

# Dementia Care & Behavior Goal Setting Ideas

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## **Agitation:**

Demonstrate  $\leq 3$  episodes of agitation within 1 week through use of compensation strategies.

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## **Appropriate Responses/Communication Issues:**

Will be pragmatically appropriate in a 10 minute conversation 75% of the time.

Will not interrupt the conversation of others more than 1 time within 60 minutes of socialization group.

Will express needs/wants either verbally or in writing 80% of the time.

Will be able to communicate 1 need daily to staff to decrease negative behaviors.

Yelling behaviors will be reduced to one or less per day through caregiver model of appropriate volume following patient's verbalizations.

Will use appropriate language when addressing staff with 90% accuracy independently.

Will sequence 3-step task with 80% accuracy using no profanity (or 1 incident, etc.) in 10 minutes.

Will use appropriate social communication when interacting with other residents 90% of the time during dining room conversation.

Will independently indicate wants and needs using environmental controls or alternative communication devices 90% of the time.

Will use (pictures/symbols/other verbal or non-verbals) to augment communication of needs/wants 100% of the time in order to reduce frustration and anxiety leading to behaviors.

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## **Attention Span:**

Maintain attention to task for (time) for 5 sessions to facilitate participation in (identify situation/setting/group/performance area).

Increase attention span by (identify number) minutes through external sources of stimuli.

Will participate in functional activity and stay on task for 5 minutes without the need to be redirected.

Will attend to task until completed.

Will increase attention to concrete tasks (e.g., sorting) for 5 minutes in a quiet environment with supervision.

Will complete five UE ROM exercises in a noisy environment without verbal cues.

Will complete exercise routine in 5 minute intervals (no cuing) using a reward system.

Will remain focused on a fine motor coordination task for 5 minutes without distraction.

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**Compliance:**

Verbalize 2 negative impacts of non-compliance with medication routine within 2 weeks.

Will press call light prior to getting out of bed for increased safety with toileting with minimal assistance.

Will change clothes 5x/week with moderate verbal encouragement and set-up.

Will complete ACLS to determine appropriate level of supervision for safety with daily activities.

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**Coping Strategies:**

Will be able to identify 1 coping skill to utilize when feeling angry or agitated to decrease negative behaviors.

Will make and follow schedule using (script, pre-recorded reminders or picture schedules) to reduce behaviors to (identify number) or less per (day or hour).---This goal can include taping pictures onto the clock for those who have difficulty determining the time.

Will identify (number) precursors and communicate feelings/frustrations leading to undesired behaviors.

Will improve frustration tolerance with A.M. ADLs through identification of 3 stress management techniques.

Will demonstrate no anxiety-related shortness of breath for 3 consecutive days by independently recognizing increase in anxiety and performing self-regulating sensory techniques. (for residents who have anxiety related SOB that is affecting ADL performance and social interactions).

Will identify an alternative to the self destructive habit of \_\_\_\_\_( picking at skin) and utilize this alternative activity independently 3/5 times that the harmful habit is initiated.

Will verbalize a decrease in anxiety through stress reducing activities 3 of 5 days.

Will engage in rhythmic movements to chair dance, march in place, or rock for pleasant sensorimotor stimulation to decrease behaviors and sustain attention with verbal cues for initiation of activity.

Will sing songs for pleasant communication and avoid agitation given minimal cognitive assistance to initiate and sustain attention.

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**Orientation/Adjustment to facility:**

Will independently orient self x3 with use of external aids in 2 weeks.

Will refer to journal (or written schedule) to increase familiarity with facility schedule at least 3 x/day.

Will read/attend to reading of script of recent personal past to increase familiarity and decrease anxiety at least 3x/day.

Will recall orientation (temporal and/or spatial) information with use of a social story 90% of the time.

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Will respond to increased visual contrast of waste basket to floor by showing a 50% reduction in throwing toilet paper on floor over the course of one week

Will be able to identify and participate in 1 group leisure activity/week to decrease isolation and negative behaviors.

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**Participation:**

Will participate in (identify number or % of time) of meaningful activities per day to increase functional independence.

Will participate in OT tx for (identify number) of consecutive minutes 3x/day without refusal for 3 days.

Will participate in ADL task for 5 minutes without demonstrating inappropriate behaviors.

Will participate in therapy with no more than 2 episodes of combative behaviors per session.

Will initiate presented OT tasks with no negative comments made for 3 of 5 trials.

Will improve from one step commands and max prompting to maintain cooperation in contrived tasks to 3-5 step sequencing in repetitive laundry folding task with 90% accuracy and min cues.

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**Repetitive Questioning/Statements:**

Will make  $\leq 3$  repetitive requests in (identify number) of hours via compensatory strategies.

Will reduce frequent/perseverative requests for information/items/etc to 2 per hour using visual memory aid to obtain needed request (given min assist by staff).

Will decrease echolalia by 50% and replace it with a simple verbal response to familiar questions in 4 weeks.

(Therapist provided this goal that includes the methods that the goal could be graded) Will refer to visual aid in response to repetitive question daily, after initial answer provided, with 1 verbal cue x 3, then with 1 non-verbal cue x 3 (we pointed to it) to enhance self-reliance on visual aid and use of compensatory technique, therefore decreasing repetitive questioning and allowing increased focus to task.

Will complete assigned activity in allotted time frame with 3 or less questions.

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**Safety in Swallowing:**

Will count to ten between bites of food out loud to decrease rate of eating and improve safety of swallow with at least one meal/day.

Will demonstrate adequate oral acceptance of spoon for 75% of meal (this goal is for residents with dysphagia that demonstrate resistive behaviors while eating like clamping their mouth shut to prevent being fed).

Will consume meal with <25% spitting.

Will consistently self-feed at least 75% of meal given structured set-up with 1 item at a time and limiting fluids to intermittent times throughout the meal.

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**Self-Care:**

Pt will identify their preferred daily schedule of activities to aid in ADL FMP development. (see depression protocol for interview form)

Pt will participate in purposeful activity at least 20% of the day 3 of 5 days to show increased endurance, time management, and to promote quality of life.

Pt will recall OT appointment time and arrive on time to the therapy room, with written cue, 4 of 5 days to show increased time management, memory, direction following, and organization

Pt will report restful sleep x 6 hours 4 of 5 nights after environmental modifications by OT.(see depression protocol for issues to consider re: sleep cycles.)

Pt will demonstrate 75% or more intake of meals 3 of 3 days on dining

Will independently demonstrate the ability to manage time for self care 100% of the time in 2 weeks.

Will perform 5-step self care task to completion, after initial cuing, 100% of the time in 2 weeks.

Will initiate hygiene task during ADL session with  $\leq 2$  cues in 4/5 trials.

Will complete UE dressing with min A and no episodes of striking out.

Will verbalize and demonstrate 3 energy conservation strategies to complete an ADL task x2 weeks.

Will perform peri care and clothing management with grab bar and Min A x1 with gentle reassurance and redirection (for the anxious resident).

Will complete 3 steps of self care routine making 3 or less self-limiting remarks.

Will improve frustration tolerance with A.M. ADLs through identification of 3 stress management techniques.

Will complete a.m. ADLs without distraction following a sequenced routine.

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**Self-directed activity/use of time:**

Demonstrate ability to plan a calendar of activities and follow the schedule as planned 75% of the time in two weeks.

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**Self-esteem/self image:**

Identify 3+ positive self attributes each morning within 3 weeks.

Will independently propel self in wheelchair to/from 70% of activities/therapies for 2 consecutive days. (for use with residents with self-limiting behavior with wheelchair propulsion).

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**Social Behavior:**

Demonstrate appropriate social behaviors during dining with (identify number) of cues per session.

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Will display appropriate behavior while having meals in the dining room 75% of the time/trials with min A.

Will decrease disruptive behaviors during group activity by following structure and being verbally cooperative with other people.

Tolerate alternative dining placement to decrease sensory stimulation and behavioral outbursts to less than 2 occurrences to self feed Min A.

Participate in BUE HEP (RNP) with no behavioral outbursts 3/6 days.

Demonstrate socially appropriate behaviors in social group situations 100% of the time in two weeks.

Decrease negative behaviors (i.e., yelling, pulling at staff, etc) to < 3 per session, given cognitive-linguistic stimulation, in 4 weeks.

Utilize BLE for seated propulsion in wheelchair 200 feet with supervision to regulate/reduce behavioral outbursts to less than 2 occurrences on second shift.

Reduce grabbing behavior by release of object/person given "predictable" stimulation (verbal count of 3) in 90% of opportunities.

Decrease negative behaviors by attending to therapeutic activity from personalized "busy bag" for 30 minutes with cuing from staff.

Demonstrate no more than two episodes of inappropriate behaviors every 1 week within 4 week period.

Will have no more than 2 outbursts during 30 minute treatment session with 2 verbal cues.

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**Wandering:**

Will not wander into others' rooms through use of environmental strategies/compensatory strategies.

Will comply with periodic rest breaks with staff supervision each hour throughout the day (to promote reduced: LE edema, joint pain, wt loss, fatigue, fall risk, etc.)

Will reduce wandering behavior by 30% through use of alternative seated repetitive activity (stacking/sorting, arm bike, rocking)

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**Motor Skills:**

Pt will tolerate 20 minutes of group therapeutic exercise to show increased activity tolerance for self care and to promote reduced isolation/social withdrawal.

Pt will maintain postural alignment (shoulders over hips) during mobility tasks with PT with min verbal cues 3 of 3 days to reduce back pain, fall risk, and promote stability.

Pt will initiate transfer within 3 seconds of verbal request to show increased rate of movement for mobility tasks using counting aloud as initiative cue

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Pt will demonstrate home exercise program with MI using memory cue cards for increased strength, activity tolerance, and as a method of stress reduction.

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### **Cognitive Skills:**

Pt will attend to functional activity (ie. grooming) 5 mins with minimal re-direction from therapist 3 of 3 days to show improved attention span & concentration skills for ADL.

Pt will demonstrate increased decision making ability by completing daily menu request with modified independence after 1 VC to initiate task.

Pt will choose 2 activities from the activity calendar to participate in this week to show increased decision making skills and to promote reduced social withdrawal.

Pt will demonstrate increased organizational skill by completing ADL set up with min A including retrieving all needed toiletries, clothing, and linens for morning care.

Pt will identify 1 appropriate solution to manage the conflict with his C.N.A re: ADL care times to show increased problem solving skill and promote effective ADL FMP management.

Pt will follow 2- step direction during toileting task 3 of 3 trials.

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### **Intrapersonal**

Pt will demonstrate no more than 2 incidents of inappropriate behavior in 5 days during ADLs (this can be made more specific and modified to fit tearfulness, anger responses, rude behavior, cursing, etc. It can also be written to say during meals, during group activities, during interaction with staff, etc..)

Pt will identify 3 triggers of irritability (or fear, or agitation, or sadness,etc) to aid in the development of the behavior plan/ FMP establishment.

Pt will complete & return journaling assignment with modified independence, to demonstrate improved direction following, short term memory, and to promote insight into feelings of hopelessness.

### **Interpersonal**

Pt will ambulate to and from 2 group activities of choice this week to show improved initiation of mobility within facility and to promote reduced social withdrawal.

Pt will tolerate 3 of 5 meals in dining room seated with peers to promote increased nutrition and social participation.

Pt will participate in conversation during group therapy session with at least 2 verbal responses 2 of 3 sessions (or pt. will attend to conversation for 5 mins, or pt. will initiate conversation at least once during 30 minute activity, or pt. will maintain eye contact for 5 seconds during conversation, etc.)

Pt will identify 3 leisure interests to aid in activity FMP development and to promote quality of life in this facility.

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### **Caregiver Education**

Caregiver will return demonstrate use of validation techniques to reduce escalation of resident's behavior

Caregiver will demonstrate appropriate strategies for promoting optimal independence with (communication, bathing, walking, dining) based on ACL 2.8.

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