

*“Providing specialist, evidence based, effective exercise training for health and exercise professionals working with older people, frailer older people and stroke survivors.”*



## **Planning for I Can ©**

This leaflet will help you support  
me to be physically active

My full name

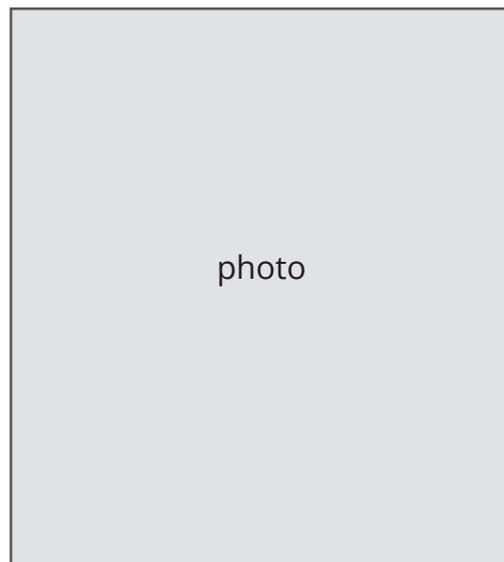
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## Having the Conversation

For a person living with dementia making a start to with an exercise or physical activity programme may be a significant challenge and even unsettling. **Planning for I Can** is designed to provide information about the person at the time the document is completed and assist the exercise professional build up a picture of the person as part of a person-centred assessment.

**Planning for I Can** should be completed by the person living with dementia and supported by the person who knows the person best eg, a care giver and should be updated as necessary.

On the back page you will find more detailed guidance notes to help you complete **Planning for I Can**, including examples of the kind of information to include.



### 1. All about Me (The Person)

Name I liked to be called

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The person who knows me best (carer/family)

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I would like you to know – what's important to me

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My life so far, (home, family, jobs,)

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My current and past interests, spare time activities

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The following routines are important to me (what I like to do)

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What else might help me?

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## 2. **Readiness to exercise (motivation)**

Activity in the past that I have enjoyed? (previous experiences)

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What I like about being active (the experience)

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What would help me?

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Why it is important for me to be active? (motives)

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Things that might worry or upset me (barriers)

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Making a start and being (more) active will help me ..... (towards goal setting)

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### 3. Things I want you to know about me (Cognitive changes)

How we can best communicate

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How are my hearing and eyesight?

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Awareness of surroundings/environment

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Communicate discomfort, pain

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How to help me if I am anxious or upset

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How to help me understand instructions or tasks

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Date completed

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Relationship with person (if applicable)

## Guidance notes to help you complete Planning for I Can

### Part 1. All about Me (The Person)

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**Name I like to be called:** Enter your full name on the front of this document and the name you like to be called on the inside.

**Where I live:** The area (not the address) where you live and how long you have lived there.

**Carer/the person who knows me best:** This may be a spouse, relative, friend or carer.

**I would like you to know:** Include anything you feel is important and will help staff to get to know and work with you, eg. I have dementia, I have, I am left-handed, I am allergic to ..., other languages I can speak.

**My life so far (family, home, background):** Include place of birth, education, marital status, children, grandchildren, friends and pets. Any religious or cultural considerations.

**Current and past interests, jobs and places I have lived:** Include career history, voluntary experience, clubs and memberships, general interests that you think may be of interest to the staff.

**The following routines are important to me:** What time do you usually get up/go to bed? Do you have a regular nap or enjoy a snack, walk or prefer to eat a particular time of the day?

**Things that may worry or upset me:** Include anything you may find troubling, eg family concerns, being apart from a loved one, or physical needs such as being in pain, thirsty or hungry. Are there environmental factors that may also make you feel anxious, eg open doors, loud voices or bright lights?

**What makes me feel better if I am anxious or upset:** Include things that may help if you become unhappy or distressed, eg. comforting words, music or TV.

### Part 2. Readiness to exercise (Motivation)

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What **previous experiences** and things I have **done in the past** that I have (not) enjoyed? These are important to assist in motivation.

**What I like** about being active: the best bits, my “experience of pleasant events”. Highlighting positive experiences as an aid to understanding motivation.

What **support would help me** while I am with you. To understand what additional support may be required.

Why **it is important** for me to exercise? Will assist in understanding motives and expectations.

The things that **may worry or upset me** about being active (and might act as barriers). Anticipating circumstances and events that might lead to anxiety and/or confusion.

Making a start and being (more) active **will help me .....** (towards goal setting). Working towards agreeing personal goals and motives.

### **Part 3. Things I want you to know about me (the impact of dementia and changes eg to cognition)**

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**My hearing and eyesight:** Can you hear well or do you use a hearing aid? Do you have vision problems?

How is it best to approach you? Is the use of touch appropriate?

**How we can communicate:** How do you like to communicate, eg verbally, using gestures, pointing or a mixture of both? Does writing things down or looking at pictures help?

How do you indicate pain, discomfort, or if things aren't going well, thirst or hunger? Include anything that may help you.