilanou.ca/about-capu/governance/policies/>

Violations of academic integrity, including dishonesty in assignments, examinations, or other academic performances, are prohibited and will be handled in accordance with the Student Academic Integrity Procedures.

**Academic dishonesty** is any act that breaches one or more of the principles of academic integrity. Acts of academic dishonesty may include but are not limited to the following types:

**Cheating:** Using or providing unauthorized aids, assistance or materials while preparing or completing assessments, or when completing practical work (in clinical, practicum, or lab settings), including but not limited to the following:

- Copying or attempting to copy the work of another during an assessment;
- Communicating work to another student during an examination;
- Using unauthorized aids, notes, or electronic devices or means during an examination;
- Unauthorized possession of an assessment or answer key; and/or,
- Submitting of a substantially similar assessment by two or more students, except in the case where such submission is specifically authorized by the instructor.

**Fraud:** Creation or use of falsified documents.

**Misuse or misrepresentation of sources:** Presenting source material in such a way as to distort its original purpose or implication(s); misattributing words, ideas, etc. to someone other than the original source; misrepresenting or manipulating research findings or data; and/or suppressing aspects of findings or data in order to present conclusions in a light other than the research, taken as a whole, would support.

**Plagiarism:** Presenting or submitting, as one's own work, the research, words, ideas, artistic imagery, arguments, calculations, illustrations, or diagrams of another person or persons without explicit or accurate citation or credit.

**Self-Plagiarism:** Submitting one's own work for credit in more than one course without the permission of the instructors, or re-submitting work, in whole or in part, for which credit has already been granted without permission of the instructors.

**Prohibited Conduct:** The following are examples of other conduct specifically prohibited:

- Taking unauthorized possession of the work of another student (for example, intercepting and removing such work from a photocopier or printer, or collecting the graded work of another student from a stack of papers);
- Falsifying one's own and/or other students' attendance in a course;
- Impersonating or allowing the impersonation of an individual;
- Modifying a graded assessment then submitting it for re-grading; or,
- Assisting or attempting to assist another person to commit any breach of academic integrity.

### **Sexual Violence and Misconduct**

All Members of the University Community have the right to work, teach and study in an environment that is free from all forms of sexual violence and misconduct. Policy B401 defines sexual assault as follows:

Sexual assault is any form of sexual contact that occurs without ongoing and freely given consent, including the threat of sexual contact without consent. Sexual assault can be committed by a stranger, someone known to the survivor or an intimate partner.

Safety and security at the University are a priority and any form of sexual violence and misconduct will not be tolerated or condoned. The University expects all Students and Members of the University Community to abide by all laws and University policies, including B.401 Sexual Violence and Misconduct Policy and B.401.1 Sexual Violence and Misconduct Procedure (found on Policy page <https://www.capilanou.ca/about-capu/governance/policies/>)

**Emergencies:** Students are expected to familiarise themselves with the emergency policies where appropriate and the emergency procedures posted on the wall of the classroom.

## **DEPARTMENT OR PROGRAM OPERATIONAL DETAILS**

### **Vision Statement**

Graduates of the Health Care Assistant program achieve a competent level of practice as an entry-level care provider. Graduates use a caring, problem-solving approach to provide care giving assistance that promotes the physical, psychological, social and spiritual well-being of the client and resident. The graduates are able to communicate effectively with clients, residents, family members and the health team.

### **AI Use in the HCA Department**

- The use of generative artificial intelligence tools is strictly prohibited in all course assignments unless explicitly stated otherwise by the instructor in this course. This includes ChatGPT and other artificial intelligence tools and programs. .
- Students are permitted to use artificial intelligence tools, including generative AI, to gather information, or review concepts. However, students are ultimately accountable for the work they submit, and any content generated or supported by an artificial intelligence tool must be cited appropriately. Please speak with your instructor if you are unsure about AI use in your coursework.
- Students are permitted to use AI tools for formative work such as gathering information or brainstorming but may not use it on any assessed work or final submissions.
- ***Use of AI tools is not permitted during midterm exams and final exams in this course.***

### **Punctuality**

Punctuality is essential in both classroom courses and practicum given the professional nature of the program. Please see the Punctuality and Attendance Policy in the HCA Student Manual.

### **Professionalism**

All students are expected to maintain the program's standards of academic achievement and professional behaviour as described in the HCA Student Manual.