Meaningful Activities in Dementia Care

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- Meaningful Activities Model
- Person Centred Philosophy
- Setting Up the Environment
- Building Activities Around the Resident
- Sharing Staff Roles
- Breaking Down Activities
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Outline

Aim

In this module you will learn about supporting and assisting residents who have dementia to participate in meaningful activities that maximise their skills, health and dignity.

Learning outcomes

At the end of this module you will be able to:

- define the concept of activity
- state the purpose of activity
- work with families to discover meaningful activities for people with dementia
- identify appropriate activities that aim to meet a person’s needs and abilities
- recognise the difference between structured and unstructured activities
- set up the environment to encourage safe participation in activities
- break down activities into single steps or tasks.

Resources required

To complete the training for this section you will need:

- access to the Aged Care Channel satellite program Meaningful Activities in Dementia Care.
Activities of Life

Consider this…

Congratulations! You have just been awarded this job. The Director of Nursing wishes to talk about activities you would like to implement. Write down your suggestions for activities:

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Go back through your suggestions and:
- underline the activities related to leisure
- put a tick next to the activities related to work
- put a cross next to the activities related to self-care

Consider this…

Now, write a list of all the activities you have undertaken in the last week.

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Go back through your suggestions and:
- underline the activities related to leisure
- put a tick next to the activities related to work
- put a cross next to the activities related to self-care
Whole life experience  Activities are everything we do in our lives – from when we get up in the morning until we go to bed at night. Even sleeping is an important activity!

Activities of life include:
- occupation or role (this may be paid or unpaid)
- leisure – sport, hobbies, relaxation
- self-care – hygiene, personal care.

Balance is important  It is really important to get the balance between work, leisure and self-care right.

Different lives  Different people see different activities belonging to different parts of life. For example cooking is for some people a leisure activity while for other people it is work.

Consider this…  How would you feel if you:
- lost your job?
- had a disability that prevented you from participating in your favourite leisure pastime?
- were unable to take a shower?
- or…all three?

How does activity affect us?  We take for granted our ability to perform many and varied activities. But imagine having those activities taken away from you - your life would be very different and very difficult at times! Your sense of self-esteem would be affected too.
Self-esteem

What is self-esteem? Self-esteem is about how you see yourself as a person. It is your own opinion of how valuable and worthwhile you think you are. It is a measure of belief in yourself and your abilities.

Changes throughout life Your self-esteem may change throughout life. It often grows from being involved with other people and a sense of personal achievement. Many achievements feel more worthwhile when they are the result of persistence and patience.

Affected by activities Self-esteem is about what matters to you, and what you do to work towards that. If you are encouraged to do something you want to do, and you succeed at it, your self-esteem will grow. Doing activities that you love makes you feel good about yourself.

“If people are deprived of occupation their abilities begin to atrophy, and self-esteem drains away”

Source: Tom Kitwood (1997)

Consider this…

What do you do that makes you feel good about yourself?

How is your self-esteem?

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________
Building self-esteem in other people

It is important to keep building up a person’s self-esteem through activities that are balanced and have meaning.

Research has shown that while people with dementia may not remember a particular activity, they may retain the feelings created through doing that activity.

Take note...

Memory is not essential to enjoyment!

Why are activities so important?

Meaningful activities feed our self-esteem!

“…activity is the bridge between one’s inner reality and the external world. It is through our activities that we are connected with life and other human beings. Through activities…we learn about the world, test our knowledge, practise skills, express feelings, experience pleasure, take care of our survival, develop competence, and achieve mastery over our destinies.”

Hopkins, H & Smith, H (1978)

Consider this…

What do you think is the key to designing an activity program for someone with dementia that will help build up their self-esteem?

__________________________________________________________
Discovery and Assessment

Process of discovery  Before you can design an activity program for someone who has dementia you need to discover who the person is behind the dementia as well as their current needs and abilities.

Assessment  You need to find out:
- what their past and present skills and interests are
- what their religious and cultural background is
- what their abilities are
  - Physical – mobility, dexterity.
  - Sensory – sight, hearing, touch, smell, taste
  - Psychological – for example, their attention span.
- what their role has been in the family – for example, mother
- what their personality is like – for example, whether they are sensitive, loving, strict, controlling
- which stage the resident is in in the dementing process.

Detective work  Social and physical profiles are a great place to start to find out what a person likes and dislikes, or what they can and cannot do.

But you need to find out who the person was before this disease robbed them of their memory, deprived them of their intellect and altered their personality. To build a special relationship with any person you need to get to the heart of who they are. When dementia is involved this requires a bit more detective work!

See what you can discover about the person. Find out about:
- their passions
- their greatest concerns and worries
- the hardest thing in life they ever had to face
- their proudest moment
- the best concert they ever went to
- their favourite film star
- their greatest achievement
- and more!

Consider this…

How could you discover this kind of information?

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
The person

The first place to find out information is from the person themself!

Talk to them. Have a friendly chat whenever you are assisting the person in an activity, even though they may not be able to speak or communicate as well as before. You can also learn a lot about someone just from observation. What makes them smile? When do you see them relax? Is there anything significant about their personal belongings?

Partnering with families and friends

Families and friends are an invaluable source of information about the resident’s life and routines. The information they can provide is really important in helping staff develop appropriate activities for the person who has dementia.

Remember every family is different. Some families may not know much about the relative or friend as others.

Other carers

Talk to other people who care for the person. Have they discovered a ‘fascinating fact’ that they can share with you and others?

Consider this…

In the next day or so see what you can discover about someone you care for: it could be a resident, or it could be someone in your own family.

You can use the ‘Discovery Tool’ in the Workplace Activities Guide.
Sharing information Once you have started to discover the person, their passions, their life history and the things they love to do, share the information. You can do this by:

- writing their life story
- putting together a This is Your Life book
- creating a photo gallery for the wall
- putting together a memory box
- making posters to trigger conversation.

Life story Capturing a person’s life story is a valuable tool when designing activities for the individual.

This is Your Life book Families can get involved with the resident and care workers by putting together a memory book of photos, cards and clippings about the person’s life. This can be used by family, visitors and care workers to start conversations and reminisce.

Photo gallery for the wall Better still, create a, This is Your Life photo gallery or collage to go on the resident’s wall. It is a visual cue that will help people to start conversations.

Memory box The memory box is similar to the This is Your Life book. It could include several articles that reflect on the person’s life such as uniforms, medals or ornaments. These could be used in a sharing activity.

Consider this… What would you put in your memory box?

Conversation posters Once you have identified the topics a resident loves to chat about put them on a small poster and display it on their wall to trigger conversation.

Esme Baker
- a dressmaker who made Bridal Gowns
- belongs to the Country Women’s Association
- 32 grandchildren
- travelled to USA, New Zealand and around Australia
Daily assessment

Discovery and assessment isn’t something you do only when a resident moves into a facility. You need to assess what a resident with dementia can do each day. You need to “Stop, Look, and Listen” each day.

Assessing resources

Discovery and assessment is not just about the resident with dementia. It’s about tapping into the resources around you to provide the best range of activities.

You need to discover and assess:
- all the staff – their interests, hobbies and talents
- families and friends
- board members
- local community groups
- the local environment – what opportunities exist in the buildings and grounds?
Meaningful Activities Model

Basis of model
This person centred model for providing meaningful activities follows four main points:

- a person centred philosophy
- building activities around the resident
- setting up the environment
- sharing staff roles.

Person centred philosophy
The person centred philosophy puts the person at the centre of everything you do.

Setting up the environment
The environment can be enriched to enable and encourage participation.

Building activities around the resident
Once you have discovered what is important to the individual then you need to provide activities that build the person’s self-esteem and self worth.

Sharing staff roles
Sharing roles where personal care workers become actively involved in activities opens up a wealth of resources and enriches the relationship.

Let’s look at each of these four main points in greater detail.
Person Centred Philosophy

Guides every decision

A nice statement in a frame over the door does not prove the philosophy of an institution. A philosophy is a principle that should guide all decision making processes from designing a building right down to caring for a resident minute by minute.

See the individual and treat them as you would a respected friend. Consider the whole person and their total lifestyle.

Person centred activities

When providing activities for a resident you need to remember:

• any activity has the potential to be therapeutic, meaningful and purposeful
• an activity can be active or passive
• an activity can be done alone, in small groups, or in large groups

Meaningful activities

Any activity has the potential to be meaningful for the resident – if we know the resident and look hard enough at the activity!

Consider this…

Scenario 1
Joe wraps items up in paper napkins all day long, and for people who don’t know Joe this looks strange. However, Joe was an orchardist and he believes he is wrapping the apples from his orchard to go to market.

Scenario 2
Simone was rushing Mrs Jones through her shower. She said ‘I’ll just give you a quick shower today Mrs Jones, otherwise you’ll be late for your aromatherapy session at 10am.’

Take note: Showering is a sensory, meaningful activity to the resident!

Active and Passive activity

An activity can be active, where you need to ‘do’ something or it can be passive, where you can sit, watch and listen. Sitting watching out a window can be as meaningful as stirring cake mixture.

Consider this…

What active activities do you enjoy?

__________________________________________________________________________

What passive activities do you enjoy?

__________________________________________________________________________

How much of your time would be spent on each as a percentage?

Active:__________ Passive:__________
**Individual or Group activities**

Person centred activities can be done:
- alone or on an individual basis (one-on-one)
- in small groups (two to six people)
- in large groups (six or more people).

Each of these social situations is normal and useful in society. The key to normalization is variety.

**Consider this…**

What activities do you enjoy doing alone?

What activities do you enjoy doing in a small group?

What activities do you enjoy doing in a large group?

Which do you enjoy more, activities that are done with other people or by yourself?
Setting Up the Environment

Activity stations

Think back to when you went to pre-school or took your children to pre-school in the morning. The staff had set up ‘activity stations’ for the children to wander through. The children could pick and choose an activity as they went, depending on their mood. For example, there was the:

- dress-up corner with colourful dresses, scarves and hats draped over the furniture to attract their attention
- reading nook with a range of picture books scattered around.

Think about going home today after work. There are many things you will see that will prompt you to do activities:

- the washing up waiting by the sink
- the telephone with a note beside it to phone your friend
- the family photos of your last holiday to remember a great time
- the overflowing ironing basket!

Prompts

Our environments provide prompts to do activities and objects that express our individuality and personality.

Consider this…

What does your facility have in its environment that entices the residents to become involved in an activity?

Enriched environment

The environment for people who have dementia should provide adult activity stations that the residents can choose to do during the day depending on their mood.

Adult activity stations

Here is a list of adult activity stations that you might like to set up to enrich the environment in your facility:

- quiet area
  - calm music
  - aromatherapy with lavender oil
  - chairs facing to look out the window over a view
- sensory area
  - touch/feel table – balls of wool, pine cones, feathers
  - raised garden bed
  - piano or live music – be sensitive to different musical tastes
- reading area
  - books or magazines open at interesting pictures e.g.: colour illustrated recipe books or golfing magazines
  - inviting, comfy chairs with cushions
  - adequate lighting for reading
Encourage participation

Providing a range of activities enriches the environment and encourages participation. You are also setting the resident up to succeed, because they can move freely between activities.

Success

The more you know your residents, the more you will be able to provide an appropriate environment and meaningful activities for them. You need to understand what is important to them.

Consider this…

Scenario 1

A Dementia Day Care Centre in Holland was opened in a rural area where a lot of the day visitors were farmers. For activities they set up:

- a chicken coop where people could cuddle chicks and collect eggs
- a raised vegetable patch and garden bed
- a cow for milking.

They would also ask the farmers their advice on animals and crops.

Scenario 2

A Dementia Unit in a remote mining town had a lot of residents who used to be miners. At the end of a hard day’s work they would go to the pub. The facility set up a bar which would serve ‘drinks’ in the afternoon around ‘quitting time’.

“Half done” approach to activities

Meredith Gresham, an Occupational Therapist, encourages the “half done” approach to activities. Set up activities so they are “half done”. This can provide incentive for residents to do activities. For example:

- leave a basket of towels ready to be hung out on the line
- leave a basket of towels ready to be folded
- leave a rake and broom out in the garden ready for sweeping leaves
- fill the sink with warm soapy water and leave the cups and saucers from afternoon tea next to it ready to be washed
- leave cutlery and crockery ready to set the table
- leave unfinished knitting such as scarves around the lounge area
- open magazines to colourful pages, not neatly piled up in the corner
- provide an old-fashioned phone (not connected!)
- scatter cushions – to pick up, hug, carry around
- rummage drawers – bits and pieces to sort through
- interactive wall art that residents can add to or take from
- a hallstand with hats, scarves, walking sticks and handbags by a door that leads to a secure and interesting dementia-friendly garden.

Take note…

It is the doing that is important!
Busy vs sterile environment
Traditionally we have wanted to clean, tidy and order the facility environment. This may ensure the environment is very clean and sterile but it will not be very interesting or inviting.

Make it more like home, with things to do and activities to pick up and put down as residents wish, in a safe environment.

Monitor the environment
You need to find the balance between providing enough activity and too much stimulation. People who have dementia can tire easily, and you need to be aware of when they are over-stimulated and over-tired.

Encourage independence
You need to set up the environment so that the resident can be independent for as long as possible. Independence provides quality of life by building self-esteem.

Structured or unstructured activities
The environment may be set up to provide either structured or unstructured activities.

Structured activities require some form of staff involvement or supervision.

Unstructured activities do not require constant staff supervision, but require the environment to be set up so that the resident can participate independently in an activity.

Consider this…
Decide if the following activities are structured or unstructured:

Watching a film: ____________________________________________

Bus trip: ________________________________________________

Listening to music: ________________________________________

Church service: ___________________________________________

Foot bath: ________________________________________________

Meal time: _______________________________________________
Maximising abilities Setting up the environment creatively will maximise the resident’s ability to be involved in daily activity.

<table>
<thead>
<tr>
<th></th>
<th>Individual</th>
<th>Small Group</th>
<th>Large Group</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>These activities are what we would usually describe as one-on-one. The activity is ordered and monitored.</td>
<td>The size of the group depends on individual tolerances and the nature of the activity. It is generally two to six people. It is usually a prepared group, with a goal and led by staff.</td>
<td>These groups require staff planning and leading. Residents need to follow some social rules like the ability to remain seated. The size of the group again depends on individuals, generally six or more people.</td>
</tr>
<tr>
<td>Examples:</td>
<td>Hand massage</td>
<td>Two people washing up</td>
<td>Balloon tennis</td>
</tr>
<tr>
<td></td>
<td>Singing quietly to someone</td>
<td>Six people having afternoon tea</td>
<td>Bus trips</td>
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<tr>
<td></td>
<td>Helping put make-up on</td>
<td>Gardening</td>
<td>Group crossword or quiz</td>
</tr>
<tr>
<td></td>
<td>Dressing or showering</td>
<td>Picking flowers</td>
<td>Church service</td>
</tr>
<tr>
<td></td>
<td>Specific therapies like validation or doll therapy</td>
<td>Specific therapies like validation or doll therapy</td>
<td>Concert</td>
</tr>
</tbody>
</table>

- Structured

|                      | Requires the environment to be set up in such a way that the person can participate independently in the activity. | Set up the environment where two or more residents can participate together. | Set up a larger space for participation by those who are already there and those who may wander in. |
|                      | Placing chairs facing out a window for observation | Creating a small lounge space with gentle classical music and invitingly placed chairs | Examples:                                                  |
|                      | Leaving dusters and brooms in ‘appropriate’ places for half-done activities | Watching a children’s playground |  
|                      | Sorting buttons                     | Watching fire in a fire place                  | Aromatherapy                                             |
|                      | Taking a non-ambulant resident into the kitchen during food preparation | Soft music                                   | Films                                                     |
|                      |                                                                             | Visiting pianist                             | Watching fire in a fire place                             |

- Unstructured

Source: Meredith Gresham B App Sci OT (Syd)
Safety and independence

Activities must be safe. We all like to feel safe and secure and this is especially true for someone with dementia.

You, as a care worker, have to constantly look at the balance between the resident’s safety and comfort against their independence and dignity.

Consider this…

Balancing safety and independence is about minimising the risk and coming up with clever solutions.

Scenario

Mr Young had been a carpenter. He loved woodwork activities, but power tools and sharp implements had become a safety risk to him.

What woodwork activities could Mr Young do which he could enjoy, but also keep him safe?

Safety checklist

Here is a simple safety checklist you need to consider.

Is the person able to:

- control water temperature
- find their own way
- negotiate traffic
- safely store food and drink
- use appliances (television, jug)
- recognise danger
- maintain personal security
- stay within a secure environment

Consider this…

If a resident ‘fails’ the safety checklist what do you need to do?
Building Activities Around the Resident

Goals

When you are providing activities for a resident you need to ask yourself:

What are you trying to do for them?
- maintain existing skills?
- stimulate the senses?
- calm the atmosphere?
- provide familiarity of routine?
- improve mobility?

Take note…

Discover who your residents are and build activities around them!

Dementing process

When a Diversional Therapist or specialist designs an individual activity program they need to take into account which stage a person is at in the dementing process.

Early Stage
In the early stage of dementia a person may need memory training activities and counselling as they come to terms with the disease.

Later Stage
As the dementia progresses a person may need more sensory and stimulating activities.

Range of activities

When a Diversional Therapist or specialist designs an individual activity program, they will draw on a range of activities and tasks to meet certain goals for the person. The range of activities may include the following categories:
- sensory
- daily living
- socialization
- cognitive
- leisure
- physical
- self-esteem
- creative
- spiritual
- stimulus reduction – usually prescribed by a specialist
- specific referral – these are usually supervised by a Diversional Therapist.
## Sample Activity Program Content

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<th>Daily Living</th>
<th>Socialization</th>
<th>Cognitive</th>
<th>Leisure</th>
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<td>Bird watching</td>
<td>Discussion</td>
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<td>Church services</td>
<td>Theme boxes</td>
<td>Concerts</td>
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<tr>
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<td>Bird watching</td>
<td>Discussion</td>
<td>Poetry</td>
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<td>Hand and nail care</td>
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<td>Hairdresser</td>
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<td>Reading</td>
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<td>Relaxation films</td>
<td>Music therapy</td>
<td>Meat times</td>
<td>Walking</td>
<td>Reminiscence</td>
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<tr>
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<td>Reminiscence</td>
<td>Outings</td>
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<td>Quoits</td>
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<td>Textiles</td>
<td>Validation</td>
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<td>Textured sculptures</td>
<td>Relaxation therapy</td>
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<table>
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<tr>
<th>Physical</th>
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<td>Catholic Mass</td>
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<td>Exercises</td>
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<td>Craft</td>
<td>Non-denominational service</td>
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<td>Modify light and noise</td>
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<td>Gardening</td>
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<td>Separate spaces for dining</td>
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<td>Art Pottery</td>
<td>Vistas</td>
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<td>Hair care</td>
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<td>Relaxation therapy</td>
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<td>Watering plants</td>
<td>Hand and nail care</td>
<td>Poetry</td>
<td>Natural settings</td>
<td>Massage</td>
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<td>Dancing</td>
<td>Massage therapy</td>
<td>Personal reminiscence</td>
<td>Sunrise/Sunset</td>
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<tr>
<td>Chair dancing</td>
<td>Personal reminiscence</td>
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<td>The sky</td>
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<td></td>
<td></td>
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<td>Classical music</td>
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</table>

Source: Meredith Gresham B App Sci OT (Syd)
Case study

How does all this theory about activities apply to someone with dementia? Let’s look at Margie and see how we can meet some of her needs.

Consider this…

Case Study - Margie

Margie is a 73 year old woman with severe Alzheimer’s Disease. She talks nonsense, but is expressive and if you listen carefully you can make out a meaningful word here and there. She is a much adored sister and mother. She has worked all her life to care for her family, and only lost her own mother shortly before developing Alzheimer’s Disease. She has a severely arthritic skeleton and often suffers severe pain, which causes her to pull her clothes off. She paces continuously, and this makes her pain worse. She perseverates, rubbing at objects until her hands bleed, but can be directed onto another activity. She takes visual delight in small children, animals, music and sensory stimulation.

Below is Margie’s Activity Program.

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<th>INDIVIDUAL</th>
<th>SMALL GROUP</th>
<th>LARGE GROUP</th>
</tr>
</thead>
<tbody>
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<td>Structured</td>
<td>Structured</td>
<td>Structured</td>
</tr>
<tr>
<td>• Hand and nail care</td>
<td>• Washing up</td>
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<tr>
<td>• Sitting, talking</td>
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</tr>
<tr>
<td>• Walking</td>
<td>• Reading</td>
<td>• Birthday celebrations</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Unstructured</th>
<th>Unstructured</th>
<th>Unstructured</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Sit facing out the window</td>
<td>• Music for pleasure</td>
<td>• Relaxation films</td>
</tr>
<tr>
<td>• Give satin material to rub</td>
<td>• Cooking observation</td>
<td>• Aromatherapy</td>
</tr>
<tr>
<td>• Bird watching</td>
<td>• Bird watching</td>
<td>• Watching children play</td>
</tr>
<tr>
<td></td>
<td>• Sitting nursing a doll</td>
<td>• Meal times</td>
</tr>
<tr>
<td></td>
<td>• Watching kittens play</td>
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</tr>
</tbody>
</table>
Sharing Staff Roles

**Enriches relationships**
Sharing roles where personal care workers become actively involved in activities opens up a wealth of resources and enriches relationships with residents.

**Whole staff involved**
Every member of staff can be involved in making activities meaningful. For example, the quick chat in the hallway may make the resident who has dementia feel loved.

Activities are not the responsibility solely of the Diversional Therapist.

**Diversional Therapist’s role**
The Diversional Therapist’s role is to ‘set up’ the environment with activities and to support care workers with diversional activities. The Diversional Therapist would also organise and lead large group activities. They provide a resource for care workers to draw on.

**Tapping into resources**
Remember, discovery and assessment involves discovering what the staff, families, friends, community and board members can share with the residents.

By sharing roles you can tap into all these resources.

**Consider this…**
Which activities do you enjoy doing most with residents?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

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Breaking Down Activities

Care worker's role
Your role as a care worker is to support and assist the person with dementia as they participate in a range of activities. A whole activity can be very complex and overwhelming for someone with memory loss. You need to discover what parts of an activity a resident can do by themselves and assist with the parts they find difficult to complete.

Simple steps
Remember from the Communication Module, it is important to present one idea at a time.

Expecting a resident to complete a whole activity may be overwhelming and set them up to fail. By breaking the activity down into smaller steps and letting the resident do as much as they can independently they are more likely to feel successful.

Take note…
Break an activity down into simple steps.

Consider this…
Scenario
Mrs Jones needs to have a shower. She needs your assistance because she is unsteady on her feet.

What are the steps involved in assisting Mrs Jones have a shower?

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
**Pleasant experience**  
Try to make every activity as pleasurable as possible.

For example, look at a shower as a sensory activity. This can be helped by with the right water temperature, scalp massage, sweet-smelling soaps and powders…and most of all care and **TIME!**

**Take note…**

*Every activity has the potential to be meaningful…*

*Don’t rush through them!*

**Be flexible**  
You need to be flexible, and as they say, ‘go with the flow’ of the resident daily. The person’s mood, the temperature and what’s going on around the person can affect what they feel like doing. You need to have enough activities up your sleeve to change what you are doing in an instant!

“Remember, listen to the music not the words!”
Summary

Activities of Life
➢ Activities cover our whole of life experience and include:
  • occupation or role (this may be paid or unpaid)
  • leisure – sport, hobbies, relaxation
  • self-care – hygiene, personal care.

Self-esteem
➢ Self-esteem is how valuable and worthwhile you think you are.
➢ Doing activities that you love doing makes you feel good about yourself and builds your self-esteem.

Discovery and Assessment
➢ Discovery is about getting to know the person, their passions and desires.
➢ Assessment identifies the person’s needs and abilities.
➢ Family and friends are a valuable resource in discovering the person's history, their likes and dislikes.
➢ Sharing information about the person is important.
➢ You need to discover and assess what a resident with dementia can do daily.
➢ You need to discover and assess staff, family, friends, Board Members, community groups to tap into resources and ‘hidden' talents.

Meaningful Activities Model
➢ The Meaningful Activities model of care puts the person at the centre and builds activities around the resident.

Person Centred Philosophy
➢ Person centred philosophy puts the person at the centre of everything you do.
➢ When providing person centred activities you need to remember:
  • any activity can be meaningful
  • an activity can be active or passive
  • an activity can be done alone, in small groups or in large groups.

Setting Up the Environment
➢ You need to set up the environment to encourage participation. You can do this by setting up:
  • enriched activity stations
  • creating ‘half-done’ activities.
➢ Activities can be:
  • structured – residents will need some direction or supervision
  • unstructured – residents can participate independently.
➢ Activities must be safe, but allow the dignity of independence.
Building Activities Around the Resident
- You need to build activities around the resident.
- Set a goal – what are you trying to achieve?
- You need to take into account which stage the person is at in the dementing process.
- You need to provide a range of activities that are meaningful to the individual resident.

Sharing Staff Roles
- Every member of staff can be involved in making activities meaningful for residents.

Breaking Down Activities
- Break an activity down into simple steps.
- Every activity has the potential to be meaningful – don’t rush through it!
- Be flexible – go with the resident’s flow!
Take Home Messages

Memory is not essential to enjoyment!

It’s the doing that’s important!

Discover who your residents are and build activities around them!
Review Activity

Activity 1

Decide whether these statements are True or False. Tick the box.

1. Discover who your residents are and build activities around them.
   □ True    □ False

2. Activities must be active.
   □ True    □ False

3. Activities are done in large groups.
   □ True    □ False

4. It's doing the activity that's important.
   □ True    □ False

5. Unstructured activities encourage independence.
   □ True    □ False

6. Activities feed our self-esteem
   □ True    □ False

7. Memory is not essential to enjoyment.
   □ True    □ False

8. You should break activities down into simple steps.
   □ True    □ False

9. Providing a range of activities enriches the environment and encourages participation.
   □ True    □ False

10. A shower can be a meaningful activity for a resident.
    □ True    □ False