

HOME

ACTIVITY DIRECTOR TODAY



Sandra Stimson

Pathways to the Past

By Sandra Stimson ADC, CALA, CDP
 Executive Director, Alternative Solutions in Long Term Care
<http://www.activitytherapy.com>
<http://www.nccdp.org/index.htm>



ABOUT SANDRA

Sandra Stimson has experience as a corporate consultant, Corporate Trainer and National Speaker. Her experience is in long term care, as Activity Director, Director of Alzheimer's Units and Assistant Administrator of a 550 bed long term care county home. She is Co-founder of Pet Express Pet Therapy Club, is a Life Replay Specialist. Sandra implements dementia units nationwide. Sandra has written several books, Volunteer Management Essentials for Long Term Care and Pet Express Pet Therapy Program. Sandra has been a facilitator for Alzheimer's support groups and is the Awards Chair for the NJ Association of Activity Professionals. Sandra is the Executive Director of **National Council of Certified Dementia Practitioners**
<http://www.nccdp.org>

Alternative Solutions in Long Term Care offers resources for health care professionals in many areas of dementia care, care plans, Snoezelen products, dementia activity calendars, adult day care calendars, sensory calendars, reminisce videos for dementia, activity books, and dates to remember, party supplies, resources and links.

An Introduction to Pathways to the Past

Each month we will be highlighting programs and resources to help in planning and implementing a dementia calendar.

20 years ago, there were very few dementia units within the United States long term care facilities. Today, there are few facilities without a designated dementia unit or locked dementia unit. Many assisted living community's caterers only to the elderly with dementia diagnosis. Where dementia used to be the minority diagnosis, it is now the single most recurring diagnosis in the long term care setting. We are now seeing 60- 80 percent of your population with a dementia diagnosis and Alzheimer's leading the way as the main type of dementia you are seeing.

Due to the increase in the elderly population and the dementia diagnosis, more and more adult day care centers provide services to clients with dementia. Additionally, we are seeing a whole range of new services that are opening all over the country to provide other options for seniors diagnosed with dementia and who do not want or can not afford CCRC, Assisted Living or Long Term Care, such as Shared Housing. For those who wish to age in place at home, communities are providing all kinds of services to allow for seniors to stay in their homes longer. This includes everything from in home grocery delivery, in home PT / OT services, nursing services, home health aides, in home recreation, etc.

Never before has the Activity Professional been challenged to provide therapeutic and innovative programs that are success oriented, failure free, purposeful and meaningful to all your dementia clients. Fortunately we are working in a time where there are more resources available. Additionally, the internet can reach other countries that have a wealth of activity resources that activity professionals will find extremely useful and beneficial to your monthly programming. It is now imperative that Activity Professionals become educated in dementia as there are over 60 kinds of dementia.

Activity Professionals additionally need to be aware of the resources, magazines, books and tools available to implement daily programs. Activity Professionals have to be willing and open to try new things, keep what is working and throw out those ideas that are not working. There are many new magazines that are activity and dementia specific such as Current Activities in Long Term Care, Nursing Home Magazine of Canada and of course Creative Forecasting. Activity professionals should be seeking out every web site that offers information and begin saving those to your computer "favorites".

One very important aspect of a dementia program is consistency. It is important to keep the calendar consistent while at the same time incorporate seasonal programs. The other important aspect of a dementia program is to include Exercise, Music and Reminisce programs on a daily basis.

We recommend the morning consists of Meet and Greet, Exercise (with props) and Music (with props) programs. The time spent with the CNA in ADL care is a very important part of the day and should not be rushed in order to get the clients to programs on time. If we understand that the time spent with the CNA is an important part of the day, although not considered activity per state and federal regulations, is an activity unto itself. It can be exhausting for the client just getting dressed. Be aware that the dementia residents may not even want to participate in the morning program. But should they come, low impact exercise and music programs are not as mentally taxing as the early afternoon programs.

The resident can join the morning program at any time. Props should always be used for Exercise and Music programs. Exercise props examples are streamers, scarves, parachute, top hats, etc. Props are great visuals and are therapeutic for the hands muscles. Music props examples are maracas, drums, tambourines and bells. It is recommended that everyone use the same prop vs. a variety as it tends to sound like noise rather than a music program. For those who have never conducted a Meet and Greet, this is a program where tactile items are placed on the tables that are unique to each person ability and interest. As the residents are brought into the day room they are placed at tables with things to do and introduced to their table mates and the activity professional.

For those who wish to wander, it is important to have areas set up to peek their interests, such as a nursery for nurturing, sewing machine with materials for hobby pursuits, rummage dresser for those who wish to sort through things. Some places have even implemented a bus stop for those seeking to go to work. Work areas that incorporate their past professions from factory work to teaching.



Each Norman Rockwell print is paired with a national standards of Resident Rights and is illustrated by a picture depicting the "Resident Right."

[click here to purchase resident rights prints](#)



The early afternoon should consist of horticulture, crafts, cooking, TimeSlips, Wake Up or Murals programs. You have more time for these programs in the afternoon and don't have to rush these types of programs because of lunch.

The dementia client is tired by the late afternoon. The late afternoon and early evening programs should consist of relaxing programs. Examples of these types of programs would be relaxation videos, reminisce videos, short story, pet therapy, intergenerational programs, life skills, individualized activities, feeling groups, out side programs and exercise. Unless the weather is either too cold or too hot, the clients should be brought outside daily.

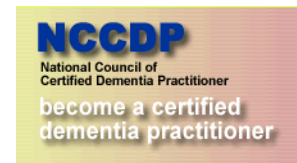
The following programs are not recommended for a dementia calendar such as Trivia and Bingo. If you have clients who are living on the dementia unit and you feel they would benefit from these programs, than provide supervision off the unit and allow them to attend these programs off the unit.

Unfortunately, all too often we have clients who are aging in place on the dementia unit rather than transferring the dementia client to a palliative unit. When the dementia client no longer benefit from the dementia program due to cognition the client should be transferred to the palliative floor and special sensory activities are provided. The community should look for areas to set up a sensory room or space as this would be a beneficial program for those clients who are too low functioning to participate in planned group programs.

All programs should be properly prepared and the dementia clients should never be left unattended in the day rooms, especially when activity supplies are left out, such as sharps. If your community does not have full cooperation of the nursing assistants, now is the time to meet with the Director of Nursing to enlist their support of the nursing assistants in the daily programs. If your long term care, it's required. If your another type of community other than a nursing home, it only makes common sense legally, safety, and from a risk management perspective that more supervision is provided during programs. No longer should only one activity person be providing a program to a group of clients with behavioral issues. See upcoming April article in Advance for Long Term Care Management Magazine where we address numerous tips to involve the CNA. Also see <http://cms.internetstreaming.com> and click on archives and review the web cast regarding Survey and Activities as this issue is also addressed.

The following are resources that we are highlighting this month:

- Wake Up Book-www.activitytherapy.com Wake Up programs idea, Armed Forces. You could highlight one armed force a week for one month.
- March Wake Up Ideas: St Patrick's Day and Things that are Green
- For free downloads for coloring ideas see <http://coloring-book-pages.com> Look for the pictures of flowers.
- TimeSlips see www.timeslips.org which is a fantastic reminisce and storytelling program.
- CMS- <http://CMS.Internetstreaming.com> and click on archives.



THE ACTIVITY DIRECTOR
for Activity Professionals
in Long Term Care Settings
admin@theactivitydirectorsoffice.com

Copyright 2004-Present
The Activity Director's Office
All Rights Reserved

[Disclaimer](#)