



Welcome to

Project ECHO - Fostering Connection as Dementia Progresses Using the Positive Approach to Care®

July 15-December 15, 2026



Schedule

Session 1: July 15 – Emerald State

Session 2: August 19 – Diamond State

Session 3: September 16 – Sapphire State

Session 4: October 21 – Amber State

Session 5: November 18 – Ruby State

Session 6: December 16 – Pearl State

Today's Program

- Brief housekeeping
- Didactic: Beth A. D. Nolan, Ph.D. - Chief Public Health Officer, Teepa Snow PAC®
- Facilitated Discussion: Jen Raymond – Project Manager
- Summary: Annaliese Volckaert – Program Specialist
- Up Next

Disclosure

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Learning Objectives

At the conclusion of this learning activity, participants will be able to:

- Name the 6 gems of the GEMS® States of Brain Change.
- Relate at least 2 of the GEMS® to terms that are more commonly used for describing dementia's progression.
- Describe one thing they can practice to adjust their approach using knowledge of the GEMS® States of Brain Change.

Core Panel

- Catherine Amarante, BSN, RN, GERO-BC
- Joanna Fix, PhD – Positive Approach to Care®
- Martha Ilsley, LPN – Licensed Nursing Home Administrator
- Sally Matless, ThD – Family Member of Long-Term Care Resident
- Br. John-Richard Pagan, MA-MFT, CG, Positive Approach to Care®
- Daniel Stadler MD, CMD – Geriatrician, SNF Medical Director



Dartmouth
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Positive
Approach
to Care®
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Emerald GEMS® State

Beth A. D. Nolan, Ph.D. - Chief Public Health Officer

Teepa Snow's Positive Approach to Care ®



The GEMS State Model

Positive
Approach[®]
to Care

- The Positive Approach to Care GEMS® State Model was created to help see the retained abilities of a person living with brain change.
- An individual's GEMS State indicates retained skill in combination with changing function, so that support and cueing will foster engagement and participation rather than isolation and dysfunction.
- In brain change, there are not static stages of levels of lost abilities. An individual living with brain change will experience a variety of GEMS® States throughout each day and over time.
- Recognizing the GEMS State allows us to engage in an appropriate manner and helps the individual living with brain change shine, just as they are in that moment.

Why Use The GEMS® States?

- Until we begin to see the beauty and value in what the person has at this point, we will never care for them as we should
- Gems are precious and unique, provide a common language and characteristics
- Use familiar concepts to talk about a difficult subject
- Focus on what is valued
- Allow us to get beyond the words 'dementia' and 'Alzheimers disease'
- Open the door to talking about changes
- Allow us to speak in a 'code' to protect dignity



GEMS® Dementia Abilities

Based on Allen Cognitive Levels



- A Cognitive Disability Theory – OT based
- Creates a common language and approach to providing:
 - ✓ Environmental support
 - ✓ Caregiver support and cueing strategies
 - ✓ Expectations for retained ability and lost skill
 - ✓ Promotes graded task modification
- Each Gem state requires a special ‘setting’ and ‘just right’ care
 - ✓ Visual, verbal, touch communication cues
- Each can shine
- Encourages in the moment assessment of ability and need
 - ✓ Accounts for chemistry as well as structure change



The GEMS State Model

Positive
Approach
to Care

**GEMS are not discrete stages to which one deteriorates.
Rather, they are states one can move through, moment to moment, or day to day.**

The Positive Approach to Care GEMS® State Model was created to help us see the retained abilities of a person living with dementia (PLwD). An individual's GEMS state indicates retained skill in combination with missing function, so that support and cueing will foster engagement and participation rather than isolation and dysfunction. Recognizing the GEMS state allows us to engage in an appropriate manner and helps the PLwD shine, just as they are, in that moment.



Sapphire

True blue
Healthy brain
Normal aging
Flexible
Adaptable
Optimal cognition
Can provide support
for other GEMS states
with proper self-care
and support

Less peripheral
awareness with age



Diamond

Clear – Sharp
Many facets
Lives by habit
and routine
Likes familiar,
dislikes change
Blames or
dismisses errors
Can cut and shine

Scuba vision



Emerald

Green
On the go
with purpose
Flawed
Seeks independence
or connections
Repeats
Misses details
Travels in
time and place

Binocular vision



Amber

Orange
Caught in a
moment of time
More curious
than cautious
Focused on
sensory needs
Lives in the moment
Copies actions,
not tasks
Resists dislikes,
seeks likes

Can confuse objects



Ruby

Strong red
Retains strength,
not skills
Big/strong actions
Has rhythm
Notices tone
of voice
In motion or still
Imitates actions

Monocular vision



Pearl

Hidden in a shell
Ruled by reflexes
Short moments
of connection
Mostly immobile
Expresses unmet
needs with distress
Reacts to touch
Can recognize
familiar and liked

Limited visual regard



What can I do to support this person living with dementia (PLwD) in their GEMS state?

Based on what you **observe** of their GEMS state, choose *your response* from the skills below to support.

My Skills	Sapphire 	Diamond 	Emerald 	Amber 	Ruby 	Pearl 
Responding to Their Vision	Greet, stay in visual field when interacting, use supportive stance (body to the side, face toward person)	Get visual attention, respect space/distance preferences, use directional signs and labels	Offer familiar gestures, use supportive stance, limit complex cues, present items for use in their center field of vision only	Show items, then gesture use. Point to direct attention. Eliminate items that could cause harm, but offer substitutions	Offer greeting matching speed, allow time to visually explore objects and you. One item/cue at a time. Exaggerate	Seek gaze by placing face in central field. Place objects within arm's length, first use gestures to show actions
Responding to Their Language	Ask permission to reduce background noise or change locations. Summarize or ask questions to confirm	Connect before sharing info. Acknowledge preferences and emotions. Empathize – Confirm their emotional state and then say "I'm Sorry"	Use preferred name, reflect key message they gave. Keep answers short/concrete. Pair words with gesture or object. Slow down, use pauses, instruct one step at a time	Use familiar greeting or name, smile or reflect their expression to acknowledge. Use only 2 or 3 words at a time. Pair words with gesture or object. Reinforce efforts (Good!; Keep going)	Use facial expression with greeting. Pair single word with gesture or object. Use song, counting, or rhythm to initiate or transition. Use vocal rhythm to change pace	Deepen your voice, slow your speech, use sounds (Ooh! Ummm) or single words (Good. Drink?), then combine motions with your words
Touching a Person	Shake hands, respect personal space preferences, get permission to touch	Shake hands, respect personal space preferences, get permission to touch. If showing distress – comforting hug or touch, only with permission	Use handshake greeting to note touch tolerance, use Hand-under-Hand (HuH)* clasp when helping in intimate space, offer objects held the direction the PLwD would hold/use them	Get visual and verbal permission, then touch at the hand first. To get started, use HuH to guide and direct. Offer substitutions- do not just take something away	Offer hand, wait for regard, move into HuH when greeting, place other hand on shoulder or joint when assisting. Use HuH for support, tasks, guiding	To reduce distress, move one hand at a time; other hand connect with shoulder or joint. For all care: slow, flat, solid touch. Extending limbs will cause harm
Getting a Person to Move/Do Something	Seek partnership. Ask for their support/help. Acknowledge pain or discomfort before acting	Appreciate their skill or background: ask for their help, allow time, and offer options to watch, supervise, or do	Consider staying at edge of public space and gesturing with energy your desire for them to get up and join you, bring a prop to see	Demo what to do, at arm's length in central visual field, then offer the object or use HuH to begin. Use gestures to signal getting up, after arising yourself	Say their name, do what you want them to do, then use single words only. Guide movement to help them begin, re-cue if needed	Greet, pause. Use counting or emphasis to help the person to know what is going to happen. Go SLOW, pause, watch for discomfort



Emerald

Green

On the go
with purpose

Flawed

Seeks independence
or connections

Repeats

Misses details

Travels in
time and place

Binocular vision



Emerald

Green

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Flawed

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My Skills

Responding to Their Vision

Emerald



Offer familiar gestures, use supportive stance, limit complex cues, present items for use in their center field of vision only

Responding to Their Language

Use preferred name, reflect key message they gave. Keep answers short/concrete. Pair words with gesture or object. Slow down, use pauses, instruct one step at a time

Touching a Person

Use handshake greeting to note touch tolerance, use Hand-under-Hand (HuH)* clasp when helping in intimate space, offer objects held the direction the PLwD would hold/use them

Getting a Person to Move/Do Something

Consider staying at edge of public space and gesturing with energy your desire for them to get up and join you, bring a prop to see



Emerald GEMS® State

Beth A. D. Nolan, Ph.D. - Chief Public Health Officer

Teepa Snow's Positive Approach to Care ®

5 Emotional Indicators of Distress

& Top 5 Human Needs

5 Emotional Expressions

Anger: irritated – angry – furious

Sadness: dissatisfied – sad – hopeless

Isolation: missing someone – lonely – abandoned
missing freedom – trapped – imprisoned

Fear: anxious – scared – terrified

De-valued: disengaged – bored – purposeless/useless
distracted – antsy – exit seeking

Input: nourishment, hydration, medication, O2

Energy: Wake-sleep cycles, Revved up/Tired out.
Energy from within, from without

Elimination: Getting rid of excess waste products
(e.g., urine, feces, sweat, saliva, mucus, hair)

Discomfort: Liking or not liking... 4Fs and 4Ss
Friendly Familiar Functional Forgiving; Sensory Social Space Surface-to-Surface

PAIN!!!: Physical Social Emotional Spiritual (joints, internal/external systems)

Reflect Exercise



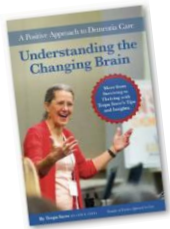
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Or www.teepasnow.com/presentations



Watch: Teepa Snow on YouTube

<https://www.youtube.com/@teepasnowvideos>



Read: Understanding the Changing Brain

<https://shop.teepasnow.com/product/understanding-the-changing-brain/>



Learn: Accepting the Challenge Streaming Video

<https://shop.teepasnow.com/product/accepting-the-challenge-streaming/>

Summary of Learnings

Themes and Key Takeaways

Annaliese Volckaert, Program Specialist

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Themes and Key Takeaways



EMERALD

- GEMS® States are for **EVERYBODY**: every brain, at ever age.
- The 6 GEMS® States are not exclusive to individuals living with brain change (i.e. dementia).
- Skills change over time, throughout the day, across the spectrum, and with disease progression.

When in Emerald State we are:

- On the go with purpose
- Flawed
- Seeking independence or connection
- Repeats
- Miss details
- Travel in time and place
- Have **Binocular** vision

Themes and Key Takeaways Continued



In the video, Teepa’s “agenda” was to get our friend up and moving, he’d been sitting for a long time. She used the Positive Approach to Care.

The Positive Approach to Care includes:

- A Positive Physical Approach: get in visual range from about 6 feet away; wait for acknowledgement/permission; position yourself at the person’s dominant side and get low (supportive stance).
- Make a Positive Personal Connection: Gave him a reason to move, “You know what? We’re watching a movie on Glenn Ford...handsome fella like you...”
- Positive Action Starter: “Let’s go watch some together” then one cue at a time: “alright, lean forward for me...ok now push with your legs to stand up.”

Why we struggle with individuals in Emerald state: we recognize that what we’re doing is working based on an individuals retained abilities makes it easy for us to forget that there are changes we don’t necessarily see. When we slow down, give one step at a time, use few, but descriptive words with visual cues, we help individuals to shine just as they are.