



The Activity Professional is an Integral Part of the Interdisciplinary Care Team

This article was written for the T.R.A.I.N. training sessions held throughout Texas in 2014. The acronym stands for Texas: Reducing Antipsychotics In Nursing Homes.

Don't leave the station without the Activity Professional on board!

It is a crucial time for life enrichment specialists to demonstrate their unique skills and talents as alternate non-drug interventions are being used to address the Behavioral and Psychological Symptoms of Dementia (BPSD).

More than 50% of people with dementia experience behavioral and psychological symptoms of dementia.

Management of the behavioral and psychological symptoms of dementia [Elizabeth C Hersch](#) and [Sharon Falzgraf](#), 2007.

Activity Professionals are being called upon to guide and train others.

- Are you prepared for this challenge?
- What is the activity professional's role in this process?
- What special knowledge or skills does the activity professional possess that can be used to address mild forms of BPSD?

"How can we use the Activity Professionals expertise in the quest to reduce the use of antipsychotics in the dementia population?"

The following "talking points" were written as a guide for activity professionals in Texas who participated in a statewide panel to answer these questions. Five points have been identified.

1. ***The Activity Professional has been trained to conduct a lifestyle assessment.*** The activity professional uses a variety of strategies such as life story collages, assessment tool boxes and socialization activities to learn the unique lifestyle habits and routines of each person. The activity professional really gets to know the resident in this process and develops a close relationship. They can be very helpful to other care givers by sharing the life story information. It is NOT a checklist of preferred activities done in the past. It is a thorough picture of what the person values, their unique strengths, what is important in their daily life and what routines bring meaning and security. This is a process that is started immediately and is continually evolving. The activity professional can *"apply knowledge of lifelong patterns, preferences, and interests for daily activities to enhance quality of life and individualize routine care."*

The following examples reinforce this point.

- Carl likes to sing gospel music *But he needs to hear the first lines*
- Joe likes to be called Colonel *But only in a specific tone of voice*
- Maddie is calmed by walking *outside BUT she doesn't remember how to go out*
- Frank will get in the car for the Dr. if he has his golf clubs *BUT the staff need to "go along"*
- Kate relaxes when she is called teacher *BUT the staff needs to create the opportunities*
- Ted likes to watch the Boston Red Sox *BUT he needs help to turn it on and find the game*
- Pat's routine includes reading the newspaper daily *BUT she needs to have this task simplified*
- Eunice will sit contently while looking at the garden *BUT she needs cueing to look at it*
- Ellie has always read the Bible before bed *BUT she needs a simplified format and reminding*

2. **The Activity Professional is trained to create meaningful and purposeful activities and "interactions"** that reinforce the person's identity. The activity professional uses life story information throughout the day in many ways, such as:

- Make introductions and greetings/initiate socialization

- Aid in communication (filling in words/thoughts)
- Understand behavior and reactions to environmental triggers
- **Design meaningful and purposeful life activities**
- Reinforce life themes, patterns and accomplishments
- Understand rituals, routines and cultural patterns
- Reminisce and validate life experiences
- Encourage family support and involvement

“Utilizing individualized, non-pharmacological approaches to care (e.g., purposeful and meaningful activities). Meaningful activities are those that address the resident’s customary routines, interests, preferences, and choices to enhance the resident’s wellbeing” F-Tag 744

Examples of individualized approaches based on life story information include:

“Mr. Jones, we are having trouble dyeing Easter eggs for the children that are coming to the staff/family annual egg hunt. You have experience with chemical reactions, can you help me figure this out?” **(Mr. Jones was a chemist and explained how an acid in the vinegar reacts. His solution: add more vinegar.)**

“Betty, can you help file these papers? You are such a good organizer.”
(Betty was an administrative assistant)

“Joe, I need your advice on where to hang this painting.”
(Joe was an artist)

3 The activity professional has been trained to use specific techniques to trigger long term memories and retained abilities through sensory objects, music and other “cues.”

The activity professional creates memory “kits” for specific individuals, gathers individualized music playlists, creates reminiscing tools, makes interest scrapbooks, and themed discussion baskets to help those with dementia access pleasant long-term memories.

“A lack of attention to lifestyle preferences or a lack of opportunity to engage in meaningful and enjoyable activities can result in: boredom, depressed mood, behavioral disturbances.” Resident Assessment Instrument

“For residents with dementia, the lack of engaging activities can cause boredom, loneliness and frustration, resulting in distress and agitation. Activities must be individualized and customized based on the resident’s previous lifestyle (occupation, family, hobbies), preferences and comforts.” F-Tag 679

4. The activity professional uses group activities such as exercise, socials, art, creative writing, gardening, cooking, familiar games, service projects, music, classes, intergenerational activities, movies, aromatherapy, humor and spiritual activities to provide a structured, predictable format. Each activity emphasizes social relationships and individual identity.

“Establish a structured daily routine for the resident that is predictable.” “Person Appropriate Care is care that is individualized by being tailored to all relevant considerations for that individual, including physical, functional and psychosocial aspects. For example, activities should be relevant to the specific needs, interests, culture, background, etc. of the individual for whom they are developed.

5. The activity professional has specific expertise to simplify and adapt each activity for different ability levels. Social and task demands are analyzed. The activity professional has been trained to



“Support the resident through meaningful activities that match his/her individual abilities (e.g., simplifying or segmenting tasks for a resident who has trouble following complex directions), interests, and needs, based upon the comprehensive assessment, and that may be reminiscent of lifelong work or activity patterns (e.g., providing an early morning activity for a farmer used to waking up early); F-Tag 741

“If medical causes are ruled out, the facility should attempt to establish other root causes of behavior using individualized, holistic knowledge about the person and when possible information from the resident, family, previous caregivers, and direct care staff.....

Boredom: lack of meaningful activity or stimulation during customary routines and activities

Mismatch between the activities and routines selected and the resident’s cognitive and other abilities to participate in those activities/routines...

Establishing the competencies that are needed to perform the tasks outlined in these 5 “talking points” is vital to be part of the interdisciplinary team. This knowledge is part of the Body of Knowledge of (NCCAP), and is part of the Modular Education Program for Activity Professionals (MEPAP).

(Link here to my MEPAP page?)

ActivTimes Consulting specializes in training that assures mastery of these crucial skills.

For questions or more information contact info@activtimes.com