

Canadian Remote Access for Dementia Learning Experiences: A Summary of Canadian Care Providers' Dementia-Related Knowledge and Skills

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A significant number of people live with or care for someone with dementia. Professional care providers are often unprepared for the unique needs of a person living with dementia. This

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FSC is a forward-thinking centre for research and collaboration dedicated to preparing Canadians for employment success. We believe Canadians should feel confident about the skills they have to succeed in a changing workforce. As a pan-Canadian community, we are collaborating to rigorously identify, test, measure, and share innovative approaches to assessing and developing the skills Canadians need to thrive in the days and years ahead. The Future Skills Centre was founded by a consortium whose members are Toronto Metropolitan University, Blueprint ADE, and The Conference Board of Canada

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report's objective was to describe the knowledge and skills of care providers of people living with dementia across Canada.

Surveys were administered to participants who registered for an online course on dementia. They included demographics, essential workplace skills, general knowledge of dementia, and facilitators and barriers to participate in continuing education. Surveys were offered in several languages and they were available online. There were 2,590 respondents who completed surveys. Over 95% of respondents used English as a primary language. Most respondents (>95%) did not identify a concern with an essential workplace skill such as reading, writing, computer use, working with others, and critical thinking. General knowledge of Alzheimer Disease was moderately high (79.0%).

Care providers have strong essential workplace skills which are transferrable into their supportive roles. Some knowledge gaps were identified in their general knowledge of dementia; however, more research is needed to identify tools to precisely assess some applied skills in practice such as how person-centred care is delivered, supporting social integration in the community and integrating care partners. Continuing education is needed in targeted areas to inform care providers and optimize services. These areas should not address basic language or technology usage. Rather, they should address how to better apply skills in applied scenarios of providing care to someone with dementia.

Table 1: Alzheimer's Disease Knowledge Scores

True or False Items	Correct Response Rate (%)
1. It is safe for people with Alzheimer's disease (AD) to drive, as long as they have a companion in the car at all times. (TRUE)	90.8%
2. Genes can only partially account for the development of AD. (FALSE)	51.4%
3. Tremor or shaking of the hands or arms is a common symptom in people with AD. (TRUE)	89.1%
4. AD cannot be cured. (TRUE)	95.4%
5. People with AD do best with simple instructions giving one step at a time. (TRUE)	97.7%
6. If trouble with memory and confused thinking appears suddenly, it is likely due to AD. (FALSE)	42.9%
7. In rare cases, people have recovered from Alzheimer's disease. (TRUE)	77.2%

8. When a person has AD, using reminder notes is a crutch that can contribute to decline. (FALSE)	20.7%
9. Eventually, a person with AD will need 24-hr supervision. (TRUE)	86.9%
10. Prescription drugs that prevent AD are available. (FALSE)	32.1%
11. Most people with AD live in nursing homes. (FALSE)	22.7%
12. AD is one type of dementia. (TRUE)	91.6%
13. When people with AD repeat the same question or story several times, it is helpful to remind them that they are repeating themselves. (TRUE)	74.8%
14. Most people with AD remember recent events better than things that happened in the past. (TRUE)	91.3%
15. People in their 30s can have AD. (FALSE)	26.3%
16. It has been scientifically proven that mental exercise can prevent a person from getting AD. (FALSE)	30.9%
17. People whose AD is not yet severe can benefit from psychotherapy for depression and anxiety. (TRUE)	91.1%
18. One symptom that can occur with AD is believing that other people are stealing one's things. (TRUE)	62.9%
19. People with AD are particularly prone to depression. (FALSE)	50.7%
20. After symptoms of AD appear, the average life expectancy is 6–12 years. (TRUE)	82.5%
21. Symptoms of severe depression can be mistaken for symptoms of AD. (TRUE)	94.7%
22. If a person with AD becomes alert and agitated at night, a good strategy is to try to make sure that the person gets plenty of physical activity during the day. (TRUE)	87.5%
23. Once people have AD, they are no longer capable of making informed decisions about their own care. (TRUE)	87.3%

24. A person with AD becomes increasingly likely to fall down as the disease gets worse. (FALSE)	33.4%
25. When a person with AD becomes agitated, a medical examination might reveal other health problems that caused the agitation. (FALSE)	22.9%
26. Having high blood pressure may increase a person's risk of developing AD. (TRUE)	67.5%
27. Having high cholesterol may increase a person's risk of developing AD. (TRUE)	84.1%
28. Trouble handling money or paying bills is a common early symptom of AD. (FALSE)	20.2%
29. Poor nutrition can make the symptoms of AD worse. (TRUE)	93.5%
30. When people with AD begin to have difficulty taking care of themselves, caregivers should take over right away. (FALSE)	21.5%
Total	79.0%

Table 2: Essential workplace skills

Essential Skills	Identified as a concern (n,%)
Writing	
Write short reminder notes to myself or others.	32 (1.2%)
Write down telephone messages.	96 (3.7%)
Include details and examples to support my writing.	78 (3.0%)
Write formal emails or letters to clients or supervisors.	105 (4.1%)
Computer Use	
Use a variety of electronic devices such as calculators, fax machines, photocopiers, and telephones.	73 (2.8%)
Use a mouse to open and navigate programs by clicking buttons, menus, etc.	67 (2.6%)
Use common desktop icons and menus to open programs and files (e.g. Internet browser, email).	45 (1.7%)
Reading	

Read a paragraph to find a key piece of information.	32 (1.2%)
Read and correctly follow written instructions (such as a recipe or job assignment).	26 (1.0%)
Refer to a variety of documents to compare information (e.g. patient charts, care plans, doctors notes).	50 (1.9%)
Critical Thinking	
Identify the cause of a problem when I have all the necessary information given to me.	43 (1.7%)
Identify and evaluate the pros and cons of each potential solution.	35 (1.4%)
Make adjustments to existing workplace procedures to help solve a problem (set procedures may not address every type of problem).	109 (4.2%)
Use my knowledge and past experiences to help me make decisions.	14 (0.5%)
Decide which of several options is most appropriate.	24 (0.9%)
Working with Others	
Organize my work tasks within a set of priorities.	18 (0.7%)
Work co-operatively with a partner or team to complete tasks.	9 (0.3%)
Give directions to my partner or team members as required.	23 (0.9%)
Contribute to making decisions co-operatively and settling differences respectfully.	18 (0.7%)
Lead by setting a good example for the people around me.	14 (0.5%)
Provide constructive feedback to help others improve their work.	35 (1.4%)
Support colleagues by taking the time to help others with their work.	11 (0.4%)