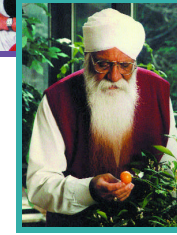
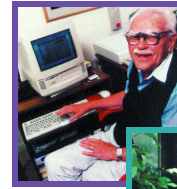


# FRESH

## Ideas for Therapeutic Programming



**S**o you are hoping to find some great new program ideas to incorporate into your activity program - to generate some excitement for your residents, some enthusiasm among your staff — and generate a personal “buzz” that comes with doing something new and different? Sounds good to you? Good for your staff too. And maybe even good for your residents.

But how would you know? Do you really know what is working in your program, which activities are achieving their goals and what impact each program is having on individual residents?

At times, activity managers and staff may feel they are perceived as the “fun and games” folks. Such perceptions are more than a reflection of how people see the program. Part of the problem is the lack of empirical evidence of program outcomes generated by activity departments to provide credibility for their activities.

It's not enough to create innovative programming. You need to evaluate and document the results in order to establish credibility for each and every activity. How do you do this? Simple. You look at the activities through a therapeutic lens. In other words, all programs should be seen as therapeutic vehicles through which resident needs are met.



**Activity staff must talk the therapeutic talk, and walk the therapeutic walk.**

Through this process:

- ✓ Residents succeed at what they do and feel great about their accomplishments.
- ✓ Resident performance is measured and documented to validate their success.
- ✓ Program efficacy and success is legitimized through resident accomplishments.

**by**  
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- ✓ Resident success is translated into success for the activity department.

You know what outcomes you want to meet. How do you get there? You follow six steps:

- evaluate the activity;
- measure the activity's success using specific yardsticks;
- score and record the residents' performances;
- determine how to increase resident success;
- initiate programming innovations to make the activity more successful; and
- demonstrate to others your successes.

### Step 1. Evaluate Your Programs

The first step is to evaluate the therapeutic status of the activity — from a therapeutic perspective. Your evaluation should involve a number of components:

- **Identify Primary Domain Categories.** Under which domain does the primary therapeutic purpose of the activity fall (social, emotional and/or spiritual, intellectual or physical)?
- **Classify Activities by Domain.** Identify the primary domain (purpose) for every activity, plus the secondary domain.
- **Classify Activities by Functional Ability.** Establish the resident functional level (physical and mental) for which each activity is suited.
- **Classify Activity Programs by Gender.** Determine which programs are for women, men and mixed groups.
- **Evaluate the Program by Domain, Functional Ability and Gender.** Review the number of offerings and time dedicated by domain, functional ability and gender.

While it is unlikely there will be absolute balance in terms of activity distribution by domain, this review will identify obvious gaps and program overload — enabling you to adjust your programming accordingly. Similarly, omissions or limitations in programs specific to functional ability and gender will be highlighted.

### Step 2. Measure the Success of Specific Activities

To legitimately assess resident performance in an

activity, behaviours representing success in the activity are determined, based upon the primary domain or purpose of the activity. In other words, what does “success” look and sound like in this activity? For example, if the primary domain for a chair exercise program is physical, then measures of success might include behaviours such as “able to fully extend arms; full range of motion of wrists, hands and fingers; able to raise both legs without assistance.”

Other examples of behaviours based upon various domains might include “interacts with other residents, initiates conversation, participates in group activities” (social domain); “responds to verbal prompts during word game, completes puzzle without assistance, furrows brow in apparent concentration prior to completing task” (intellectual); and “smiles or laughs in humorous situations, expresses satisfaction with own accomplishments, acknowledges gratitude to others for the experience” (emotional).

### Step 3. Score and Record Resident Performance

Individual resident performance is evaluated based upon the same behaviours developed for the specific activity measures of success. Recognizing that not all residents are functioning at the same level, these activity measures of success are subdivided according to different levels of success, then scores are attached to the various levels.

The most common breakdown is to establish three levels of performance. The highest level demonstrates complete mastery of the task; the lowest level limited or no ability to perform the task. The middle level is characterized by modified success, such as requiring some assistance beyond the highest functioning level to perform the activity. For example, in the chair exercise program noted above, the behaviours identified (“able to fully extend arms”) would be fully functioning at the highest level, while the lowest level might be characterized by “unable to extend arms, limited use of hands and fingers and unable to raise either leg.” The middle performance level might be described as “able to extend one arm on own, with assistance for the other arm, full range of motion on one side, and requires assistance on other, and able to raise one leg unassisted and the other with assistance.”

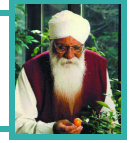
For each of these three levels of behaviours, scores from one to three are assigned for that activity. Using these common criteria, each individual resident’s performance in the chair activity can be scored, and subsequently calculated over time.

### Step 4. Increase Resident Success

The expectation is that every resident will succeed. If a resident is not succeeding, then the objective is to either mod-

ify the activity or find another program with a similar domain purpose in which the person **will** succeed. Using this approach, a resident who is functioning at a level of less than “2” on the three-point scale (after several opportunities) would benefit from more success. You will need to develop an alternate programming approach in order for this to occur.

**The objective is to find the right activities such that all residents realize personal successes.**



Using this model, a resident with limited physical and/or cognitive ability has the opportunity to score as well as the resident who is performing at the highest level. The objective is to find the right activities, appropriate to the level of each resident, such that all residents realize personal successes. Even the highest functioning residents in the home need an individualized approach to their personal stimulation and success. Adding to the expectations of the activity may represent such success (such as asking for their advice, ideas or help with the activity).

### Step 5. Initiate Programming Success Innovations

Success breeds success. People respond well to programs that are seen as different, interesting, stimulating and rewarding. Program innovation is one way to breed success.

In your search to develop more successful and innovative activity programs, try tackling these “targets”:

- ✓ **Attack Ageism.** Look at common perceptions of aging and attack them with activities that counter people’s perceptions (perhaps even those of the elderly themselves). Create a “seniors can’t do that!” response to a program. Find ways to make sky diving, rapping and blogging a part of the activity programming reality.
- ✓ **Become Ageist.** Do a demographic profile of residents to determine which era they represent, ascertaining what interests they had in their youth, teens and young adulthood, and then look for programming ideas that tap into these past interests. It is not unusual for a home to house two or three distinct generations, each with their own peculiar interests from the past. This is especially important when trying to hook old memories for those with cognitive impairments. One size does not fit all.
- ✓ **Help Them Remember.** Encourage the use of daily diaries for residents with the ability to record thoughts and experiences, or those who can recall them for others to record (for an example of an excellent and free downloadable diary resource, visit [www.mysilverdiary.com](http://www.mysilverdiary.com)).

✓ **Put Them to Work.** The research is clear: long term care residents value activities that represent work or a sense of contributing to the cause or well-being of others. Look for ways to turn activities into a work or social outreach project. Instead of calling it a baking club activity, residents may find greater value from a function with the purpose of baking for a disadvantaged local family or helping kitchen staff prepare snacks for afternoon nourishments. Ask for volunteers from among residents to help set up or take down activity props or decorations.

### Step 6. Demonstrate Your Own Success

Your “performance” is also a major determinant of the success of the programs. If you demonstrate that you are enthused, excited and stimulated to be leading the activity, you are projecting a success message. How does your assessment of your own “enthusiasm” compare to how others see you? How, after calling “bingo” 337 times over the past four years, do you demonstrate your interest in the activity? What do you do to ensure that your personal level of expressiveness is at its peak?

### It’s All Up To You

While most activity staff intuitively know they are doing a good job, success must be measured in order to validate such perceptions. The model outlined here is all about determining measures of success, confirming resident performance in activities and ensuring that they are realizing success through their efforts. By taking the time to evaluate resident performance, programs can be more readily adapted to meet resident needs, new programs can be developed and even greater success for the residents will be achieved. When residents are more successful, measures of the effectiveness of individual activities and the program as a whole are enhanced. When effective evaluations are combined with innovations in programming, the result is a dynamic, exciting and validated activity program — a model of success. **LTC**