Launch Conference

The Role of Touch in Dementia Care

Wednesday 27th November 2013
Venue: The Bond, Birmingham

David Sheard introduces Dementia Care Matters new work

Facilitated by Luke Tanner, Dementia Care Therapist
Dementia Care Consultant Trainer in Dementia Care Matters.

'Being with' not just 'doing to' people is key - learn a way to shift from task orientation to ‘being’ with people

setting the standards for best practice in the use of touch

Learn about how / when to use: expressive touch, touch with repetitive expressions, touch in later stage dementia care, congruent touch, comforting touch, intuitive touch, placing touch in the context of consent.

Physical contact is an essential part of personal care practices and procedures. There has been a lot of misunderstanding in dementia care about what is or is not appropriate use of touch.

This workshop looks more closely at this key aspect of care in order to help staff explore the role touch plays in conveying feelings, developing relationships and promoting well-being.
# Being in touch™ Conference Booking Form

27th November 2013  
9.30am arrival – 10.00am start – 4.00pm finish  
Venue – The Bond, Birmingham  
Cost £125 per delegate  

To book a place please complete all sections in Block Capitals and email to admin@dementiacarematters.com or fax to +44 1273 242335

<table>
<thead>
<tr>
<th>Number of places</th>
<th>Cheques</th>
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<tbody>
<tr>
<td>☐ I would like to book _______ place(s).</td>
<td>☐ I enclose a cheque for £_____ made payable to:</td>
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<tr>
<td>Total amount £_________________</td>
<td>Dementia Care Matters Ltd.</td>
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Delegate details:

**Name 1:** ................................................................. .................................................................  
**Organisation** .........................................................................................................................  
**Tel:** .........................................................................................................................  
**Email:** .........................................................................................................................  

**Name 2:** .........................................................................................................................  
**Organisation** .........................................................................................................................  
**Tel:** .........................................................................................................................  
**Email:** .........................................................................................................................
Invoice address details (please complete below):

Name: ____________________________________________

Job Title: __________________________________________

Organisation __________________________________________

Invoicing Address: __________________________________________

________________________________________________________________

________________________________________________________________

Purchase order ref ______________________________

Telephone: ________________ Fax: ____________________

Authorised signature must be obtained to reserve a conference place.
I confirm the above booking and authorise payment:

Authorised Signature: __________________________________ Date: ________________

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<th>Confirmation Signature Required</th>
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<td>Cancellation and changes:</td>
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<tr>
<td>A refund of fees (less 25% administration fee) will only be made for cancellations made in writing and received by Dementia Care Matters 28 days before the event. No refunds will be made for cancellations received within 28 days of the event and failure to attend after confirming a booking will be subject to the same terms. In the event of any course cancellation by the organisers this will be rescheduled and Dementia Care Matters will have no liability for the participants travel or accommodation costs. Dementia Care Matters reserves the right to substitute trainers if the need arises. Dementia Care Matters reserves the right to change the cost in response to exchange rates.</td>
</tr>
<tr>
<td>I have read and agree to the above cancellation terms.</td>
</tr>
</tbody>
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Signature: ________________ Date: ________________
(signed by authorised personnel as above.)

Please return to:
Dementia Care Matters
St Georges House
34-36 St Georges Road
Brighton
BN2 1ED