



Activities for Persons living with Cognitive Impairment

Presenter: Ellen Phipps, CTRS, MSG

VP, Programs and Services, Alzheimer's Association Central and Western Virginia

Developed by: Ellen Phipps, CTRS, MSG, Judy Hennessey, MEd, RN and
Jay White, MSG



VIRGINIA DEPARTMENT OF
SOCIAL SERVICES



VCU

Gerontology

College of Health Professions



Series Outline

Part I

- Building a Person-centered Foundation

Part II

- Building a Strength-based Program

Part III

- **Adaptation and Communication through the stages of AD**

Part IV

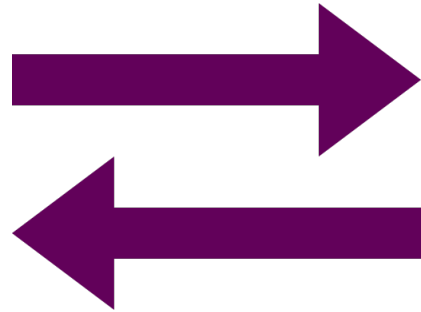
- Regulations and Additional Resources



PART III:

**Adaptation and Communication
through the stages of AD**

Participation in this workshop will enable you to gain understanding in the concepts of:



Adaptation and communication through the stages of dementia



Types of Activity Programming



Case Study – Dr. Dave

Dr. Dave, a resident of the assisted living facility is an 85 year old white male of the Jewish faith. He was born in Brooklyn, NY one of three sons. He has an excellent relationship with his four children and 9 grandchildren, though only one child lives nearby. His wife of nearly 60 years died a few years ago.

He has always enjoyed going for walks and discussing politics. As a child he played the trombone and in fact, his music teacher was well known. He enjoys the music of 1920's and 30's. He is a retired family physician and loves to reminisce about his work. His life was full of early morning meetings; taking care of patients; making house calls; and he is use to being in charge.

He has spent most of his leisure time throughout his lifetime painting or taking art classes. He has never enjoyed group activity and refuses to attend the activity groups at the facility.

His vision and hearing are good. He also has good manual dexterity and mobility.

Approach and Adapt through the Stages

EARLY STAGE

- Ask permission
- Ask open-ended questions
- Be tactful when making adaptations
- Use written notes and reminders
- Games without rules
- Discuss memory strategies together



Early Stages: Dr. Dave

- Painting – self initiates
- Going out to eat – his choice
- Visits to the art museum
- Visiting cemetery
- Using the computer – with assistance
- Communicating with family- email, phone
- Family gatherings
- Listening to music
- Watching some TV / news
- Life Story Interview

Visit to the Museum





Please pause and watch:

Meet me at the MOMA (*6 minutes*)

https://www.youtube.com/watch?v=DtZFR_Goa10

Daily Chores



Approach and Adapt through the Stages

MIDDLE STAGE

- Approach from the front
- Break down tasks into smaller steps
- Verbal prompts and physical cues
- Guided choices
- Validate feelings
- Use reminiscence
- Use diversion
- Music can work wonders!

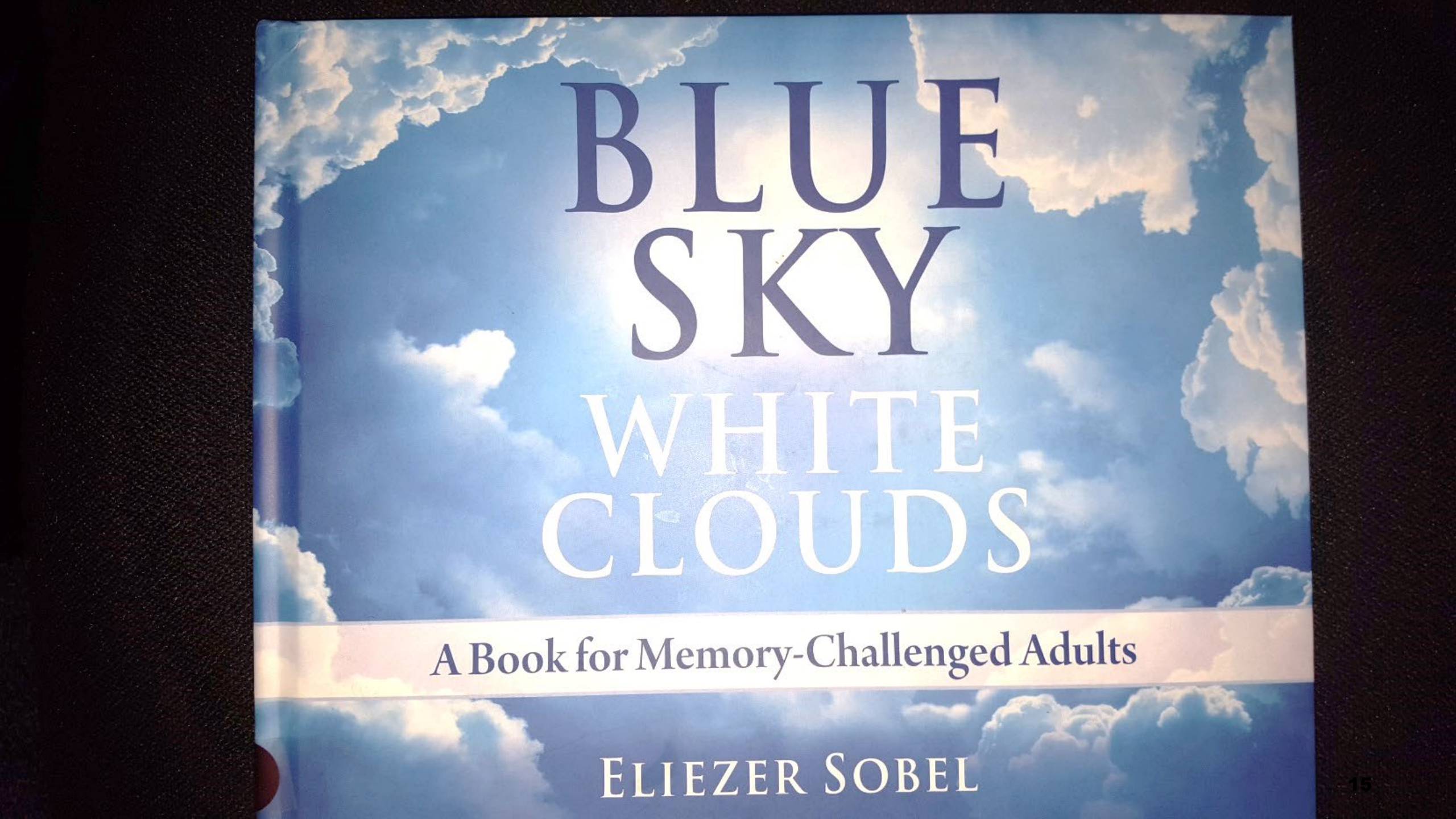
Middle Stage: Dr. Dave

- Painting – *would you like to paint or walk?*
- Going out to eat – *shall we go to Maggianos?*
- Visits to the art museum
- Visiting cemetery
- Using the computer – *to view music and art*
- Communicating with family – *phone* – with assistance
- Family gatherings – *attention span changing*
- Working with otoscope
- Reminiscing
- Music

A Personal Memory Book

Childhood Memories of Ebbets Field





BLUE
SKY
WHITE
CLOUDS

A Book for Memory-Challenged Adults

ELIEZER SOBEL

**MUSIC: Miff Mole
trombone**



Walking outdoors





A Familiar Object: Otoscope

Approach through the Stages

LATE STAGE

- Approach from the front
- Slow, deliberate movements
- Face to face – eye contact
- Music may work wonders!
- Language less important
- Stimulation through the senses



Late Stage

- Painting – *adapted*
- Going out to eat – *not as often*
- Visits to the art museum – *not as often*
- Cemetery – *not interested*
- Computer used to watch art and music clips
- Communicating with family - in person

Painting Adapted



Viewing Art on the Computer





Please pause and watch:

Monet Slideshow to music (*2 mins*)

<https://www.youtube.com/watch?v=MX3jtf1Ov9E>

EXERCISE





MUSIC

Patriotic Songs



Pause and watch:

Sing A Long with Suzie Q

<https://www.youtube.com/watch?v=BgbiarGWJk4>

Daily Chores





Sensory Aprons

Sensory Quilt



Busy Board



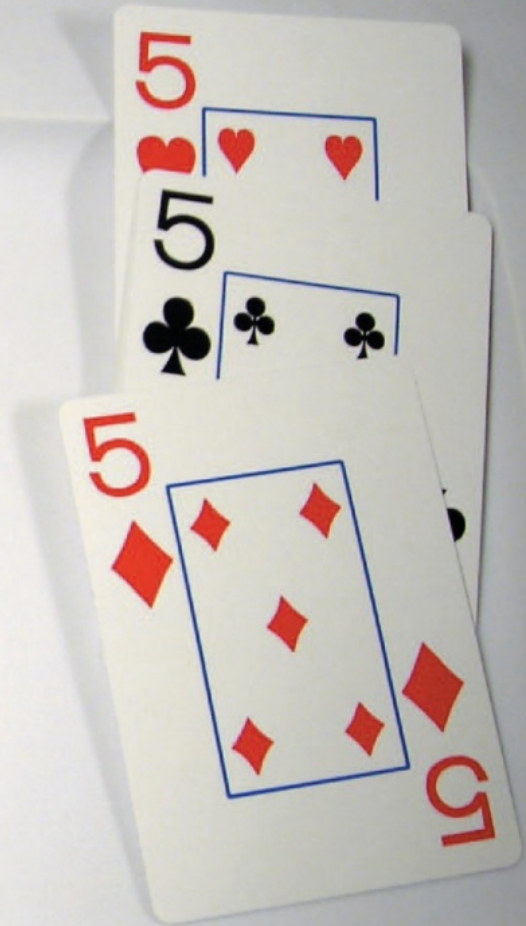
Reminisce





**Did He Enjoy
Fishing?**

Adapted Games





Adapted Games

Doll Therapy



Sorting





MUSIC and MOVEMENT

Please pause the webinar and watch

**Art Making and
Commentary**



Create a Positive Environment

- Simple vs. Childlike
- Remove Clutter
- Remove background noise
- Process vs. Product
- Don't hover
- Provide one-step directions
- Communicate visually as well as verbally



Create a Positive Environment

- Put your interpretations and judgment aside
- Provide assistance, not direction
- Praise vs. criticism
- Encourage collaboration



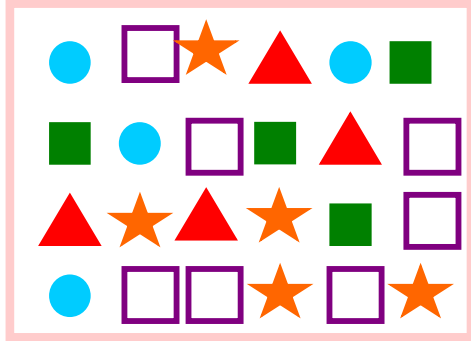
Another Consideration: Type of Activities

- Individual
- One-to-one
- Small group
- Large group

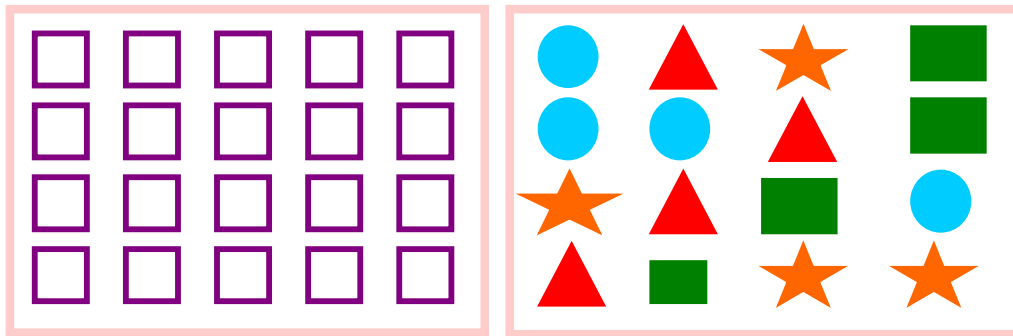
Group Composition



Mixed Ability Programming



All participants are included in all activities regardless of cognitive status.



Persons with cognitive impairment are separated from those who do not have cognitive impairment. For the cognitively impaired participants, activities are geared to the average person with dementia.

Sample Clusters

Purple Cluster

- Highly social, good verbal and interpersonal skills
- Task Focused but can maintain some simultaneous social interchange
- Able to change physical location/group without confusion
- Allow space and “permission” to make independent choices

Red Cluster

- Moderate social skills: personality conflicts may be more common
- Task focus is increasingly important: “What am I supposed to do now?”
- Self care requires increased assistance and direction
- Plan for generous physical space to allow for high energy level

Sample Clusters



Blue Cluster

- Interacts socially with familiar staff, verbal language is limited
- Attention span is fleeting, rarely lasting more than a few minutes
- Manual dexterity and hand eye coordination is limited
- Enrich environment with interesting things to touch, carry and use



Green Cluster

- Timid and reluctant to accept help for anyone not familiar to them
- Hypersensitive to noise
- Needs cueing and assistance with ADLs
- Filter extraneous distractions to gain attention and focus



Orange Cluster

- Others

What's in it for us?

Sample Activity Philosophy from Part 1

The Day Program utilizes a person-centered care approach to provide an environment that focuses on people's strengths rather than their memory limitations addressing the needs of the total person: physical, mental, and emotional. Recreational Therapy activities are designed to restore motor, social and cognitive functioning, build confidence, develop coping skills, and integrate skills learned in treatment settings into community settings.



Who's in the Activity Dept?

- Direct care providers
- Family members & volunteers
- Housekeeping
- Administration & management
- Activity staff
- Dietary & maintenance

Why all these?



Concepts to Consider

- Quality of Life
- Activity Philosophy
- Assessment / Plan / Evaluate cycle
- Models of Programs
- Degrees of structure
- Group size & composition



The Steps Are In Place

1. Education
2. Activity Philosophy
3. Focus groups and meetings with staff
4. Program design choices
5. Timeline
6. Staff in-services
7. Roll-out!
8. Planned re-evaluation



Homework:

Please watch Montessori based Dementia Care

<https://www.youtube.com/watch?v=FLDwzgRTbVA>

Series Outline

Part I

- Building a Person-centered Foundation

Part II

- Building a Strength-based Program

Part III

- Adaptation and Communication through the stages of AD

Part IV

- **Regulations and Additional Resources**