

Creating a Culture of All-Team Coaching for Dementia Care Excellence

Presented by:
Erin M. Bonitto, M.S., A.D.C.
 Founder & Lead Coach
 Gemini Consulting, Inc.
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 9:15a – 10:15a

100 South Dakota
 A CENTURY STRONG
 Dementia Care Excellence

A Century Strong - Rocking the Future of Care
Post-Acute Partners in Care Conference

Introductions

- **Erin Bonitto, M.S., A.D.C.**
 - Founder & Lead Coach of Gemini Consulting, Inc.
 - Dementia Educator & Dementia Communication Coach
- **Philosophy**

Topic 1
 Overview

Memory & Dementia Care as an Organizational Priority

- We make major **financial investments** in Memory & Dementia Care,
- We put significant **time & energy** into defining our philosophy,
- We create and **advertise** our signature programs,
- We launch **specialized** dementia training,
- We teach about dementia in our **orientation & annual training**,
- We preach about **'the approach'** in our neighborhoods,
- And yet, when we **reflect** on our culture and care, sometimes we may find ourselves thinking:
 - "We're so close, but we're not **quite** where we want to be..."
 - "There's got to be something **more** we can do..."
 - "Has our **investment** paid off?"
 - "Are we seeing the **outcomes** we aimed for?"

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Challenges...

- Usually, we can envision the dementia care culture and practices we want to create and sustain, but how do we do it now?
 - Ongoing operational effects since **COVID**,
 - **Workforce crisis** resulting in historic shortages and turnover rates,
 - Loss of **organizational knowledge** when managers and directors are lost...
- How do we **refresh** in the midst of all this?

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...and opportunities

- How do we **refocus** on sustaining a dementia care culture that not only supports and celebrates each person with dementia...
- But, also **equips, supports** and **celebrates** every member of our team and community?
 - The **Housekeeper** who **communicates best** in Spanish?
 - The **Resident Aide** whose communication style is joyfully expressive – and **big!**?
 - The **CNA** whose verbal communication style is **quiet**?
 - The **Administrator** who cares deeply, but sometimes non-verbally communicates her **stress** in front of residents?
 - The **Sales Consultant** who believes passionately in Memory Care, but is **nervous** to fully engage with persons with dementia during tours?
 - The **Family Member** for whom **nothing** is ever good enough?

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Creating a Culture of All-Team Coaching

Dementia care providers who seem to be thriving, all have something in common:
A Culture of All-Team Coaching.

- Coaching is happening nearly **every single day**. Nearly every shift.
- Coaching is not limited to caregivers, but **includes everyone** who interacts with persons with dementia, including all leaders.
- Coaching does not come from one single educator, but instead, from a **small army of educators**.
- The coaching may be organized and directed by a key leader (such as a Program Director), but much of the actual coaching is **peer-to-peer**.
- Peers are not coaching because they are **'told'** to coach, but because they are **inspired** to coach.

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- Coaching focuses on **hands-on demonstrations** and feedback for concrete, easily-definable skills,
- It happens in the real-world, in **real-time**,
- Coaching is **celebratory** in nature – catching folks doing things well,
- Coaching is often done in a 'mini-format' – 30-second, 2-min, 5-min, 10-minute, 20-min modules,
- Coaching is not just for skills, but also addresses our **dementia care philosophy** and our **organizational mission**.

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Our Goals Today:

- Receive **'snapshots'** that illustrate a Culture of All-Team Coaching,
- Consider (and celebrate!) the types of coaching you **already** have in-place,
- Consider what **new** types of coaching you could implement as soon as you get back from the conference.

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Traditionally, how has dementia education been delivered?

- On-line modules /videos – completed independently at orientation and then annually.
- Videos – viewed in classroom setting, with a facilitator/educator,
- Live classroom instruction from an in-house educator,
- Special trainings from outside trainers,
- Completion of special certification trainings.

**Each of these serve an important purpose,
but they do not necessarily translate into
significant, sustainable improvements to care and culture.**

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Our Experience:

All-Team Hands-on Coaching – for very specific dementia skills – is the most effective way to help team members improve their 'dementia approach'...



Maintenance personnel practicing how to enter and leave a room (or memory care area) without triggering anxiety or suspicion.
Eddy Memorial Geriatric Center – Troy, NY



Bath aides practicing how to use 'Endorphin Boosts' prior to bath in order to increase acceptance of – and pleasure – of the bathing experience.
St. James Place – Baton Rouge, LA



Memory Care team practicing how to approach someone urgently (and angrily) hoping to leave the area.
MN Veterans Home – Luverne, MN



...and these simple improvements in **skill** can begin to change the very **culture** of an organization.

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Often, the 'pebble in the pond' is a small, passionate interdisciplinary team of Champions.

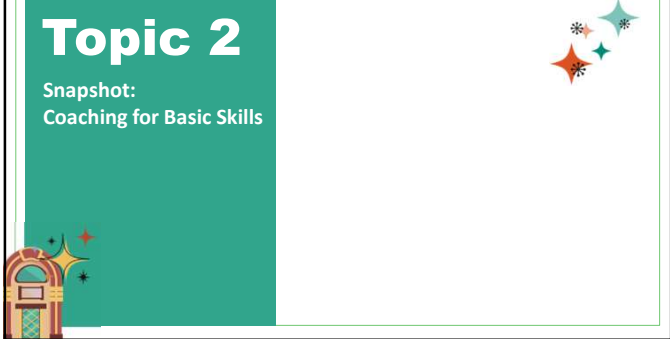


Who are equipped to share & coach skills to peers.

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Topic 2

Snapshot:
Coaching for Basic Skills



Example of Basic Skill that increases understanding (and decrease frustration): **Vocal Quality** | Skill Sample #1


Vocal Quality

- Avoid Up-Talking!
- Down-Talking:
 - Starts at a medium pitch/frequency,
 - Steps downward with each word.
- Focusing Voice:
 - Includes down-talking, plus...
 - Each word is well enunciated & crisp,
 - Just a little bit slower than our normal rate of speech,
 - Just a little bit louder than our normal volume (but not shouting!)
 - Most importantly: There is a 'bright energy' to the words!

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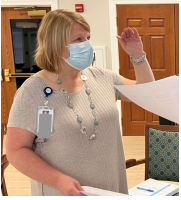
Practice Vocal Quality

- "Good Morning!"
- "It's time to get up!"
- "Let's stand up!"
- "Well look at you!"
- "I love that blouse!"
- "It's time for breakfast!"
- "Here are your pills!"
- "Here's your juice!"
- "I can help you find the bathroom..."
- "I'll help you get off your pants..."
- "The water's nice and warm!"
- "I'm just gonna take a look..."
- "Oh... your chair's right here!"
- "I'm just gonna help you roll over..."
- "I can take you back to your room!"
- "Let me just scoot you up..."



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Examples of All-Team Coaching for **Vocal Quality**



Carrie, Administrator

- **Administrator** coaches skill during standup,
- **CNA** teaches skill to new employee she is orienting,
- **Social worker** teaches skill to resident's wife,
- An Amharic speaker teaches it to another **Amharic speaker**,
- Team member who **struggles** with the skill becomes the coach for the skill,
- Champions promote the skill as "**Skill of the Week**" by catching and celebrating peers who are using the skill,
- Champions **'use the hand'** for quick reminders to one another and the team.
- Coaching is **FUN! GOOFY! CELEBRATORY!**

How could you begin coaching for Vocal Quality after this conference?

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Example of Basic Skill to increase understanding **Simple Statements for Meal-Time** | Skill Sample #2

Simple Statements

- Middle-of-the-road guideline: 7 words or less.
- Phrased as a statement, not a question.
- Pause, pause ... Allow time for person to process and respond to the statement.
- Responses may be verbal or non-verbal.

Meal-Time Simple Statements: Presenting the Meal (& Cuing for Initiation)

- "Here is your Sausage Jambalaya!" [pause] The sausage has a little kick!"
- "We have homemade macaroni and cheese today..." [pause] "It is extra creamy."
- "Here is your crispy battered fish." [pause] "Tell me how it tastes."
- "Here are your pancakes..." [pause] "extra butter."
- "Here is your baked chicken..." [pause] "It is stuffed with cheese."
- "Here is your lemonade..." [pause] "Not too sweet..."
- "Here is your coffee..." [pause] "Black like you like it."

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Meal-Time Simple Statements: Cuing for Initiation

- “Try these green beans...” [pause] “they have bacon!”
- “Here is your meatloaf...” [pause] “tell me how it tastes.”
- “Homemade vegetable soup...” [pause] “tell me how it tastes.”
- “Here is your beef steak...” [pause] “try a bite...”
- “Eggs over easy...” [pause] “poke them with this toast.”
- “Pasta with sauce...” [pause] “let’s get some on your fork!”

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Real-World Snapshot of All-Team Coaching: Simple Statements for Meal-Time & Pre-Meal Huddles



*Dee, Dining Services Lead
Tara, Program Director
Day 1*

*Victoria, CNA
Day 1*

*Virginia, Housekeeping
Lead Meal-Time Coach
Month 2*

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Real-World Snapshot of All-Team Coaching: Simple Statements for Meal-Time

Meal-Time Simple Statements: Cuing for Initiation

- “Miss Georgia [pause] taste these eggs...”
- “Miss Georgia [pause] tell me if this bacon is good...”
- “Miss Georgia [pause] tell me if these potatoes are crispy...”



Rose, RN

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Pre-Meal Huddle: Appetizing Simple Statements

1. Brain Storm

- **Common Seasonings?** Garlic, Onion, Thyme, Rosemary...
- **Simple Adjectives?** Crispy, fresh, tangy, homemade, warm, hot, cool...
- **With Extra...?** Gravy, sauce, syrup, brown sugar, butter, cheese...
- **The ‘Good Stuff’?** Was butter involved? Was bacon involved?
- **Who?** Was the favorite cook/chef involved? Who put the frosting on top?

2. Define and practice a few Simple Statements with good Vocal Quality

- “It’s fish today... [pause] “with a little lemon and pepper!”
- “We have rice today... [pause] “with some fresh herbs!”
- “It’s not just pudding... [pause] “It’s pudding with whipped cream!”

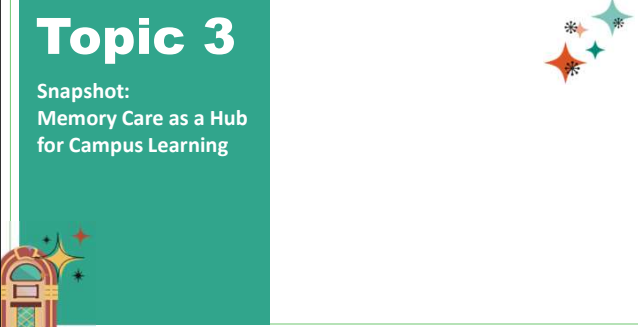


How could you begin coaching for Meal-Time Simple Statements after this conference? ?

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Topic 3

Snapshot:
 Memory Care as a Hub
 for Campus Learning



Example of a Basic Skill to Prevent the Intensity and Frequency of Challenging Behavioral Symptoms: Endorphin Boosts

Endorphin Boosts

- Intentional use of specific, individualized skills to **improve mood**, thereby preventing the intensity and frequency of challenging behavioral symptoms,
- Intended for **prevention**,
- Typically provided **many times a day**,
- Determined by **detective work**,
- **May be:** Gentle/Affectionate, Playful/Irreverent, Music/Movement

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Real-World Snapshot of Campus-Wide Coaching: Endorphin Boosts

Sharonda, RN Case Manager for Memory Care *Dawn, Director of Housekeeping* Weekly practices on Memory Care, then sharing with her campus-wide team.

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Topic 4

Snapshot:
 All-Team Coaching for
 Environmental Triggers

Key Concepts for Understanding Environmental Triggers

- 1) Often, behavioral symptoms are the result of **environmental triggers**.
- 2) Often, **we** are the triggers.
- 3) Managing **triggers** in the environment is a **critical** part of managing many of the most challenging **behavioral symptoms** of dementia.

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How many of these triggers might someone with dementia be exposed to in our setting?

How many times a day?

What is the very concrete message we are sending with these triggers?

What behavioral symptoms may we see as a result of these triggers?

Keys
Keys
Keys

Workplace Chatter

'Goodbye!'
'Goodbye!'
'Goodbye!'

Music

Purses
Coats
Bags

Marketing Tours

Sounds from T.V.

Task Walking
Loud Talking
Stressed Talking
& Facial Expressions

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Reducing Environmental Triggers: We are all part of the team

- Marketing & tours
- Central supply
- Dining
- Plant Services
- Housekeeping
- Laundry
- Contractors / Vendors
- Families / Volunteers
- Leadership
- Nurses & Caregivers
- Recreation, Social Services
- Therapies

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Topic 5

Snapshot:
Coaching & Inspiring for
Meaningful Engagement



Coaching & Inspiring

What works:

- Unending culture of role modeling & coaching,
- Options that are best practices in our field (purposeful, person-centered vs. diversion, entertainment)
- Abundant & delightful supplies,
- Tapping into team member's interests & joys,
- Bridging language, cultural and generational differences,
- Supporting a 'lead,' not 'carrying the load,'
- A culture of all team members being involved in programming.

Telling

What generally does not work:

- *'Be creative!'*
- *'Just find some things to do with them!'*
- *'Just talk with them, or do a ball toss, or a manicure or something.'*
- *'Get something from the closet / cart / cupboard'*

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Real-World Snapshot of Coaching & Inspiring for Meaningful Engagement: Inspiration Example #1



Inspiration

- Please make time to stop by during your shift today or tomorrow.
- Come look at this...
- Tell me what you think of this...
- Which would be your favorite?
- Can you think of any specific residents who might benefit from this?
- Could you explain this to _____?

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Inspiration: Intentional Observation Periods

- "They were *all* conversing with each other and they stayed!"
- "Their conversations were so genuine."
- "It was amazing! She had non-stop *"oohs and ahs"* and she usually sits alone in her room reading a newspaper."
- "Trust me, if she's sitting in here and staying here – she likes it!"
- "Seeing Mr. M so engaged, so contented. It was wonderful."
- "Maybe she always *wanted* someone to talk to, but we never gave her the right scenario. This just feels so natural."
- "I'm so engaged, myself!"
- "It was nice to see them all happy. They all looked fulfilled."

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Topic 6

Snapshot:
 Coaching for Language &
 Dementia Philosophy



'She's always getting into trouble' **Stealing** **Bad**
'She's our little thief'
Hoarding **Rummaging** **Naughty** *'She can be so naughty.'*
'She's our little hoarder!' **Hoarding Behavior**
'You've got to keep an eye on her!'

Medical Model Lens and Labels

"This is a problem to be stopped."

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"Margaret experiences a sense of security, safety and fulfillment by collecting things, packing things, storing things and holding things close."

Person-Centered, Strength-Based Lens

"This is a strength to be celebrated and supported."

If this is our **lens / philosophy**, then it would make sense that we would provide Margaret even **more** opportunities to gather and collect items – including items that will spark delight and provide her pleasure.

[Coaching, Skilled Facilitation, Systems for Supervision & Storage – all required to ensure safety and effectiveness]


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All-Team Coaching for Language & Dementia Philosophy

- Learning circle discussions,
- Department meetings,
- Annual trainings
- Person-Centered Concept of the Month
 - 'Rummager' vs. 'Person who finds comfort gathering things'
 - 'Elopement' vs. 'Person who went out unattended'
- Key in our discussions: If we say this is the person's home, does our **language** and do our **practices** actually align with being a home?

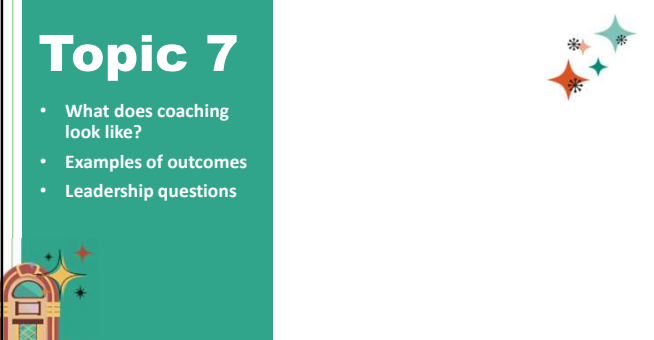
What words or labels used in your setting might not align with your dementia care philosophy?
 How could you begin discussions to replace those labels or words?




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Topic 7

- What does coaching look like?
- Examples of outcomes
- Leadership questions



Coaching Systems: Turning tough moments into skill moments



An evening nurse demonstrates to the D.O.N. the **verbal** and **non-verbal** approaches he uses for calming a resident with persistent, distressing **visual** and **auditory hallucinations**.

Together, they can create **mini-coaching modules** and write a **care plan** that captures the key skills.

Leadership Question:
 Are we 'talking to staff' about what they could have done differently... or are we **demonstrating** and doing a **real-time skill return** together?

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Coaching Systems: Turning tough moments into skill moments



Leadership Question:
 Are we allowing team members to believe that some tough moments are just inevitable and something they will need to 'put up with'?


Or, are we equipping them with **proven tools** to confidently (and compassionately) manage potential behavioral symptoms?

Many evening CNAs and Dietary Aides here are **16-19 years old**. The team discussed and practiced skills for **compassionately understanding** and **confidently managing** unwanted 'romantic' behavioral attention from persons with psychiatric and dementia diagnoses.

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Coaching: When something works – move fast!

Multi-lingual, evening CNA finds the small adaptation that makes the intervention work beautifully.



Our Leadership Role:
 Frontline team members are already **solving** problems. Our job is to catch those **solutions** and help them **grow**.

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Coaching: When something works – move fast!

Evening nurses practice individualized, **non-pharmacologic interventions** for a person prior to her normal 'sundowning' period.

The nurses are now in a good position to **coach** and **problem-solve** with the team before immediately responding with a mood-altering medication.

Leadership Question:
 Do we have 4-5 **specific interventions** to genuinely connect with each person – the tools that **prevent distress** and **support joy** before medication is needed?

And who **owns the system** that tests these ideas, documents what works, and coaches the team to use them, across all shifts?

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All-Team Coaching & Inspiration for Meaningful Engagement

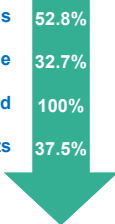
54-person Memory Care Setting (3 Neighborhoods) in upstate New York
 2 Year Outcomes



Team Members	Strongly Agree	Agree
I am more satisfied with my job	43.8%	43.8%
Caring for residents is easier now	17.6%	41.2%
My knowledge of dementia has improved	37.5%	56.3%

All-Team Coaching & Inspiration for Meaningful Engagement

54-person Memory Care Setting (3 Neighborhoods) in upstate New York
 2 Year Outcomes



Falls	52.8%
Anti-psychotic Medication Usage	32.7%
Residents Leaving Unattended	100%
Resident-to-Resident Incidents	37.5%

Savings
 Thousands in drugs costs
 Nursing paperwork reduced

Hands-On, Communication Coaching System for 'Behavior Prevention'

Outcomes

- 31 long-term care sites in the Midwest, including 14 with Memory Support
- 2 Year Outcomes

Antipsychotic Use

- Health Services overall: **-29%**
- Memory Support communities: **-26%**

Behaviors Affecting Others

- Health Services overall: **-39%**
- Memory Support communities: **-34%**

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Communication Coaching for 'Behavior' Prevention

Outcomes

- 31 long-term care sites in the Midwest, including 14 with Memory Support
- 2 Year Outcomes

In 2 years there has been a **50% reduction** in team member injuries related to 'combative' resident(s).

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Individual Reflections
 Dan, Maintenance Supervisor

Prior to Coaching

- He says he **dreaded** going into resident's room if they had dementia. Sometimes he would postpone his work.
- He would 'sneak' in and out of resident rooms without interacting much.

Since Coaching

- Not only is the 'dread' gone, but he truly **enjoys interacting** with the folks who have dementia.
- He always does a greeting first – and uses **his skills** to tell the resident in a simple way who he is and what he is there to do.
- He has become a **coach** to the other men in his department. In **Champion meetings** Dan often shares, *"I've been telling the guys..."* or *"Let me talk to ____ about that. I can show him a different way to approach that resident."*

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Individual Reflections
 Tori, CNA

Prior to Becoming a Champion

- She thought her **everyday way** of doing things was good. She always got her tasks done.
- Did not realize how much of the time she was **inadvertently ignoring** the person she was assisting.

Since Becoming a Champion

- She slows down, uses **simple statements**.
- She has become much more **effective**, which is **time-saving**.
- Using the skills makes her day **go better** and **feel better**. She says she can not stop smiling.
- She is unafraid to share her experiences with **co-workers**, to help them have the successes she has been having. She has pride in being a **role model** and **leader**.

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What we do matters.

We are leading from the hardest spot – between the people who need us and the rules, systems, and budgets we don't always control.

But we keep showing up with heart.
 We genuinely connect.
 We joyfully serve.
 We help our teams succeed in tough situations.
 We give families moments that matter.
 We help people feel like themselves again.

Leadership isn't about having all the influence.
 It's about using the influence we *do* have to help someone feel connected, understood – and loved.

Thank you for doing this work.
 Every shift. Every day. Every person.


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Comments – Questions – Connections



A Century Strong – Rocking the Future of Care

Erin Bonitto, M.S., A.D.C., is a nationally recognized gerontologist and dementia communication coach, and the founder of Gemini Consulting. For more than 25 years, Erin has worked alongside assisted living, memory care, and skilled nursing teams — helping them build sustainable coaching systems rooted in non-pharmacologic strategies to reduce frustration and prevent behavioral symptoms for people living with dementia, psychiatric diagnoses, developmental delays, and other cognitive differences. Her behavioral coaching model has been linked to significant reductions in challenging behavioral symptoms and off-label antipsychotic use, and helps teams build more genuine—and joyful—connections in every interaction. Erin’s roots in the Great Plains go back to her earliest days in long-term care, and much of her grant-funded work has supported large multi-site organizations as well as small, deeply rural stand-alone communities. Teams who work with Erin through her hands-on coaching and the projects she leads often describe her work as the “missing link” in culture transformation and person-centered success.



Let's stay connected

Erin Bonitto, Founder & Lead Coach
Gemini Consulting, Inc.
1218 5th St S
Cold Spring, MN 56320

www.Gemini-Consulting.org
612-749-1220
geminic@rconnect.com

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