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Project ECHO

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Welcome to

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

July 15-December 15, 2026

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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

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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

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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.

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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

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Emerald GEMS® State

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

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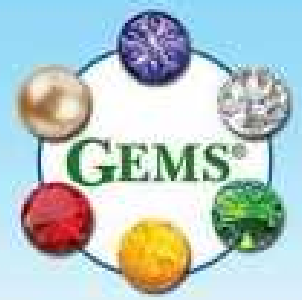

The GEMS State Model

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.

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Why Use The GEMS® States?

- Until we begin to the 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 to 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

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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

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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

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Emerald

Green

On the go
with purpose

Flawed

Seeks independence
or connections

Repeats

Misses details

Travels in
time and place

Binocular vision

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My Skills	Emerald
Responding to Their Vision	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

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Emerald GEMS® State

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

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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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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

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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.

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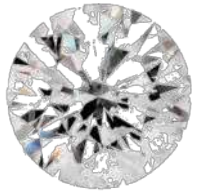
Welcome to the Positive Approach to Care® Dementia ECHO

Session 2: Diamond GEMS State
Fostering Connection in Early State Brain Change

Wednesday August 19, 2026 2:00-3:00 p.m. (EST)



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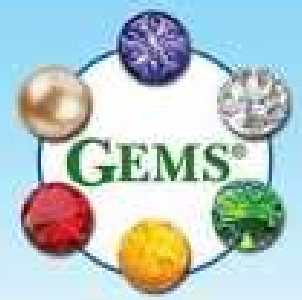

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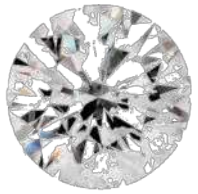

Diamond GEMS® State

Teepa Snow, MS, OTR/L, FAOTA

Founder and CEO, Positive Approach to Care®

Co-Founder, Snow Approach Foundation, Inc.

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The GEMS® States of Brain Change

Sapphire State: Flexible and supportive of self and others

Diamond State: Clear, sharp, faceted, highly structured

Emerald State: On the go with repeating patterns

Amber State: Sensory-focused, caught in a moment of time

Ruby State: Red light on skills, hidden depths

Pearl State: Hidden within a shell, quiet beauty

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Diamond State

- Clear, sharp, faceted, highly structured
- Uses habits and routines well
- Challenged by change
- Engages in preferred activities
- Cares for self with possibly some challenges with new hygiene tasks
- May misspeak at times
- May have trouble holding on to new information
- Seeks out authority figures or leaders for help
- Can appear to be stubborn
- Abilities may diminish as day progresses if needs are not being met
- May blame others for challenges
- Tends to stick with familiar friends, activities, and locations

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What does it mean when we are in a Diamond state?

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As a Diamond, my overall thinking is clear and sharp. When happy and supported, I am capable and shine in my abilities. When I'm distressed, I can be cutting and rigid and may see your help as a threat, or I may be lonely, anxious, fearful, or overwhelmed. I may have trouble seeing other points of view. When I feel respected and included, I can be joyful, supportive, and empowered.

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Common Diamond State Challenges

Daily Activities:

- Money management
- Transportation/driving
- Cooking
- Home maintenance and safety
- Caring for someone else
- Pet maintenance
- Medication administration

Unfamiliar Settings or Situations

- Hospital stay
- Housing change
- Change in family
- Change in support system
- Medical visits
- New diagnoses
- Traveling or vacations

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Be Prepared for Repeats!

- Expect repeated stories, questions, requests
- For repeated stories, use *tell me about it*
- Write down or repeated stories because you may need them for supportive communication later in the condition
  - Make sure you are connected before responding
  - Repeat a few of the other person's words in a question
  - Answer the person's question, then:
    - Go to new words, use enthusiasm!
    - A new place
    - Add a new activity (possibly related)

Common Diamond State Interests

- What we feel competent at
- What we enjoy
- Who we like
- What makes us feel valued
- Where we feel comfortable but stimulated
- What is familiar but intriguing
- What is logical and consistent with historic values and beliefs
- Whoever is in charge

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Effective Support

- Apologize: “I’m sorry!” or “I didn’t mean to…”
- Friendly, not bossy: leader to leader
- Make it temporary with “Let’s just try…”
- Share responsibility, not take over
- Use as many old habits as possible
- Give up being right
- Go with the flow
- Give another job when taking one away

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Care Partner Habits to Break

- Saying “Don’t you remember?”
- Not recognizing or accepting differences
- Trying to force changes in roles or responsibilities
- Trying to take over completely
- Taking responsibility for saying “No”
- Accepting things at face value
- Arguing with them

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Five Ways to Express Appreciation

Intent: "Thank you for your help. I sure appreciate you spending time with me."

Emotion: "Thank you for your support when _____. I felt it."

Skills/Abilities: "You have a really good eye, thank you for editing the _____." Identify something specific that the person did.

Experience: "Wow! Your role play really helped me understand _____."

Change: "Thank you for changing or trying _____. It was a hard shift."

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Five Ways to Acknowledge Dissatisfaction:

Intent: *Sigh.* "It seems like what I did was not helpful."
Emotion: "It looks like you are really frustrated with me."
Skills/Abilities: "It feels like I disrespected you. Wow! That is not OK!"
Experience: "You didn't expect that, did you? It looks like that was not OK."
Change: *Sigh* "This is hard, huh?"

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