

Activity Director Today

"The E-magazine for today's Activity and Recreation Professionals in Long Term Care"



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FEBRUARY FACTS

February begins on the same day of the week as March and November in a common year, and on the same day of the week as August in a leap year.

On a few occasions in history, February has had 30 days.

February in the Northern Hemi-

sphere is the seasonal equivalent to August in the Southern Hemisphere and vice versa.

February's birthstone is amethyst.

February's flower is the violet or primrose.

The Chinese floral emblem of February is the peach blossom

From Bob & Linda

Dear Reader,

As you can see, Activity Director E-magazine is growing. Last month we added "Dear Debbie;" and "Word Search". This month we have added "Monthly Recipe". The monthly recipe will be coordinated with the yearly celebration of that particular item. We will try to keep the recipe simple so you can use it in your cooking club.

Thank you for your personal ideas and inquiries about submitting your articles. We are always interested in what you have to share with us. You may submit your items by e-mail to: admin@theactivitydirectorsoffice.com. We will look at them and use them if we can. Thanks for subscribing to ADTE. Have a great February.

Sincerely,

Bob & Linda

Send Questions and Comments to:
admin@theactivitydirectorsoffice.com

About Activity Director Today E-magazine - The Fine Print

Please Note: The ideas and suggestions in this magazine must be adapted to each resident or group as circumstances dictate. As always, the consultation of medical staff, physicians or other applicable authority should be included in any activity program. Please use discretion when using and applying these materials so that you do not offend any of your residents or participants

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Activities You Can Do

By Linda Lucas, AD, Site Owner: Activity Director Today
<http://www.theactivitydirectorsoffice.com>

A Valentine's Month Activity

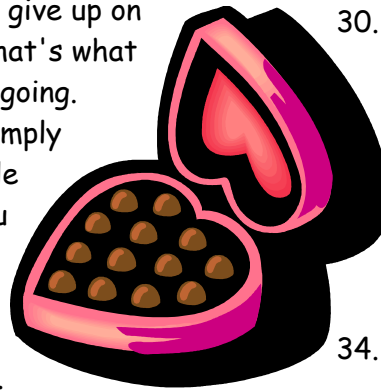
During Valentines month, in any group setting or one-on-one visit, you use this list as a reminisce activity..

- Ask your residents why they love (name). Give them a few samples from the following list to get them started
- You can also just read items for the list and let them respond. Ask questions such as: "Does this remind you of someone you know?" "Did you ever feel that way?" "Who was that?" "When was that?". You know the questions to ask. Just let it flow and give the residents time to interrupt and make comments.
- You can cut the list up and put them in an empty heart shaped candy box. Let each resident draw one out. Then, everyone can talk about it.
- Or, as a craft idea, you can cut them apart and use them on/in handmade Valentine's Day cards.
- And, it would be a good time to have a Valentine/Love centered tea or party.

*However you use the list, hey will **LOVE** the activity. Have fun with it. - Linda*

Reasons Why I Love You!

1. I can be myself when I am with you.
2. Your idea of romance is dim lights, soft music, and just the two of us.
3. Because you make me feel like, like, like I have never felt before.
4. I can tell you anything, and you won't be shocked.
5. Your undying faith is what keeps the flame out of love alive
6. You and me together, we can make magic.
7. We're a perfect match.
8. Thinking of you, fills me with a wonderful feeling.
9. Your love gives me the feeling that the best is still ahead.
10. You never give up on me, and that's what keeps me going.
11. You are simply irresistible
12. I love you because you bring the best out of me.
13. Your terrific sense of humor
14. Every time I look at you, my heart misses a beat
15. You're the one who holds the



- key to my heart
- 16. You always say what I need to hear (You are perfect).
- 17. You have taught me the true meaning of love.
- 18. Love is, what you mean to me - and you mean everything.
- 19. You are my theme for a dream.
- 20. I have had the time of my life and I owe it all to you.
- 21. When I look into your eyes, I can see your heart.
- 22. Your love for me is a natural anti-depressant.
- 23. I love to hear your voice.
- 24. Your love has helped me to rediscover myself.
- 25. Your love is an effective antidote to despair.
- 26. I love to wake up with you by my side...It makes my days better.
- 27. You always make me feel that you are by my side no matter what.
- 28. I love that feeling of being secure when you wrap your arms around me.
- 29. I love the way you keep your cool when I do something stupid.
- 30. Just being with you feels like I can defy the whole world.
- 31. You mean the world to me.
- 32. I like your small gestures that speak volumes about how much you care.
- 33. I love the way you treasure the gifts that I gave you.
- 34. I love the way you patch up with me after a tumultuous fight.
- 35. And, of-course, your intelligence, 'cause you were smart enough to fall in love with me.



Bob's Journal

By Rev. Robert Lucas, B.A., H.F.A. (retired)
Executive Director, Activity Director Today
<http://www.theactivitydirectorsoffice.com>

NATURAL HIGHS

We receive many e-mails from our Activity Director Today E-magazine readers just like you. Recently, a reader sent this list of Natural Highs. Since we are all in the midst of the winter doldrums I thought you might need a little boost for your spirit. Here are some excellent ideas to help. (P.S.: Thank you Mary & Wink)

1. Falling in love.
2. Laughing so hard your face hurts.
3. A hot shower.
4. No lines at the supermarket.
5. A special glance.
6. Getting mail.
7. Taking a drive on a pretty road.
8. Hearing your favorite song on the radio.
9. Lying in bed listening to the rain outside.
10. Hot towels fresh out of the dryer.
11. Chocolate milkshake (vanilla or strawberry).
12. A bubble bath.
13. Giggling.
14. A good conversation.
15. The beach
16. Finding a 20 dollar bill in

- your coat from last winter.
17. Laughing at yourself.
18. Looking into their eyes and knowing they Love you
19. Midnight phone calls that last for hours.
20. Running through sprinklers.
21. Laughing for absolutely no reason at all.
22. Having someone tell you that you're beautiful.
23. Laughing at an inside joke with FRIENDS
24. Accidentally overhearing someone say something nice about you.
25. Waking up and realizing you still have a few hours left to sleep.
26. Your first kiss (either the very first or with a new partner).
27. Making new friends or spending time with old ones.
28. Playing with a new puppy.
29. Having someone play with your hair.
30. Sweet dreams.
31. Hot chocolate.
32. Road trips with friends.
33. Swinging on swings.
34. Making eye contact with a cute stranger.
35. Making chocolate chip cookies.

36. Having your friends send you homemade cookies.
37. Holding hands with someone you care about.
38. Running into an old friend and realizing that some things (good or bad never change).
39. Watching the expression on someone's face as they open a much desired present from you.
40. Watching the sunrise.
41. Getting out of bed every morning and being grateful for another beautiful day.
42. Knowing that somebody misses you.
43. Getting a hug from someone you care about deeply.
44. Knowing you've done the right thing, no matter what other people think

About Bob

Robert Lucas is a retired Nursing Home Administrator and is married to Linda Lucas, a retired Activity Director. Bob has a B.A. degree in Ministry and is an ordained minister. He has served the elderly community more than 35 years. His many talents include portrait artist, musician, writer and website designer (learned after his retirement).

Having a special place in his heart for Activity Professionals, Bob began building **The Activity Director's Office** website. His goal was to create a hub on the Internet where Activity Professionals could find meaningful and current resources. That goal has been achieved and continues growing yet today.

For more information visit the website at:
http://www.theactivitydirectorsoffice.com/ADO_Beginnings.html



Current Activities in LTC

By Kate Lynch, Editor
Current Activities in Longterm Care
<http://www.activities4elders.com/>

Advice For The Office

Consider incentives carefully

Not all incentives are created equally, and some might not be good at all, says Rick Brenner and the folks at Chaco Canyon Consulting (www.ChacoCanyon.com) in the Point Lookout e-newsletter. As a matter of fact, incentives are usually less effective than we hope, and sometimes less effective than we believe, Brenner says. Are your incentives counterproductive? Here are some things to remember when considering an incentives program:

- Remember that motivational power is not always equal to market value. For instance, if you're hawking an all-expense paid trip to Hawaii, an employee with a chronically ill child is possibly not going to appreciate it because he or she might never be able to go on such a trip.
- Parallel awards programs can cancel each other out. Do you offer several program but disqualify an employee who has already won one award from winning another? This can discourage high-performing employees. You don't want to demoralize your employees or cheapen an award you have already given out. Watch that you don't ruin the chance of getting the results you set out to attain.
- Rewards can be given out too closely together. Space them out. For rewards to have a full and powerful effect, you have to make sure they don't occur in a fashion that waters them down.
- Give out rewards when they will be most meaningful. Align awards with the work being done. If a project was

really an award winning effort, design and give awards at strategic times. If a project takes more than a year to complete, for instance, don't give out the award too early just because you have an annual awards program scheduled. Appropriate timing will make your award more memorable, valuable and motivating.

- Don't give out awards that unintentionally demotivate. How can awards negatively influence workers? Well, if you're only giving out one "Engineer of the Year" award, but you've got a lot of top-notch, high-performing engineers on your team, you might be passing over many important contributors. That could leave a feeling of injustice among your unrewarded employees.

New leadership role? Don't do these things

There are several pitfalls new leaders can fall victim to when negotiating a transition in the workplace. Michael Watkins (<http://discussionleader.hbsp.com/Watkins>) gives a few tips in his book *The First 90 Days* ("Pitfalls readymade for new leaders," by Rachel Zupke on CNN.com and CareerBuilder.com). Here are some problems to look out for:

- Becoming remote or unapproachable. Leaders sometimes rely on reports and other written analysis of problems in lieu of meeting with colleagues. This can lead to isolation and an impression that your need to know about the organization is stronger than your desire to deal with the real issues at hand.

(Continued on page 17)

Current Activities in Longterm Care

is a bi-monthly magazine that provides useful activities, calendars, therapeutic activities and programs, feature stories, specialized activities for Alzheimer's patients and other disease conditions, professional news, medical news and much more!

If You Subscribe to Current Activities in Longterm Care Here's what you get:

- A large section on activities for all stages of Alzheimer's residents!
- A section just on Men's Activities!
- Plus FREE Internet Access for:
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- Internet archives with all kinds of additional unique activities, including more Men's activities!
- Live chat online help with specific activity situations!
- Professional news, including ongoing updates on changes in CMS Guidelines!
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DH Special Services

By Debbie Hommel, BA, ACC, CTRS
Executive Director of DH Special Services
<http://www.dhspecialservices.com/home.htm>

When All Else Fails: Bring them to Activities

By Debbie Hommel, ACC, CTRS

It is mid-morning and you have just gotten everyone settled. This morning's activity is one of their favorites - "You be the Judge". Suddenly, the activity room door opens and you hear the repetitive calling out as the resident is wheeled into the room. As you stand up, the nursing assistant says "we've tried everything, now it is your turn". Before you can say a word, the nursing assistant is gone. The resident's repetitive calling out has gotten everyone upset, some are yelling in response and several are bickering as they try to leave the room. You can forget "You be the Judge" at this point. Immediate efforts are devoted to calming the resident with repetitive calling out and trying to salvage the rest of the morning.

As an activity professional, I believe in the power of therapeutic activities. I have seen residents soothed, cheered, distracted, calmed, energized, strengthened, and diverted with a wide range of group and individual programs. However, many people think we have a magic activity wand which miraculously "cures" whatever behavior ails the resident. One of the biggest frustrations I have as a professional is when staff randomly introduce a resident to a program when the resident is actively in the midst of a behavioral moment. Although activities may work to distract, divert or

calm - as noted in "Understanding Behavioral Symptoms" (http://theactivitydirectorsoffice.com/DebbiesAD-Tips_archive200711.html), one must determine the cause of behavior prior to resolution.

Activities can be suitable diversions but they must be introduced based on need and interest. If it is determined that an activity might be a solution, a specific approach or activity should be identified and introduced based on the interest and ability of the resident. Pushing a resident into the closest activity can be detrimental, as that activity may not be appropriate and may contribute to increased negative behaviors.

There are several ways the activity program and specific activities can be used as a diversion for behavioral symptoms. The program design itself, specific activity programs and individualized activity approaches can all be utilized to address specific behaviors within the resident/client.

Program Design: The activity schedule should be a combination of flexible structure and routines. Regular involvement in a balanced and well designed activity program is a preventative measure for residents with challenging behaviors. The resident with dementia and behavioral symptoms finds comfort within

familiar programs conducted in a familiar way. Most memory support units adopt a cluster format of programming where programs are conducted routinely every day. For example, each morning may begin with a coffee social, followed by an active group, followed by a cognitive or task group, and concluding with a music program. The afternoon may follow a similar format but including a quiet time or rest period immediately following lunch or mid afternoon. To prevent boredom, theme programs are integrated into the routines. Different props, music, visuals and snacks can also introduce variety within familiar routines.

Specific Activity Programs:

There are many programs and activities defined for residents with behavioral symptoms. Snoezelen, Walking Programs, and Diversional Programs are some examples of specific programs to address specific behaviors. The Snoezelen program (<http://www.flaghouse.com/SnoezelenAL.asp>) is an environmental approach designed to sooth and calm individuals with acting out behaviors. Traditionally, it is a white room with soothing lights, sounds and smells to calm individuals with agitation and

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ABOUT DEBBIE

Debbie Hommel is a Certified Activity Consultant on State and National level, with over twenty-seven years of experience in providing direct care and consultation to long term care, medical day care, assisted living, and ICF/MR facilities throughout New Jersey, New York, Maryland, and Pennsylvania. She is an experienced trainer and workshop presenter, conducting a variety of seminars throughout the Tri-State area for the Activity Professional, Administrator, and allied healthcare professional. She is ACC certified through the NCCAP.



Alternative Solutions in LTC

By Sandra Stimson ADC, CALA, CDP
Executive Director, Alternative Solutions in Long Term Care

<http://www.activitytherapy.com>
<http://www.nccdp.org/index.htm>

Wellness Program

If you have not purchased a calendar analysis and population analysis these tools are available on our web site at www.activitytherapy.com as these tools will help guide you in planning programs as well as show the director what programs they are lacking. Some main categories you should now be including are spirituality, wellness, self esteem and empowerment groups. Wellness programs can be a variety of programs.

One program we recommend is guest speakers from inside your facility and your community. The nurse could present on stress, the dietitian could do a presentation on salt and high blood pressure, and rehabilitation director might discuss exercise and strengthening. Outside resources are numerous and generally free. Every organization has free resources on their web site. Print a hand out to give to your residents for the specific topic being presented. Keep a master copy in your file cabinets for the next time you present this topic.

Begin building a database of available resources within your community. Every hospital has a speaker's bureau and a wide range of topics. Call and have them fax over the topics and speakers who can present. Support groups leaders within your community present on a variety of topics. Every community has a wide range of support groups. Association such as Alzheimer's Association and American Heart Association, etc all offer speakers and generally there a free service.

Every month you should plan at least one presentation and speaker. Try to pick a topic that would be of interest to the majority of the residents. We can keep our residents well physically and

mentally if we present information, services and exercise programs.

To find information on support groups available in your community, when looking for a speaker see these web sites; New Jersey Self Help Group Clearing House (order the book) www.medhelp.org/njgroups or The National Clearing House at www.selfhelpweb.org

The Activity Director should be implementing daily exercise as part of the wellness programs, such as walking programs, swimming, tai chi, yoga, arm chair exercise, etc.

- Be sure to verify that the physician has cleared your resident for exercise programs.
- Know the residents limitations and precautions.

Typically your hair salon is under utilized and you could contract to bring in licensed massage therapist, aroma therapist and manicurist which are all important components of Wellness.

For those who have a facility van, reach out to your local YMCA for a special group swim rate. This is a great program for those residents who are able to get in and out of the pool. Add out door walks as soon as the weather is nice. Don't forget to purchase hats and sun screen as you don't want to see your residents sun burned. Inexpensive hats can be purchased in bulk at www.activitytherapy.makesparties.com web site. Always have refreshments at all your exercise programs.

You may wish to give a presentation to your residents on the word Wellness and what that means so they understand why you might eliminate one of the bingo programs to have a wellness program instead. Ok, maybe not Bingo, but you get the idea.

-END

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>

<http://www.activitytherapy.com> 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.



ABOUT NCCDP

The National Council of Certified Dementia Practitioners® was formed in



2001 by a group of professionals with varying work and personal experiences in the field of dementia care. Their backgrounds include Nursing, Psychiatry, Therapeutic Recreation, Social Services, Long Term Care Administration, Elder Law, and Home Care Administration. The Council was formed to promote standards of excellence in dementia education to professionals and other caregivers who provide services to dementia clients.

As the number of dementia cases continues to increase nationally and worldwide, there is a great necessity to insure that caregivers are well trained to provide appropriate, competent, and sensitive direct care and support for the dementia patient. The goal of the Council is to develop and encourage comprehensive standards of excellence in the profession and delivery of dementia care.



Re-Creative Resources

By Kimberly Grandal, CTRS, ACC, Executive Director
<http://www.recreativeresources.com/>

Activity SOS: Success-Oriented Sensory Stimulation

By Kimberly Grandal BA, CTRS, ACC
Executive Director, Re-Creative Resources Inc.
www.recreativeresources.com

Sensory stimulation programs are one of the most common types of activities found in long-term care facilities. Simply stated, sensory stimulation is a technique that provides meaningful and common smells, movements, feels, sights, sounds, and tastes through the stimulation of all six senses.

There are many benefits to providing sensory stimulation such as increased communication, environmental awareness, relaxation, cognitive stimulation, opportunity to build a rapport, enjoyment of a leisure experience, increased quality of life and much more.

Although many residents may benefit from sensory stimulation, the target audience most com-

monly includes individuals with moderate to severe cognitive impairment, those who demonstrate repetitive, self- actions, such as rubbing table trays or chairs, residents who demonstrate little or no response to external stimuli, and residents with impaired communication.

The planning phase is a very important part of success-oriented sensory stimulation programming. Identify which residents will benefit, assess their needs and interests, and plan accordingly. You may choose to offer a general sensory program which focuses on ALL the senses such as Discovering Your Senses, Sense-

Abilities or the S.P.I.R.I.T. program (Sensory Program and Individualized Recreation Intervention and Techniques). Other programs may focus on a specific sense such as Picture Identification, Name That Sound, or Taste and See. Below is a list of some creative names for various sensory programs.

There are many methods to providing a quality therapeutic sensory program. Some tips include:

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About Kimberly

Ms. Kimberly Grandal, Founder and Executive Director of Re-Creative Resources, Inc., is a strong advocate for the field of Therapeutic Recreation, with over fifteen years of experience working with the elderly in numerous administrative and consultant positions. She is an Activity Consultant Certified by the National Certification Council for Activity Professionals (NCCAP), and a Certified Therapeutic Recreation Specialist by the National Council of Therapeutic Recreation Certification

Ms. Grandal is a recipient of the Kessler Institute of Rehabilitation 1997 Triumph of the Human Spirit Award. She is a speaker for various state and local activity associations, colleges, and community groups, and provides educational workshops and consultation to long-term care facilities in New Jersey.

Creative Names for Various Sensory Programs

Snoezelen	Feel and Describe	Name That Sound
Aroma Therapy	Sensory Awareness	Sensory/Nature Videos
Hand Massages	Five Alive Sensory	Seasonal Sensory (Autumn etc.)
Picture Identification	S.P.I.R.I.T. Program	Color Sensory (i.e. Orange)
Sensory Stretch	Discovering Your Senses	Sensory and Music
Sensory and Movement	Tactile Stimulation	Taste and See
Making Scents	Sense Abilities	What's the Sense?

The NAAP

National Association of Activity Professionals

National Association of Activity Professionals

“Founded by Activity Professionals for Activity Professionals”

<http://www.thenaap.com>

Mission Statement: To provide excellence in support services to activity professionals through education, advocacy, technical assistance, promotion of

SENSORY OVERLOAD INSERVICE

Room Set-up: Chairs in a circle

Attendance: 16-40

Benefits: Non-verbal communication, Listening with your body, Concentration, Flexibility, Teamwork, and Empathy.

This is a very prop-heavy exercise.

Suggested items listed:

- An inflatable or squishy ball, one that is easy to grasp
- A hat to put on a partici-

ant's head

- A bag of crackers, enough for participants to eat some
- Bean bag, two bright colors
- Sun glasses, large plastic
- A shoe, tie the laces in a bow
- Bubbles, bubble wand for participants to blow bubbles

Group Set-up:

The number of items depends on the size of the group. Be creative when selecting items to maximize this as an inter-active experience. Place all items on a table by the group leader for an easy introduction into the circle.

Guideline:

Everyone takes a place in the circle. Introduce the ball as the heartbeat of the circle. No matter what you cannot let the ball drop or stop. As the ball is passed around tell them to think about how the need to give and take the ball. After the ball has gone around the circle a few times slowly introduce the other items, and give clear instructions like place the hat on the next person. Remember to remind the group that the ball is the most important thing in the exercise. Continue to introduce the rest of the items keeping the group active. Variations are to take out one by one

(Continued on page 14)

About NAAP

Founded by Activity Professionals for Activity Professionals...NAAP is the only national group that represents activity professionals in geriatric settings exclusively. NAAP serves as a catalyst for both professional and personal growth and has come to be recognized by government officials as the voice of the activity profession on national issues concerning long-term care facilities, retirement living, assisted living, adult day services, and senior citizen centers. NAAP is nationwide in scope with a growing membership in Canada and Bermuda. The National Association of Activity Professionals recognizes the following values: The quality of life of the client/resident/participant/patient served is the primary reason for our services. The strength of NAAP lies in the diversity of its members. NAAP recognizes the rich cultural, and educational backgrounds of its members and values the variety of resources represented. The strength of NAAP also lies in the development and promotion of scientific research which further defines and supports the activity profession. NAAP values the development and maintenance of coalitions with organizations whose mission is similar to that of NAAP's for the purposes of advocacy, research, education, and promotion of activity services and activity professionals. NAAP values members who become involved at the state and national level to promote professional standards as well as encourage employers to recognize them as professionals. NAAP affords Activity Professionals across the country the opportunity to speak with a common voice...NAAP successfully worked with members of Congress to secure a change in the nursing home reform title of the 1987 Omnibus Budget Reconciliation Act (OBRA). Through our efforts, it became mandatory that an activity program, directed by a qualified professional, be provided in every nursing home that receives Medicare and/or Medicaid funds. NAAP was the only professional activity association to participate in HCFA's workgroups that revised OBRA's interpretive guidelines now in effect. NAAP provides assistance at the state level to promote certification of activity professionals, working toward uniform professional standards for activity practice.

NAAP MEMBERSHIP WHY NOT JOIN TODAY?

There are so many benefits when you belong to NAAP! Each member will receive a newsletter which will give the updated reports on Government Relations, Special Interests, International Updates, Professional Development, Nominations, Standards of Practice, Financial Updates and a Membership Report. Along with this comes an update from our President, Diane Mockbee, and our Executive Director, Charles Taylor.

Members will also receive a discounted rate at the Annual Conference which is held in March/April of each year.

Membership dues are only \$70.00 per year. If you are a student in the 90 Hour Basic or Advanced Courses, your dues are only \$50.00 for the first year.

Email us for more information at membership@thenaap.com.

Join Now! You can download and mail in this application with your payment or use our new online registration.



Dear Debbie:

By *Debbie Hommel, BA, ACC, CTRS*
Executive Director of DH Special Services
<http://www.dhspecialservices.com/home.htm>

QUESTION: What are the rules concerning volunteers visiting the nursing facility and receiving a TB skin test? Example: If you have a group of Girl Scouts, Church Group, etc. who come once or twice a year to give out cards, etc. Should they be made to receive a TB skin test? I need some documentation of the Guidelines for TB skin testing. Thank You very much. I really enjoy your website.

ANSWER: I honestly do not know of any regulation where it says volunteers have to have a TB test. The regulations state the facility is responsible for the protection of the residents and minimizing exposure to risk. Exposing the residents to someone with TB would be a risk. How the facility decides to protect the resident is a facility policy.

It reminds me of the signs facilities display - asking people not to visit when they have signs of a cold. There is no regulation saying "if you have a cold or the flu - you are not permitted in the building". There is no way you can check every person entering the building to see if they have anything contagious - but the facility shows good effort to protect the residents.

Having said that, many facilities have policies about volunteers having a TB screening as a part of the volunteer orientation and prep. However, those volunteers are ones who come in weekly and have a lot of direct contact with the residents. To make children's groups or other groups get them - if they only visit once or twice a year seems a bit much. I think it would discourage them from coming at all. Children should be fine anyway - as they are screened as a part of their public schooling.

So, to answer your question - to my knowledge - there is nothing specific

about mandating volunteers and TB screening. It would be a policy decision your facility has to make. You can read your state regs or ask your infection control nurse if he/she knows of anything specific. But on a federal level, I am pretty certain there is nothing specific referencing TB and volunteers. Sorry I cannot be of any more help than that - Debbie

QUESTION: Hello, I have been skimming over the Internet, and found "ask Debbie", So i thought that i would give it a try, My facility is located in Illinois and in the facility i work at we recently opened the Alzheimer's wing and we are trying to implement programs and activities that work for them, so far we have been working from scratch, our unit has nothing. I am writing because I have run out of ideas. I am by the way a C.N.A. with 15 years under my belt and this is my calling, yet I have been working with my residents for about a month and a half now and my group is growing quickly, they are asking what are we going to do today, I have implemented exercise and sing a long. We have did some crafts, but like i said our resources are limited. I need advice on where to look what to do and if the facility itself will pay for all the activities, I appreciate all your help and am looking forward to hearing from you. Thank you from the bottom of my heart.

ANSWER: That is a pretty big question. I can think of two answers for you - to get you started. An effective way to program on memory support units is to develop a daily routine such as beginning with a morning coffee with some discussion (basic reality/weather/remiscing - depending on level of functioning); followed by exercise or active game; followed by mental type activity; followed by setting up for lunch with music. An afternoon routine should also be estab-

lished. The routines would depend on the level of functioning of your population. Within the established routines, you would do different activities which focus on the type of activity being done. For example, if 11 AM is your active time - there are a variety of active activities that could be introduced at that time frame. Routines are important but you don't want to fall into a rut. There are many resources for programming on the internet. I have some listed on my web site. This is the link for all the activity web sites that I have found. <http://www.dhspecialservices.com/activitysites.htm>

This is my link for a lot of the dementia based sites with ideas and resources. <http://www.dhspecialservices.com/dementiasites.htm>

The facility should provide you with a budget of some kind. There needs to be some funding for supplies. Many items can be sought through donations but some things should be purchased. There are wonderful resources out there, but some cost money. Hope that helps a little bit. If you have further questions, feel free to email me back. - Debbie

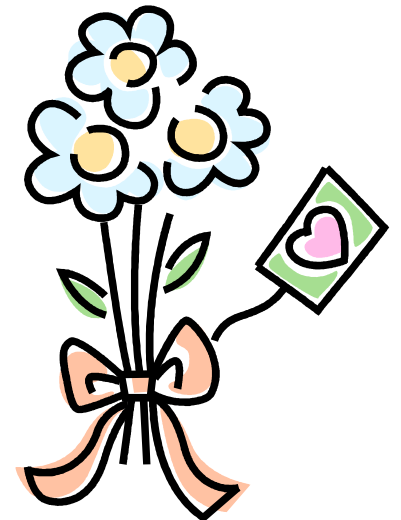
Do you have a question you'd like an Debbie to answer?

If so, send it to

rdlucas2003@yahoo.com

*It may be used in the next
Activity Director Today
E-magazine*

(Your name will not be revealed)



Monthly & Weekly Observances

For more activity idea nuggets visit us at:

<http://www.theactivitydirectoroffice.com/ActPlannerIntro.html>

MONTHS

- Lover's Month
- Vegetation Month
- American Heart Month
- American History Month
- American Music Month
- Biorhythm Health Month
- Black History Month
- Canned Food Month
- Celebration of Chocolate Month
- Creative Romance Month
- Great American Pies Month
- Human Relations Month
- International "Boost" Your Ego Month
- International Embroidery Month
- International Friendship Month
- International Twit Award Month
- National Cat Health Month
- National Cherry Month
- National Children's Dental Health Month
- National Fiber Focus Month
- National Scottish Culture Month
- Bring in bagpipes, tartans, and kilties.
- National Snack Food Month
- National Weddings Month
- National Wild Bird Feeding Month
- Responsible Pet Owner Month

- Return Shopping Carts To the Supermarket Month
- Sleep Safety Month

WEEKS

Week 1

- Agricultural Week
- National Pay Your Bills Week

Week 2

- Big Brothers/Sisters Week
- Boy Scouts Week
- Celebration of Love Week
- Circle K International Week
- Dietary Managers' Pride in Food Service Week
- Hero Week
- International Forgiveness Week
- National Cardiopulmonary Week
- National Crime Prevention Week
- National Future Homemakers of America Week
- National New Idea Week
- National Salute to Hospitalized Veterans Week
- National School Counseling Week

Week 3

- Brotherhood Week
- Health Education Week

- Home for Birds Week
- International Friendship Week
- National Cardiovascular Technologists Recognition Week
- National Engineers Week
- National Pedestrian Toll Week
- Pay Your Bills Week

Week 4

- International Friendship Week
- National Engineers Week
- Pancake Week
- Truth Week

FEBRUARY HOLIDAYS

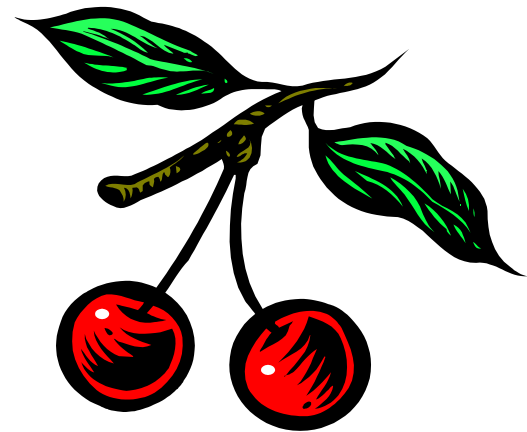
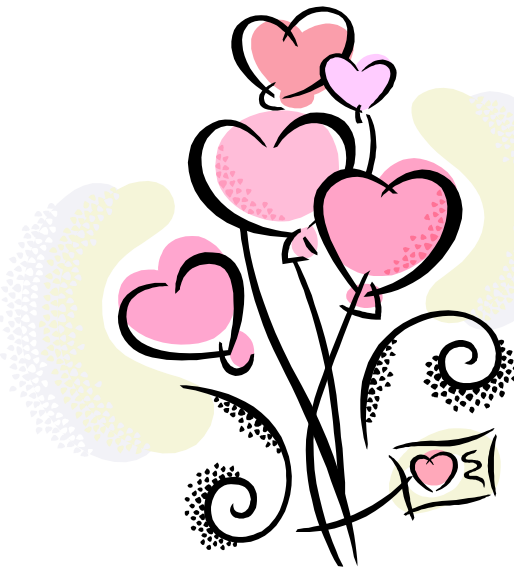
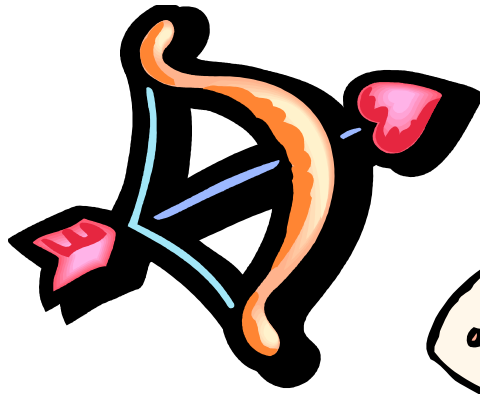
February 2, National Groundhog Day Legend has it that if the groundhog sees his shadow, he'll return to his hole, and winter will last another six weeks.

February 12, Lincoln's Birthday A holiday in many states, this day was first formally observed in Washington, DC, in 1866, when both houses of Congress gathered for a memorial address in tribute to the assassinated president.

February 14, Valentine's Day, The holiday's roots are in an ancient Roman fertility festival. Circa 496, Pope Gelasius I recast this pagan festival as a Christian feast day in honor of St. Valentine, but there are at least three different early saints by that name. How the day became associated with romance remains obscure, and is further clouded by various fanciful legends.

(Continued on page 17)

Clipart for the Month



Washington

Lincoln

FAMOUS PEOPLE BORN IN FEBRUARY

X W A S H I N G T O N R
K C E B M O B X Y T L E
R Q L X L J Y N H T O Y
T G B E V Q O G Q E C N
J A M U N H R R L C N O
V B Q J T E U V D W I L
J O B N B T E P L A L D
D R A D H V O R Q F N S
L Z N H R M F N G L J C
D I L Q B T Z T S W N C
L P A R K S V W H H Y X
B E R G E N S I W E L R

Find the Last Name of These Famous People:

- | | | |
|-----------------------------|----------------------------|------------------------------|
| 1. Farrah <u>Fawcett</u> | 6. Babe <u>Ruth</u> | 11. Susan B. <u>Anthony</u> |
| 2. Charles <u>Lindbergh</u> | 7. Sinclair <u>Lewis</u> | 12. Edgar <u>Bergen</u> |
| 3. Rosa <u>Parks</u> | 8. Burt <u>Reynolds</u> | 13. Michael <u>Jordan</u> |
| 4. Red <u>Buttons</u> | 9. Lorne <u>Greene</u> | 14. Erma <u>Bombeck</u> |
| 5. Zsa Zsa <u>Gabor</u> | 10. Abraham <u>Lincoln</u> | 15. George <u>Washington</u> |

(SOLUTION ON PAGE 14)

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(When All Else Fails - Continued from page 6)

anxiety. Structured walking programs are introduced to re-direct and divert those residents with exit seeking behaviors. The environment is often altered to provide diversion or appropriate stimulation. A rest period and snack is integrated into the program as a means to provide the resident with respite. Many facilities have formal diversional programs whereby life skills are introduced as a group to occupy those residents with rummaging behaviors. Such programs are introduced in between formal groups as a means to divert restlessness.

Individualized Activity Approaches: There are many residents with challenging behaviors who may need an individualized diverting activity at odd hours or during non-group time periods. And there are many residents who would refuse to join a group or are unable to tolerate a group setting. For these residents, the activity professional can develop individualized activity approaches. Materials and supplies can be organ-

ized and made available to the team. If the resident likes to rummage or sort, sorting materials can be left in a bin or basket at the nursing station. If the resident is soothed by Frank Sinatra music, a CD and CD player can be turned on by the nursing staff. The activity professional may develop and introduce the intervention but the team implements the intervention when it is needed.

Overall, there are countless lists of activity diversional ideas on the Internet and in the many activity books and publications available to the profession. These lists offer many activity and program suggestions for the caregiver to introduce to the resident/client. However, none of these activities will be effective if introduced randomly and without consideration to the elder's needs, interests or abilities. As a team, we can celebrate the effectiveness of a good activity program, specific groups and individualized activities as an antidote to specific behaviors. But as a team, we shouldn't forget the steps in identifying

the cause of the behavior and introducing solutions based on need.

- **101 Things to Do With a Person With Alzheimer's disease** <http://www.ec-online.net/Knowledge/Articles/101things.html>
- **Fifteen Activity Ideas for Alzheimer's Residents** http://www.nursinghome.org/pro/frmNewsletter.asp?strFile=/pro/newsletters/closeup_new/1998/cu0257.html
- **Alzheimer's Disease: Finding Purposeful Activities** http://www.nursinghome.org/pro/frmNewsletter.asp?strFile=/pro/newsletters/closeup_new/1993/cu0023.html
- **The Challenging Behavior Index** <http://www.zarcrom.com/users/alzheimers/c-index.html>
- **Activities Index** <http://www.zarcrom.com/users/alzheimers/a-indx.html>

- END

(Activity DOD - Continued from page 14)

very important to remember that even the smallest response is worth the effort. Facilitators should embrace every response and observe if the resident:

- establishes/maintains eye contact/opens eyes
- has the ability to track objects
- responds to music by singing, clapping, tapping, or humming to music
- demonstrates verbalization such as words, phrases or sentences
- exhibits vocalization such as moans, nonsensical

sounds, etc.

- expresses laughter or sadness
- displays various facial movement and expressions such as grimacing, smiling, sadness, tearfulness, licks lips, tongue movement, etc.
- demonstrates focus or increased in attention span
- awakens, stays awake, or is sleeping
- decreases repetitive motions, agitation, yelling
- consumes food/fluids

Documenting residents' responses to sensory stimulation programs

another important task and should be written in progress notes and IDCP summaries. Utilizing a specialized sensory tracking form (available through Re-Creative Resources Inc.) is recommended. In addition, care plan goals should be outcome based. Example: Mary will respond to olfactory stimulation by opening eyes and smiling 3x weekly during session sessions in 3 months.

The following are examples of sensory stimulation techniques, recommended equipment and precautions for all 6 senses: Olfactory, kinesthetic, tactile, visual,

(Continued on page 16)

auditory and gustatory.

OLFACTORY (SMELL)

Encourage residents to smell and identify the following: perfumes, colognes, potpourri, aromatherapy oils, popcorn, favorite foods, fresh baked bread or cookies, scented lotions, herbs and spices, flowers, coffee beans, mothballs, etc. Ask residents what the smell reminds them of. **Recommended equipment:** variety of scents, aroma fan/diffuser, cotton balls, swabs, etc. **Precautions:** aromatherapy oils are not to be used with residents with severe respiratory illness unless otherwise determined by physician; be aware of any allergies; do not apply aromatherapy directly on skin; some aromatherapy oils have contraindications-educate yourself!

KINESTHETIC (MOVEMENT)

Encourage physical movement through music, turning pages of a book or magazine, familiar movements, squeezing foam, etc. Provide passive range of motion or hand over hand guidance as needed. **Recommended equipment:** egg shakers, exercise scarves, batons, pom poms, ribbons, rain sticks, etc. **Precautions:** know resident's physical limitations; observe for shortness of breath overexertion and be cautious of residents with cardiac problems.

TACTILE (TOUCH)

Have residents feel the objects and ask them to identify the object. Ask simple questions:

"Does this feel soft to you". Utilize items that are soft, hard, bumpy, smooth, warm, cold, etc.

Recommended equipment: manipulatives, variety of balls, stuffed animals, feathers, pat mats, textured objects, sandpaper, warm and cool water, ice cubes, brush, comb, common household objects. **Precautions:** Be aware of allergies, and be cautious of touching. Some residents may prefer to not be touched; others may experience pain when touched.

VISUAL (SIGHT)

Use visually stimulating pictures that are simple, familiar and have contrasting colors. Use props when possible, in conjunction with pictures. Utilize verbal cues and ask simple, open-ended questions. **Recommended equipment:** mobiles, pictures, variety of props, reminiscent items, water panels/bubble towers, rope lights, light sprays, effect projector, nature videos, etc. **Precautions:** when utilizing blinking lights, moving pictures and projections, observe for over stimulation. In addition, some research shows that mirror balls may cause dizziness or nausea and facilitators should show great caution for individuals with epilepsy. When in doubt, discuss with nursing!

AUDITORY (SOUND)

Utilize rhythmic music to stimulate and soothing music to calm. **Recommended equipment:** music tapes/CD's, nature tapes, musical instruments, sound wave machines, bells, whistles, alarm

clock, horns, party noise maker, minute timer, listen to seashells, talking books. **Precautions:** Monitor/alter the volume as needed and keep distractions to a minimum.

GUSTATORY (TASTE)

Use a variety of foods that are in accordance with residents' diets, flavored swabs or flavored lip balms may be used for residents who are NPO. Use foods that are flavorful such as: oranges, lemons, pudding, ice cream, mints, etc. As the resident if the food is salty, sweet, sour, smooth, etc. Match tastes: have the resident taste cherry Jell-O and match with a picture or point to a bowl of cherries. **Precautions:** offer foods that are in compliance with the resident's diets and preferences and be cautious of allergies.

The most important aspect of sensory stimulation is the one-to-one interaction that is provided. It is a great way to provide meaningful activity and stimulation to those residents who are moderately or severely cognitively impaired and those who demonstrate little or no response to stimuli. With a little creativity, planning, perseverance, and empathy, activity professionals, recreation therapists, volunteers, family members, and other healthcare providers, can offer a success-oriented sensory stimulation program that will significantly enhance the quality of life of the residents!

- END

- **Appearing arrogant or insecure.**

While these two qualities might seem worlds apart, they're not. If you need to be seen as the person who always has the answer, beware. You could come off as a jerk or an incompetent leader. Instead, it's advisable to develop a strong curiosity about what's really going on, along with a willingness to listen to what others have to say. Coming in with your ideas about what is going on is natural, but attaching yourself to those ideas no matter what else happens is a bad idea.

- **Being all over the map.** This usually arises from trying to do too much and from not having a real plan—or not sticking to a plan you do have. Try to prioritize, Watkins says.

- **Choosing the wrong influences.** You will be judged by the company you keep and the advice you take. Be careful when you choose whom to listen to, as many people, competent and otherwise, are going to try and bend your ear.

- **Failing to get in touch with everyone.** Many leaders communicate to those above them and those below them but fail to touch base with those “horizontal” to them, says Watkins. Practice getting in touch with your peers and you will strengthen your position.

Skip these excuses for missing work

Need the day off and tempted to make up an excuse? You're probably better off telling the truth rather than lie says Andrea Nierenberg, president of The Nierenberg Group, a management consulting and personal marketing practice firm (“Ten excuses for missing work,” by Michele Marrinan on Monster.com).

Here are some excuses you'll probably want to skip, according to Marrinan:

- **A death in the family.** Never, ever use this excuse if it's not true. If your boss finds out, you will probably never be trusted in the office again. One PR executive reports that he had an employee whose mother died twice, and who lost 12 grandparents in two years.

- **I'm too sleepy to come in.** An IBM manager says one of her employees called in and said she'd accidentally taken some medicine with codeine in it instead of her vitamins.

- **I can't get my garage door opened.** An employee called his manager and said he couldn't get his car out of the garage due to a power failure—until she reminded him that he could open the door manually.

- **I can't find my polling place.** One employee told her boss that she needed the entire day off to find out where she had to go to vote.

- **I have a personal emergency.** Too vague, and just about every boss knows it when you try to use it.

Try these tips to save time

Need to run a tighter ship so you can have a little more leisure time? These days that's a pretty common problem and goal. People work more hours and are spread pretty thin. But don't despair. Here are a few time management tips from Worklifebalance.com's (www.worklifebalance.com) CEO Jim Bird:

- **Use a daily planner.** Electronic or paper, it doesn't matter. Choose one that gives you at least one page per day, and then make sure you always keep it with you. Jot down your commitments as you go.

- **Get rid of your to-do list.** Why? To-do lists often end up being frustrating and futile, something you never quite get to. Instead, take your to-do list before you toss it out and transfer the items to a particular time and day in your daily planner. You'll be amazed

at how much your stress level goes down and how much you accomplish when you do this.

- **Set aside a block of time to return phone calls and answer e-mails.** Choosing early morning to do this is often best since the other person will have the rest of the day to respond. Of course, urgent messages and phone calls should be returned in a timely manner.

- **When talking on the phone or in face-to-face conversations, give the other person your full attention.** Don't page through your e-mail in-box or fill out your daily planner when you're talking to someone. Make sure that your communication is clear and focused, which will reduce the need for clarification and other time-wasters in the future. Don't multitask when you deal with people. It never pays off.

(Continued on page 18)

(February Holidays -Continued from page 11)

Washington's Birthday & President's Day - Mon., Feb. 20. (The actual date of his birthday is Feb. 22.) A federal holiday observed the third Monday in February. It is a common misperception that the federal holiday was changed to “Presidents' Day” and now celebrates both Washington and Lincoln. Only Washington is commemorated by the federal holiday; 12 states, however, officially celebrate “Presidents' Day.”

Shrove Tuesday , (Mardi Gras), Falls the day before Ash Wednesday and marks the end of the carnival season, which once began on Epiphany but is now usually celebrated the last three days before Lent. In France, the day is known as Mardi Gras (Fat Tuesday), and celebrations are held in several American cities, particularly New Orleans. The day is sometimes called Pancake Tuesday by the English because fats, which were prohibited during Lent, had to be used up.

Are you clinging to the past?

Some people hate change and so cling desperately to what they know. They find comfort in routines, even if those routines no longer produce what is needed. Instead, according to Price Pritchett and Ron Pound in *The Employee Handbook for Organizational Change*, some employees merely want to hang on to the familiar, to snuggle into the comfort of what they already know.

People like to feel in control. And generally they dig in their heels because they are afraid of the unknown, rather than being in love with the way things have been.

But in this day and age of seemingly constant change it's a good thing to consider how you react to change. Does ambiguity make you nervous? If so, you're probably going to have to do some work to let go of your grip on the past.

But here's one thing about change that

can have a huge impact on your life: If you resist, you're liable to seriously damage your career. Even if you've been a good and reliable employee for a long time, resisting change can earn you a reputation as a troublemaker. You could become known as someone who gets in the way of progress—and that could hurt your career. A few words to the wise: You'll probably be better off taking hold of the future, rather than hanging on to the past.

For more information about this issue and to order *The Employee Handbook for Organizational Change*, browse www.pritchett.com.

Smiling can change emotional turmoil

Anger at work is not unusual. However, learning to master your anger so that it does not harm your career is essential.

But how can you get some space around your anger? Author Lewis Richmond (www.lewisrichmond.com) recommends in his book *Work as a Spiritual Practice*, that you try a smile—or at least a half smile.

Richmond's not suggesting that you break into a toothy grin, but instead that you try a gentle slight upturn of the mouth—a sort of half smile—the one that images of the Buddha often depict.

While this might seem simple or feel a little silly, Richmond points out that research shows that emotions and facial expressions are wired both ways. That is, we make facial expressions in reaction to emotions, but we also experience some emotion in response to facial expressions.

When researchers wired electrodes to subjects and asked them to imitate certain facial expressions, scientists found that a facial expression devoid of any emotion still caused a physiological reaction in subjects, Richmond says.

So if you can squeak out a half-smile when you're mad at someone, there's a chance that you might be able to break the emotional pattern you're experiencing and move into new territory.

- END

MONTHLY RECIPE

February 10th is Double Fudge Cream Cheese Brownie Day. Try this recipe with your cooking club

DOUBLE FUDGE CREAM CHEESE BROWNIE

INGREDIENTS:

- 1 c. butter
- 4 (1 oz.) sq. unsweetened chocolate
- 2 c. sugar*
- 1 1/2 c. flour
- 4 eggs, slightly beaten
- 1 tsp. salt
- 1 tsp. baking powder
- 2 tsp. vanilla

- 1 c. semi-sweet chocolate chips

FILLING:

- 1/4 c. sugar*
- 2 tsp. butter
- 3 oz. pkg. cream cheese, softened
- 1 egg
- 1 tbsp. flour
- 1/2 tsp. vanilla

DIRECTIONS:

Heat oven to 350 degrees. In 2 quart saucepan combine 1 cup butter and unsweetened chocolate. Cook over medium heat, stirring occasionally, un-

til melted (4 to 6 minutes). Stir in remaining brownie ingredients except chocolate chips. Fold in chocolate chips. Spread half of batter into greased 13x9 baking pan. In small bowl stir together all filling ingredients. Spread over brownie mixture. Spoon remaining brownie batter over cream cheese. Cream cheese will not be entirely covered. Bake for 30-35 minutes or until brownies pull away from sides of pan.

*You may substitute Splenda. Remember to use the measurement equivalents on the package.

THE FUNNY BONE

Do Sayings Go Without Saying?

By: Knight Pierce Hirst

My grandmother loved familiar sayings and one of her favorites was "You can't have your cake and eat it too". Hopefully, she didn't share that with brides. If a bride puts a piece of wedding cake under her pillow, her dreams are meant to come true. Because I eloped, that wouldn't have worked for me. I didn't have a wedding cake. Even if I did, I wouldn't have dared to put a piece of cake under my pillow. My saying "I do" included doing laundry.

Being a newlywed included thinking love made the world go around. I still do; but with the divorce rate continually rising, I believe friendship keeps us from falling off.

Shakespeare believed, "All the world's a stage, all the men and women merely players ... one man in his time plays many parts". I play the part of daughter, sister, wife, mother and friend. I don't get "Tonys" for my performances. My awards are compliments and one of the wonderful things

about compliments is they don't need to be dusted.

Mark Twain said, "All the words for the great, American novel are in the dictionary. They just have to be put in the right order". There's order and there's the right order. If I could put things in the right order, I think I could solve the Rubik's Cube too.

Unfortunately, there's no solution for a fool and his money being soon parted. In fact, Uncle Sam parts money from all of us every April.

When it comes to old fools, however, there is a fool like an old fool. It's another old fool. If you don't believe me, there are politicians in Washington who can prove it to you.

Politicians wrap themselves in the American flag to persuade voters they'd give us the shirt off their backs. No, thank you. I'll wait for a clean shirt. According to the news, there are plenty of politicians with laundering experience.

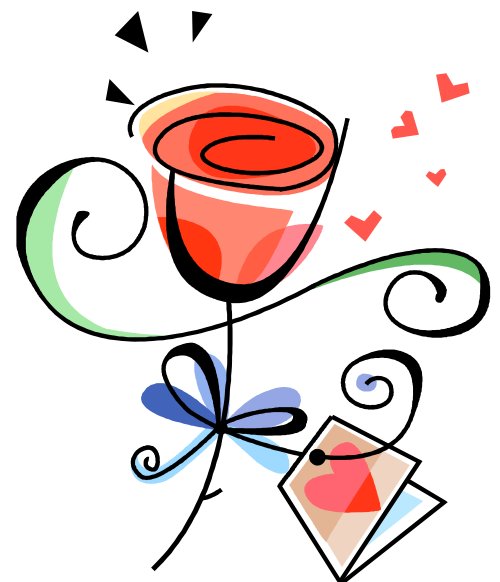
I don't know if you need equestrian experience to know you shouldn't look a gift horse in the mouth. Maybe that's

because people look in a horse's mouth to see how old it is? Maybe the saying should be "Don't look a female, gift horse in the mouth".

Of course, when it came to a woman's age, my grandmother would have shared this familiar saying - "If something looks too good to be true, it probably is".

Article Source: <http://www.articlesnatch.com>

About the Author: KNIGHT PIERCE HIRST takes humorous looks at life. Take a minute to make yourself smile at <http://www.knightwatch.typepad.com>



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Following is Your Free Facility Newsletter

The following four pages contain a pre-written facility newsletter which you may use as your own. It is intended to help make your departmental responsibilities time saving and cost effective. All you need to do is put your title on the front and your address on the back.

Suggestions for the Effective Use of Your Newsletter

This newsletter concept is the result of several years of preparation and the generous support of the sponsors whose advertisements are contained within its pages. Because all of the material in the newsletter is copyright free, you may feel assured that the publishing and distributing of your free newsletter is legal.

PREPRINT

After you have downloaded your newsletter you have several choices to make before printing it.

- First type or paste the title of your newsletter into the blank area of the front page mast.
- On the mailing page insert your facility's name and address in the upper left corner where it says "From:".
- Prepare any printed material you may have for insertion into the newsletter. At a minimum we suggest you prepare your monthly activity calendar on one side of an 8.5"x11" sheet or paper. On the other side you may enter residents facts and figures (new admissions, birthdays, residents who went home, deaths). Also, on the back of the calendar page you may want to advertise upcoming activities and events, a management roster and other items of interest specific to your facility.

PRINTING

- If you decide to print your newsletter on your facility copier you may print the newsletter on 8.5"x11" sheets of paper. However, it is far more professional looking to use 17" x 11" sheets

(this size is larger than legal size paper, but can be hand fed into most modern printers).

- If you use a print shop have them print your newsletter on 17"x11" paper. They will have a variety of colors for both your paper and ink. You can expect to pay more for color ink. If you decide to print your newsletter on color paper, avoid using dark colors and extremely bright colors (e.g. fluorescents), they are too difficult to read.
- If you take it to the print shop they will also print and insert your extra material and fold your newsletter for you. One fold makes your newsletter ready for hand outs. Two folds prepares the newsletter for mailing.

MAILING

(an excellent activity for your residents)

- To prepare your newsletter for mailing, it must be folded twice so the mailing face is showing on the outside.
- Each piece you plan to mail must be sealed twice on the loose page edge. Use 1/2" pieces of transparent tape (you can purchase seals at most office supply stores if you wish).
- Write or stick your address labels where it says "To:".
- Place postage in the upper right hand corner. First class postage will pay for your newsletter and at least two 8.5"x11" insertions.
- Your newsletter is now ready to mail. The Post Office appreciates it if you pre-sort your zip codes and bundle the newsletters with rubber bands.

BULK MAILING

With bulk mail you can save a bundle on postage. However, you must set up an account with the post office, mail at least 200 newsletters at a time, presort your mail, prepare a billing form and deliver the newsletters to the post office. Although it sounds complicated, it becomes routine after you have done it a couple of times.

DISTRIBUTION

For the most effective marketing of your facility, we recommend that you make an extensive mailing list including these listed

below. The more newsletters you circulate, the more successful your marketing will be.

- All responsible parties
- Seniors at home
- Banks
- Hospital discharge planners
- Nursing homes
- Adult day care centers
- Churches
- Home health agencies
- Federal, State and local social service agencies
- Social organizations and clubs
- Business organizations
- Corporate headquarters
- Area schools
- Area radio stations
- Area television stations
- Area newspapers
- Area businesses

TIMING

For timely distribution, your newsletter will always be available to you at the first of the preceding month. It should be published by the last week of the month and mailed prior to the first of the month the newsletter is dated.



The History of Cupid

Cupid is the most famous of Valentine symbols and everybody knows that boy armed with bow and arrows, and piercing hearts. He is known as a mischievous, winged child armed with bow and arrows. The arrows signify desires and emotions of love, and Cupid aims those arrows at Gods and Humans, causing them to fall deeply in love. Cupid has always played a role in the celebrations of love and lovers. In ancient Greece he was known as Eros, the young son of Aphrodite, the goddess of love and beauty. To the Roman's he was Cupid, and his mother was Venus.

There is a very interesting story about Cupid and His mortal Bride Psyche in Roman mythology. Venus was jealous of the beauty of Psyche, and ordered Cupid to punish the mortal. But instead, Cupid fell deeply in love with her. He took her as his wife, but as a mortal she was forbidden to look at him.

Psyche was happy until her sisters persuaded her to look at Cupid. as soon as Psyche looked at Cupid, Cupid punished her by leaving her. Their lovely castle and

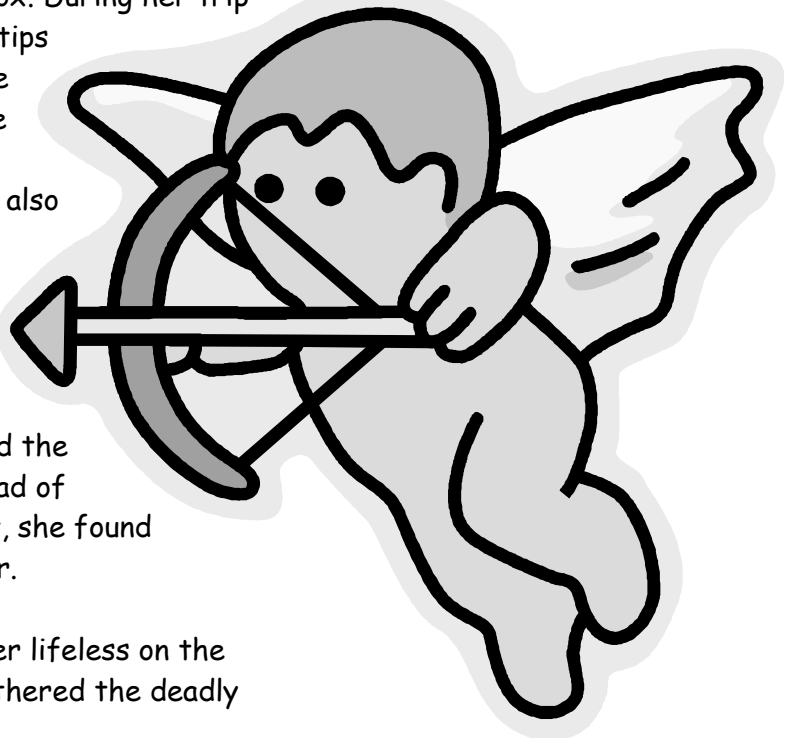
gardens vanished too. Psyche found herself alone in an open field with no signs of other beings or Cupid. As she wandered trying to find her love, she came upon the temple of Venus. Wishing to destroy her, the goddess of love gave Psyche a series of tasks, each harder and more dangerous than the last.

For her last task Psyche was given a little box and told to take it to the underworld. She was told to get some of the beauty of Proserpine, the wife of Pluto, and put it in the box. During her trip she was given tips on avoiding the dangers of the realm of the dead. She was also warned not to open the box. But Temptation overcame Psyche and she opened the box. But instead of finding beauty, she found deadly slumber.

Cupid found her lifeless on the ground. He gathered the deadly

sleep from her body and put it back in the box. Cupid forgave her, as did Venus. The gods, moved by Psyche's love for Cupid made her a goddess. Today, Cupid and his arrows have become the most popular of love signs, and love is most frequently depicted by two hearts pierced by an arrow, Cupid's arrow.

Source: The Holiday Spot
<http://theholidayspot.com/valentine/index.htm>



You Don't Have to Live with Chronic Pain Anymore

(ARA) - Colleen Foley of Mount Horeb, Wisc., used to be a hairstylist, and as such, would spend hours on her feet, doing repetitive motions with the scissors. "Eventually it developed into tendonitis on my left side which regularly causes pain that goes up the back of my neck, down my arm to my hands. Sometimes it would get so bad, I couldn't continue working," says Foley.

She used to turn to oral Ibuprofen to take the edge off, but it wasn't always effective. Recently she changed her strategy. "I've read a lot lately about how bad it can be for your stomach to be taking oral pain relievers all the time," she says, "so when a

friend recommended I try a topical Ibuprofen cream instead, I was game."

Foley started using Ibunex, a new topical cream designed for muscle and joint therapy at the end of July, and was instantly amazed by the results. "The first time I used it, I rubbed a little bit of the cream into my hands and knuckles, and worked it between my fingers and over my forearm, and got relief almost immediately," says Foley, who now also uses it on her shoulder and neck when they start to bother her.

Ibunex, manufactured by Osceola, Wisc.-based Core Products International, Inc., targets inflammation at its source. A single .2 gram pump of Ibunex, contains a mixture of key ingredients known to have wide benefits in joint health management of pain and inflammation. These include Ibuprofen, Glucoasmine, Chondroitin Sulfate, MSM and Bromelain.

"What I really like

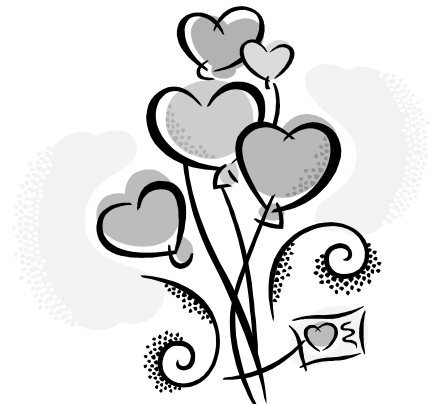
about Ibunex over anything else I've tried is I get immediate relief. It goes right to the spot where it hurts and hits the nerve right away," says Foley, who recently started using Ibunex's companion product, Gluconex, as well. Gluconex is designed to provide maintenance therapy for long term conditions like tendonitis, carpal tunnel syndrome and tennis elbow.

Foley credits the one-two punch she gets from her new-found therapy with helping her sleep better at night, and allowing her to once again pick up a guitar, something she hadn't been able to do for years. "It has really improved my quality of life. I recommend this therapy to anyone who has ever suffered from pain."

Ibunex and Gluconex are available for purchase through health care providers and are also available for purchase online at www.CoreProductsLaboratories.com.



ARA



Managing Eye Health in the Golden Years

(ARA) - With life expectancy figures continuing to climb, managing eye disease is essential for people to maintain healthy, happy and productive lives. According to the American Optometric Association (AOA), Age-Related Macular Degeneration (AMD) is the leading cause of severe vision loss in people over age 50. The Centers for Disease Control and prevention estimate that 1.8 million people have the disease and another 7.3 million are at risk for vision loss from AMD.

AMD occurs when the central area of the retina responsible for clear vision, the macula, is damaged. This results in a loss of central vision in the eye, which is needed for reading and close work. Color vision and distance vision are also affected. There are two types of macular degeneration: "dry" or atrophic, and "wet" or exudative.

The exact cause of macular degeneration is unknown but it may be related to aging, hereditary factors, smoking and exposure to high levels of ultraviolet radiation and blue light, both found in sunlight. Your lifestyle can play a role in reducing your risk of developing AMD and other eye dis-

eases. The AOA recommends that individuals:

- * Eat a low-fat balanced diet rich in green, leafy vegetables, or ask their optometrist about dietary supplements;
- * Wear sunglasses that block 99 to 100 percent of ultraviolet radiation;
- * Keep blood pressure under control;
- * Avoid smoking.

People should also be alert for the symptoms of the wet form of macular degeneration and seek professional help immediately if they notice:

- * A sudden loss of the ability to see clearly;
- * A gradual change in color vision;
- * Distorted vision, such as wavy lines that should be straight;
- * A dark or empty area appearing in the center of vision.

The key to treatment and management of AMD is early detection; see your optometrist regularly to protect your vision. For more information, visit the association's Web site at www.aoa.org

Courtesy of ARAcontent

24 Natural Highs

1. Falling in love.
2. Laughing so hard your face hurts.
3. A hot shower.
4. No lines at the supermarket.
5. A special glance.
6. Getting mail.
7. Taking a drive on a pretty road.
8. Hearing your favorite song on the radio.
9. Lying in bed listening to the rain outside.
10. Hot towels fresh out of the dryer.
11. Chocolate milkshake (vanilla or strawberry).
12. A bubble bath.
13. Gigging.
14. A good conversation.
15. The beach
16. Finding a 20 dollar bill in your coat from last winter.
17. Laughing at yourself.
18. Looking into their eyes and knowing they Love you
19. Midnight phone calls that last for hours.
20. Running through sprinklers.
21. Laughing for absolutely no reason at all.
22. Having someone tell you that you're beautiful.
23. Laughing at an inside joke with FRIENDS
24. Accidentally overhearing someone say something nice about you.

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Reasons Why I Love You!

- I can be myself when I am with you.
- Your idea of romance is dim lights, soft music, and just the two of us.
- Because you make me feel like, like, like I have never felt before.
- I can tell you anything, and you won't be shocked.
- Your undying faith is what keeps the flame of love alive
- You and me together, we can make magic.
- We're a perfect match.
- Thinking of you, fills me with a wonderful feeling.
- Your love gives me the feeling that the best is still ahead.
- You never give up on me, and that's what keeps me going.
- You are simply irresistible
- I love you because you bring the best out of me.
- Your terrific sense of humor
- Every time I look at you, my heart misses a beat
- You're the one who holds the key to my heart
- You always say what I need to hear (You are perfect).
- You have taught me the true meaning of love.
- Love is, what you mean to me - and you mean everything.
- You are my theme for a dream.
- I have had the time of my life and I owe it all to you.
- When I look into your eyes, I can see your heart.
- Your love for me is a natural anti-depressant.
- I love to hear your voice.



Source: The Holiday Spot
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