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Individualized Positive Psychosocial Interventions

A caregiver's guide to one-to-one recreational activities for persons with dementia

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Outline for Clinical IPPI manual

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I. Introduction

We created this manual as part of a larger study entitled "Individualized Positive Psychosocial Interventions: Impact on CNAs and Residents," otherwise known as the "IPPI" project. Funded by the Alzheimer's Association, the IPPI project grew out of an emerging emphasis on providing psychosocial care to persons with dementia. Recognizing that the medical model of care attends exclusively to physical health and ignores emotional, social, and behavioral well-being, gerontologists are focusing on psychosocial models of care, which give special attention to these neglected areas. The IPPI project represents an attempt to enhance psychosocial care by implementing one-to-one recreational activities, and examining their impact on the demented person's emotional, social, and behavioral functioning.

We developed this manual to serve as an aid in training professional caregivers to engage in one-to-one activities with persons with dementia. The activities described in this manual require no formal training in recreational therapy or the leisure arts. Given the practical requirements of most agencies providing care, we have designed the activities to involve only basic materials, and only small blocks of time. Professional caregivers working with persons with dementia may use these activities to enhance the demented person's quality of life through engaging in pleasant, meaningful, and stimulating activity. At the same time, it is hoped that professional caregivers will enjoy doing these activities with the demented persons for whom they care, as they provide an opportunity to get to know one another in a capacity not offered during physical care tasks.

The manual begins with a consideration of how to select the specific content and times for conducting one-to-one interventions. We discuss how to target activities for people with particular impairments, such as vision or hearing problems, as well as to elicit specific benefits, such as cognitive or physical gains. Next, we present general principles that underlie successful one-to-one interventions with demented persons, including the communication skills that foster interaction and engagement, and an emphasis on the activity process rather than a finished product. Individual protocols are included, to provide step-by-step guidance in carrying out each activity. Each protocol is keyed to indicate whether the intervention is appropriate, with modification if necessary, for people with auditory, visual, cognitive, or fine and gross motor impairment. The manual concludes with suggested procedures for training staff, tracking the demented person's responses and outcomes, and managing the activity materials.

In the IPPI project, the activities described in this manual were used in tandem with staff training on how to communicate effectively with persons with dementia. For further information on this training, refer to the "Communication Training for Caregivers of Persons with Dementia" manual, which provides a curriculum for teaching professional caregivers to be more sensitive to the emotions of persons with dementia, as well as to the messages they convey with their own emotions.
II. How to Select an Individualized Positive Psychosocial Intervention

A. The Assessment of Preferences

There is a great deal of consensus regarding the importance of integrating a wide range of psychosocial preferences into the care of demented individuals in order to maintain quality of life (Rader, 1996). However, the provision of individualized care relies heavily on the ability of the caregiver to accurately and comprehensively assess the likes and dislikes of the caregivee. In the area of recreational activities, we have developed the PGC Preference Questionnaire to assess the preferences of demented individuals in eight categories: Reminiscence, sensory stimulation, exercise, grooming, games, music, crafts, and cooking. This instrument is completed by the resident, the family caregiver most knowledgeable about him or her, and a staff member, usually an activity therapist.

**Resident version:** The resident version of this questionnaire is completed in an interview by a staff member (usually an activity therapist). The interview is attempted for all residents, but some residents are simply too cognitively impaired to understand what is being asked of them. Nonetheless, the interview is attempted for all residents because our experience suggests that, even for the very impaired, a subset will respond to questions about their likes and dislikes either verbally or nonverbally (nodding, smiling, shaking their head, frowning). The staff member begins by asking the resident about their past preferences for the listed activities. We discovered that in asking about past preferences for activities the resident is generally able to give more detailed responses. When asked about current preferences, many residents will simply respond to the perceived lack of availability of the activity (i.e., "they don't offer that here") or their inability to perform the activity in traditional ways (i.e., "I can't see the needlepoint anymore"). See Appendix A.

**Family version:** The family version of this questionnaire can be completed in an interview with a knowledgeable family member or it can be mailed to the family member for completion. The questionnaire asks about their relative's likes and dislikes of activities in the past. For some residents it can be difficult to locate a family member who feels comfortable answering questions about past preferences. Sometimes, the resident has no family or has only distant relatives. In other cases, the resident may have family that feels they have not had enough contact with the resident to answer "correctly." In these instances, family members should be encouraged to give their "best guess." See Appendix B.

**Staff version:** The staff version of this questionnaire is usually completed by an activity therapist. The activity therapist fills in the questionnaire with his or her perception of the current likes and dislikes of the individual for the listed activities. We found that this questionnaire must be completed by an activity therapist that has worked with the resident for at least one month. It is also useful for the activity therapist to solicit the input of other knowledgeable staff members. See Appendix C.

B. The Selection of the Type of Activity
The information from the three assessment sources listed above is brought together for review by a small group of staff members. If getting started on individualizing activity for an entire unit, begin by reviewing a group of five to six residents at a time. We recommend including the activity therapist, the nurse manager for the unit, and a CNA knowledgeable about the resident(s). The goal for the meeting should be to select two to three activities which could be implemented for a given resident.

In reviewing the Preference Questionnaire information, top priority should be given to the resident's responses, followed equally by family and activity therapist responses. The group should begin by reviewing the "Top 3" activities noted on the questionnaires. In discussing the "Top 3," the group should allow current preferences to take precedence over past preferences and should consider the resident's physical and cognitive limitations.

When two to three activities have been selected for a given resident, it is a good idea to bring these ideas to the interdisciplinary team for their review and suggestions. Ask the team to help in the decision as to which of the activities should be tried first. Many times other team members will have creative thoughts about how to implement a given activity, so it is well worth the time to get their input before trying the intervention.

In discussing cognitive, emotional, physical, and social goals of residents, the team can attempt to match the residents to activities that target these needs. The following section identifies interventions that are particularly useful in achieving various benefits.

**Cognitive Benefits**

<table>
<thead>
<tr>
<th>Increases general level of awareness</th>
<th>All protocols</th>
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<tr>
<td>Stimulates memories</td>
<td>All protocols</td>
</tr>
<tr>
<td>Encourages decision-making</td>
<td>All protocols</td>
</tr>
<tr>
<td>Stimulates attention span and concentration</td>
<td>All protocols</td>
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<tr>
<td>Stimulates procedural memory</td>
<td>Cooking interventions</td>
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<tr>
<td>Encourages problem-solving</td>
<td>Card games</td>
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<td></td>
<td>Checkers</td>
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<td></td>
<td>Bowling</td>
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<tr>
<td>Utilizes verbal expressive skills</td>
<td>Reminiscing protocols</td>
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<tr>
<td></td>
<td>Making a memory book</td>
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<tr>
<td></td>
<td>Making a greeting card</td>
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<td>Word games</td>
</tr>
<tr>
<td>Utilizes verbal receptive skills</td>
<td>Reminiscing about going to the beach</td>
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<td></td>
<td>Wonders of water</td>
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<td></td>
<td>Touching textures</td>
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<tr>
<td>Utilizes tactile discrimination skills</td>
<td>Sensory stimulation with familiar smells</td>
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<tr>
<td>Encourages sequence skills</td>
<td>Cooking interventions</td>
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<tr>
<td></td>
<td>Beauty time</td>
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<tr>
<td>Utilizes categorizing skills</td>
<td>Card games</td>
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<td>Cooking interventions</td>
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<td>Utilizes symbol recognition skills</td>
<td>Card games</td>
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<tr>
<td></td>
<td>Cooking interventions</td>
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</table>
**Emotional Benefits**

- Encourages expression of emotions  
  all protocols

- Decreases loneliness and isolation  
  all protocols

- Provides a pleasant emotional experience  
  all protocols

- Enhances feelings of self-worth  
  making a memory book  
  beauty time  
  cooking interventions

- Increases self-esteem  
  reminiscing protocols  
  making a memory book  
  making a greeting card  
  beauty time

**Physical Benefits**

- Utilizes eye-hand coordination  
  cooking interventions  
  making a greeting card  
  making a memory book  
  checkers  
  card games  
  beauty time  
  bowling

- Strengthens muscles  
  stretching exercises  
  range of motion  
  bowling  
  folk dances

- Improves balance  
  folk dances  
  bowling

- Utilizes fine motor movement and coordination  
  stretching exercises  
  checkers  
  card games  
  making a greeting card  
  making a memory book  
  cooking interventions  
  wonders of water  
  touching textures  
  beauty time  
  reminiscing about fashion  
  wonders of water  
  hand massage

- Stimulates gustatory sense  
  cooking interventions

- Provides outlet for creativity and self-expression  
  making a greeting card

- Provides outlet for self-expression through movement  
  folk dances  
  active listening to music  
  stretching exercises

- Provides outlet for expression of thoughts and feelings  
  making a greeting card  
  making a memory book

- Reduces stress  
  hand massage

- Utilizes gross motor coordination  
  stretching exercises  
  range of motion  
  bowling  
  folk dances

- Improves circulation  
  hand massage  
  stretching exercises  
  range of motion  
  folk dances  
  wonders of water

- Improves endurance  
  stretching exercises  
  range of motion  
  folk dances  
  bowling

- Utilizes auditory acuity skills  
  word games  
  active listening to music  
  sing-a-long to familiar songs  
  sensory stimulation with familiar sounds  
  reminiscing about old time radio and early TV

- Provides tactile stimulation  
  touching textures  
  reminiscing about pets  
  reminiscing about the beach

- Stimulates olfactory sense  
  sensory stimulation with familiar smells

- Facilitates relaxation  
  hand massage
**Social Benefits**

Enhances social interaction skills  
all protocols

Decreases isolation and loneliness  
all protocols

**C. Selecting the Time of the Intervention**

The time of day for the intervention needs to be considered for each resident. Ideally, the delivery of the intervention should be timed to address a specific need of the resident: need for attention, stimulation, comfort, etc. Staff should target times that the resident routinely becomes agitated (e.g., late afternoon, change of shift, right before meals, etc.) or when the resident is most alert. Staff should avoid times when the resident is engaged in group activities, nap times, family visitation, or medical appointments. Unfortunately, it is often the case that a time that is good for the resident is not good for the staff! Change of shift is an example of this. The care planning team needs to be creative in thinking of solutions to these dilemmas. In addition, the team needs to consider how often the intervention will be delivered. In general, one to three sessions per week are recommended.
III. General Principles

During implementation of any Individualized Positive Psychosocial Intervention (IPPI) with a resident, there are a number of general principles to remember.

A. Prepare for the intervention. Before beginning the intervention, obtain the necessary supplies and set them up in a quiet, distraction-free area such as the resident's room, lounge or activity room.

B. Begin the intervention. Locate the resident, and introduce yourself to her. Tell the resident what you will be doing with her. For example, "Good morning, Mrs. Smith, my name is Mary and I thought you would enjoy spending some time with me sharing your memories of going to Atlantic City." If you have to move the resident to the area in which you'll be doing the activity, reintroduce yourself when you get there, and reiterate what you will be doing together.

C. Give the resident a choice. Providing the opportunity for choice empowers the resident to play an active role in her activity involvement. At times it may seem as if the resident cannot make any choice without assistance, and that may be true. However, you can create situations for successful decision making by simplifying the way you present the choices. Limit the choices to only two items or topics, and you use the props as visual, auditory, or tactile cues.

   Examples:
   - You are about to play checkers with a resident, and you have already set up the checkerboard to act as a visual cue. Show the resident the black and red checkers and ask, "which color checker would you like to use?"

   - You are about to do the active listening to music activity. Hold up the tapes as visual cues, and ask, "would you like to listen to classical or Yiddish music?" An auditory cue you could use would be to play a few seconds from each tape and then ask her preference.

D. Allow the resident time to respond. Whether it is a question she is responding to or completion of a specific task, it may take the resident a few moments to process the information. A few moments of silence are sometimes needed. Use your judgment in determining the amount of time you will pause.

E. Have a prepared list of questions to stimulate memory recall. Start with open-ended questions. Sometimes the resident may not be able to answer these questions without some verbal cues. In such cases it is helpful to have a prepared list of specific questions. Most of the protocols in this manual come with a list of related questions. You can use them as examples or develop your own questions.

F. Focus on the process, not only the product. It's not important if the resident sings the
wrong words to a song, or cannot draw a straight line. The most important piece of each
activity is that it is a positive emotional experience for the resident. The general
principles listed in this section can guide you in this process.

G. **Encourage the resident to do as much as possible.** Guide the resident along, but
encourage him/her to do as much as possible even if it is one small step at a time.

H. **Provide variations to the activity.** Each resident has a different personality, life
experience, and set of interests. Be open to providing variations to the activity to allow
for a resident's individualism to shine through. Variations to each protocol are provided
at the end of each activity description. Some examples include:

- doing the gardening intervention outside on a beautiful spring day;
- encouraging the resident who plays the piano to play some of the songs while you
  sing;
- doing the stretching exercises with colorful dowels or scarves;
- having the resident make his own rules to a card game;
- talking about cooking or planning a party instead of making a pudding dessert.

I. **Try other IPPIs.** If the initially selected IPPI is not working, that is, the resident is unable
to participate, or the resident doesn't enjoy the subject matter or is bored, then choose
another IPPI based on the resident's interests.

J. **Pay close attention to the resident's responses.** As you are engaged in the activity with the
resident, pay attention to the resident's reactions and responses to what you and she are
doing. Particularly watch for nonverbal responses such as eye contact, facial expressions,
gestures, etc., that might give you additional clues as to how the resident is responding to
the activity. The Observed Emotion Rating Scale is helpful for identifying different
expressions of emotion. There is further explanation about this assessment tool in Section
VI. Tracking the Outcome. The scale itself can be found in Appendix D.

K. **Validate the resident's thoughts and feelings.** Reinforce what the resident is saying or
feeling by picking up on any key words or gestures that the resident uses and "echoing"
them back to him or her. For example, if you identify a pleasurable expression of emotion
you may want to comment on that by saying,"I can see you liked that."

L. **If all else fails, talk about anything.** If the resident does not want to continue with the
activity, try changing the subject. Talk about whatever else may interest the resident at
that time, a holiday that's coming up, special family memories, etc.

M. **If the resident becomes agitated, try to calm him or her down.** Before walking away, try
focusing on something other than what you are doing. For example, compliment the
resident on what she is wearing, comment on the weather outside, remind the resident that
you are there to just spend some time together and you could just sit quietly together and
relax. Provide some comforting gestures if the resident is receptive, such as stroking her
her back, holding hands, etc. If the resident continues to be agitated, end the session. See steps for ending the session listed below.

N. Provide continuity of the sessions. Depending on the number of sessions you have predetermined for completion of the intervention, choose an ending point that seems to allow for a natural break in the activity. Remind the resident that even though you have not finished the task or discussion, you will continue the next time you meet. In addition, if you learn that something is working or not working with the completion of the activity, then use that bit of information each time you meet.

O. Ending the session. As you end the activity it is important to give the resident time to process that your time together is over. This is accomplished by telling the resident:

- the session is over...("We have to finish for now.");
- thank you for participating...("I hope you enjoyed our time together as much as I did, thank you for spending some time with me.");
- what is happening next...("Lunch is going to be served soon, so I'll take you to the dining room now.");
- when you'll be back...("We can talk more about this tomorrow. I'll see you then.").

How to End the Intervention:

ENDING THE SESSION
Tell the resident, "We have to stop for now, but I will come back [insert the next day you are scheduled with them] and we can continue then."
Tell the resident what will be happening next (lunch, another activity, dinner, etc.).
Thank the person for spending time with you.
Return the resident to the activity area.

COMPLETE FORM At the end of the session, complete the Observed Emotion Rating Scale indicating what emotions you think the resident expressed during your time together. Give the form to the research assistant.

RETURN MATERIALS Return materials.

REPORT Report any difficulties in doing the intervention to the Nurse Manager or Charge Nurse. The activity therapist is also available for help if you need it.
IV. Individualized Positive Psychosocial Intervention (IPPI) Protocols

Descriptions:

Each IPPI is designed to encourage the participant to make choices appropriate to the level of cognitive impairment, use memory recall skills, and/or create an environment that would stimulate positive emotional experiences and expression. In addition, each intervention is designed to be done in a 10-15 minute period. The following key is included to indicate which impairments might preclude the use of particular protocols.

Key for impairments:

- **Auditory** (for persons who are hard of hearing or deaf)
- **Visual** (for persons with severe visual impairment or blindness)
- **Gross motor** (for persons with severe mobility impairment of legs or objects)
- **Fine motor** (for persons with severe difficulties writing or manipulating objects)
- **Cognitive** (for persons with severe memory or language impairment)
Reminiscing About...

Each "reminiscing about..." protocol is designed to assist the resident in recalling memories centered around his/her participation in that activity. The reminiscing protocols combine the use of props such as photographs, tools, and other paraphernalia associated with the subject matter, and in-depth open-ended questions to stimulate memories and discussion.

The reminiscing subjects are:
- Baseball
- The Beach
- Cars
- Fashion
- Fishing
- Gardening
- Housework
- Movie Stars and Going to the Movies
- Old Time Radio and Early TV
- Pets

Touching Textures:

The "touching textures" protocol is designed for people with an interest in fabrics. The person may have had a vocation in the garment or textile industry, or an interest in sewing as a hobby. This protocol is especially geared towards persons with moderate to advanced dementia where the fabrics are used primarily as a sensory stimulation tool.

Familiar Smells:

The "familiar smells" protocol is geared for persons with moderate to advanced dementia, but can be modified for a more cognitively intact person. This protocol uses lotions, oils, and pictures to invoke verbal and/or physical responses and to stimulate positive emotions as the person recalls memories associated with the smells.

Familiar Sounds:

The "familiar sounds" protocol uses tape recorded sounds heard in everyday life. It is designed to invoke verbal and/or physical responses and to stimulate positive emotions as the person recalls memories associated with the sounds. Photographs depicting or associated with each sound accompanies the tape and are used to assist with identification of the sounds.
Hand Massage:

With the "hand massage" protocol the participant receives a therapeutic hand massage. This protocol is primarily geared towards persons with advanced dementia. Its goal is to improve blood flow through the hands, provide tactile stimulation, and invoke positive emotions associated with being touched in a comforting, soothing way.

Wonders of Water:

The "Wonders of Water" protocol is a sensory stimulation intervention geared towards persons with advanced dementia. It involves using a pan filled with warm water and props of different textures to invoke verbal and/or physical responses and provide a soothing sensory experience.

Exercise Interventions:

The exercise protocols involve basic passive and active range of motion and stretching exercises which can be done by modeling or actual hands-on assistance. The protocols are designed for persons with varying levels of dementia.

The exercise protocols include:

- range of motion
- stretching exercises

Bowling:

The "bowling" protocol uses an adapted bowling set (the bowling ball and pins are actual size, but are a lighter weight than normal). The game can be played in the standard format or by modifying it according to the level of functioning of the participant. It is designed to be used with persons with mild to moderate dementia.

Sing-A-Long to Familiar Songs:

The "sing-a-long to familiar songs" protocol uses tape recorded music, large print song sheets, and rhythm instruments (optional) to encourage the participant to sing, hum, or otherwise respond to the music of his/her choice. It is designed to assist in recalling memories and invoke positive
positive emotions associated with the songs. It is geared towards persons with mild to moderate dementia.

**Active Listening to Music:**

The "active listening to music" protocol is designed for persons with moderate to advanced dementia who have an interest in music but may not participate as actively as in the sing-a-long or folk dancing protocols. This intervention encourages any kind of response to the music (finger or toe tapping, smile, eye contact, etc.), along with the use of rhythm instruments. The person is encouraged to make choices regarding his/her preference of music.

**Folk Dances:**

The "folk dances" protocol uses tape recorded folk dances such as the Hora and the Hokey Pokey to assist the participant in recalling memories and invoke positive emotions regarding past involvement with music and dancing.

**Beauty Time:**

The "beauty time" protocol is designed to enhance the participant's self-esteem and encourage involvement in caring for her appearance. It involves minor hair styling, cosmetic application, and manicure. It can be used with persons in various stages of dementia.

**Checkers:**

The "checkers" protocol is designed for use with persons with mild dementia. It involves using a traditional checkers set and following the rules for the game.

**Card Games:**

The "card games" protocol can be played with persons with mild to moderate dementia. Participants are encouraged to make choices, and decision-making skills are utilized. Suggestions for modifying the activity are included so that this intervention can be implemented regardless of the participant's skill level.
Word Games:

The "word games" protocol is designed to promote memory recall of familiar phrases, song titles, capitals, etc. It is designed for persons with mild to moderate dementia. The participant is given the first part of the phrase, song title, etc., and then is asked to complete it with the appropriate response. Participants are given verbal cues and prompts when needed.

Making a Greeting Card:

The "making a greeting card" protocol is designed for persons with an interest in crafts. It involves simple designing of a blank greeting card and then writing or dictating a note to a significant family member or friend. It is geared towards persons with mild to moderate dementia.

Making a Memory Book:

The making a memory book protocol is designed for persons with an interest in reminiscing on a broader scale about his/her life. It involves putting together a book of memories of the person's life. It does not focus on the accuracy of the information, rather its significance to the participant. Any input from family or friends is helpful.

Cooking Interventions:

The cooking protocols are designed for the person with an interest in cooking, baking, and food preparation. With the lack of resources to actually cook something, the activity has been modified by using kitchen appliances and supplies to make easy no-bake or microwave recipes. Discussion focuses around memories of being in the kitchen, cooking for a family, and holiday cooking, and is encouraged through open-ended questioning. It is geared towards persons with mild dementia.

The cooking protocols are making:
- a blender drink
- a pudding parfait
- peanut butter crispies
- an english muffin pizza
IPPI: Simple reminiscence about baseball

Benefits:
For the participant:
Increases general level of awareness
Stimulates attention span and
Provides pleasant emotional experience
Stimulates memories of baseball
Encourages the expression of emotions
Encourages decision-making
Enhances social interaction skills
Decreases isolation and loneliness
Increases self-esteem
Utilizes verbal receptive and expressive

For the caregiver:
It’s an opportunity:
➢ for an enjoyable one-to-one interaction with the resident.
➢ to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
➢ to assist the resident with memory recall.
➢ to gain understanding of the resident’s history.

Supplies Needed: baseball paraphernalia (can include: baseball hat, glove, ball,

➢ tape player
➢ tape of the song "Take me out to the ball game"
➢ any trivia or facts about baseball, especially from the resident's
PLAY the tape "Take me out to the ball game." Encourage the resident to sing or hum along to the song.

CHOICE Allow the resident to choose what he/she would like to look at first (the baseball, baseball hat, or photo cards). If the resident is unable to choose, then choose something yourself.

ENCOURAGE TOUCHING the objects.

ENCOURAGE DISCUSSION by using the props as visual cues and asking the resident about his/her memories of baseball. Encourage the resident to remember as much as possible.

READ bits of information from the backs of the photo cards.

ASK QUESTIONS You can use the questions on the back of the photo cards or use the suggested questions below:

Did you participate in baseball as a child? In school?
Did you ever participate in "sandlot" baseball?
As a kid, did you collect baseball cards?
Were you able to listen to ball games on the radio?
Who was or is your favorite team?
Did you ever attend any major league games?
What did you enjoy most at the ball park?
Who was or is your favorite ball player?
Who were some of the great baseball players?
Do any of these names sound familiar? What do you remember about them?

Babe Ruth   Yogi Berra   Richie Ashburn
Ty Cobb   Joe DiMaggio   Ted Williams
Jackie Robinson   Lou Gehrig   Sparky Anderson
Hank Aaron   Satchel Paige   Cy Young
Sandy Koufax   "Dizzie" Dean   Hank Greenberg

Variations:

- for persons with severe visual impairment, focus on touching the objects, identifying them by the feel; focus more the discussion and asking questions.
- for persons with severe hearing impairment, use pen and paper to write questions; use a photocopier to enlarge the printed questions; focus on identifying props by sight.
- include a baseball glove in your props and try an easy game of catch.
- include sports trivia questions if the resident is cognitively intact enough to participate.
IPPI: Simple reminiscence about going to the beach

**Benefits:**

**For the participant:**
- Stimulates memories of experiences at the beach
- Encourages the expression of emotions
- Enhances social interaction
- Decreases isolation and loneliness
- Increases self-esteem
- Utilizes verbal receptive and expressive skills
- Provides a pleasant emotional experience
- Utilizes tactile discrimination skills
- Encourages decision-making
- Stimulates attention span and

**For the caregiver:**
- It’s an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
  - to assist the resident with memory recall.
  - to gain understanding of the resident’s history.

**Supplies Needed:**
- container of sand
- seashells (plastic and real)
- sunglasses & sun hat
- suntan lotion

**How to Complete the Individualized Positive Psychosocial Intervention:**

**CHOICE** Present the resident with 2 props from the supplies and ask the resident which one reminds him/her of the beach. If the resident is unable to choose, pick one yourself.

**ENCOURAGE TOUCHING** the objects. Have the resident feel the sand and try to find the shells in the sand.

**ASK** the resident, “How does that feel?” “What does it look like to you?”

**ENCOURAGE DISCUSSION** by asking the resident about his/her memories of going to the beach. Try to encourage the resident to remember as much as possible about the experience.

**ASK QUESTIONS** Some ideas for questions are:
- Do you have fond memories of the beach?
- What beach did you go to?
- What was the beach like? (small, big, crowded, sandy, rocky, color of sand, weather, ...)
- Whom did you go with?
- What did you like best about it?
- What did you like least about it?
- Did you have a picnic there? What did you eat?
- How did you get there?
- Did you ever walk along the beach and collect seashells? Did you make...
Variations:

- for persons with severe visual impairment, focus on the feel and smell of the objects; focus more on the discussion; describe the color, shape, etc. of the objects.
- for persons with severe hearing impairment, use pen and paper to write questions; use a photocopier to enlarge the printed questions; focus on identifying objects by sight.
- include a CD or tape of beach sounds (e.g., ocean waves, seagulls) and play it for the resident.
**IPPI:** Simple reminiscence about cars

**Benefits:**

**For the participant:**
- Increases general level of awareness
- Stimulates attention span and concentration
- Encourages decision-making
- Stimulates memories of experiences with cars
- Encourages the expression of emotions
- Enhances social interaction skills
- Decreases isolation and loneliness
- Increases self-esteem
- Utilizes verbal receptive and expressive skills

**For the caregiver:**
- It’s an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
  - to assist the resident with memory recall.
  - to gain understanding of the resident’s history.

**Supplies Needed:**
- photographs of early model cars
- model of modern car
- maps
How to Complete the Individualized Positive Psychosocial Intervention:

**CHOICE**  Show the resident 2 photographs of early model cars and allow the resident to choose which car he/she would like to discuss first.  If the resident is unable to choose, pick one yourself.

**SHOW**  Continue to show the resident the photos of the early model cars and the model of the modern car.  Encourage the resident to hold the photos or the car, and point out things he/she notices.

**ENCOURAGE DISCUSSION** by asking the resident,"What are some things you see in this picture?"  Ask the resident about his/her memories of these cars.  Other questions to ask include:

- How did you learn to drive?
- How old were you at the time?
- Do you recall your first car?  Describe the car.
- Do you remember the purchase price of your first car?  How did you pay for it?
- Did you ever crank up a car to get it started?  What was that like?  Describe the experience.
- Do you remember the average price of gasoline?
- What kind of service did you get at the gas station?  Oil checked? Windows washed?
- Did your family enjoy Sunday drives in the country?  Was this a weekly family outing?  Where did you usually drive?
- Do you remember drive-in movies?  Were they popular spots to take a date?
- How did drive-in movies compare with theaters?
- What are some differences you notice about the cars today?  (for example, drive faster, more variety of styles & colors, more extra features such as air bags, CD players)

**Variations:**

- for persons with **severe visual impairment**, focus more on the discussion; describe the details of the cars in the photos (e.g., the color, shape, size, etc.).
- for persons with **severe hearing impairment**, use pen and paper to write questions; use a photocopier to enlarge the printed questions.
- use age appropriate coloring books with pictures of antique cars and encourage the resident to color the picture with markers or watercolor paints.
**IPPI:** Simple reminiscence about Fashion

**Benefits:**
For the participant:
- Increases general level of awareness
- Encourages decision-making
- Stimulates attention span and concentration
- Stimulates memories of fads and fashion
- Encourages the expression of emotion
- Provides a pleasant emotional experience
- Enhances social interaction skills
- Decreases isolation and loneliness
- Increases self-esteem
- Utilizes verbal receptive and expressive skills
- Provides tactile discrimination

For the caregiver:
- It’s an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
  - to assist the resident with memory recall and verbal expression.
  - to gain understanding of the resident’s history and culture.

**Supplies Needed:**
- Remembering Fashion photo cards (ELDERGAMES®)
- Fabric swatches
- Other fashion paraphernalia (handbags, hats, etc.)
**How to Complete the Individualized Positive Psychosocial Intervention:**

**CHOICE**  Provide the resident with 2 choices from the fashion categories and ask the resident which one he/she prefers.  If the resident is unable to chose, pick one yourself.

**ASK**  the resident about his/her memories of the different fashions.

**SHOW**  the pictures one at a time.

**READ**  the descriptions on the back of the pictures which explains what each one is.

**ENCOURAGE DISCUSSION**  Encourage the resident to remember as much as possible. Ask questions from the back of each card.  Other ideas for questions are:

- When you were growing up, did women wear make-up?  What was your attitude about wearing make-up?
- Did you ever dress like the women in this picture?
- What kind of clothes did you wear for every day?
- Did women always wear skirts?
- Do you remember when women started wearing pants?  Did you or do you like to wear pants?
- Did a man always wear a jacket and tie every day?
- What would you wear to go out on a date?
- What did you wear to go to synagogue (or church)?
- What is “window-shopping”?  What’s an advantage to window shopping?
- Do you remember knickers?  Bloomers?
- How did you feel when hats went out of style for women?
- Do you think it’s easier to care for clothes today?

**SHOW PROPS**  Use the fashion accessories as additional cues for initiating conversation and reminiscing.

**Variations:**

- for persons with **severe visual impairment**, describe the fashions in the photos, use specific names of clothing (on back of photo cards) as cues; use more fashion props and encourage the resident to touch the objects, identify the feel, etc.

- for persons with **severe hearing impairment**, use pen and paper to communicate; use a photocopier to enlarge the printed questions; focus more on visual cues and tasks.

- look at some of the resident's old photographs and point out fashions and fads of his/her own.
IPPI: Simple reminiscence about fishing

Benefits:
For the participant:
- Increases general level of awareness
- Provides a pleasant emotional experience
- Encourages decision-making
- Stimulates attention span and concentration
- Stimulates memories of fishing
- Encourages the expression of emotions
- Enhances social interaction skills
- Decreases isolation and loneliness
- Increases self-esteem
- Utilizes verbal receptive and expressive skills

For the caregiver:
- It’s an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident’s emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
  - to assist the resident with memory recall and verbal expression.
  - to gain understanding of the resident’s history.

Supplies Needed:
- fishing gear (e.g., reel, weights, hat, net)
- novelty fish
- pictures of people with prize fish
- pictures of fish, fishing spots
CHOICE  Provide the resident with 2 fish props and ask the resident which one reminds him/her of fishing. If the resident is unable to choose, pick one yourself.

ENCOURAGE TOUCHING the objects. Ask the resident about the sight and feel of the objects.

ASK the resident questions about his/her memories of fishing. Try to encourage the resident to remember as much as possible about the experience. Some ideas for questions are:

Did you ever go fishing? As a child? As an adult?
What did you use for a fishing pole? Was it ever a stick with a piece of string on it?
Where were your favorite fishing places?
What were they like?
Whom did you fish with? (as a child, as an adult)
What kind of lures/bait did you use? worms? chicken livers?
Who cleaned the fish you caught?
Did you ever do a long fishing trip? Where did you go? Who did you go with?
What was the biggest fish you ever caught?
What's your best "fish story?"
Do you like to eat fish?
What's your favorite kind of fish to eat?
Is there a special way of serving it, or any special dish you made?

Variations:

for persons with severe visual impairment, describe the objects he/she is holding.

for persons with severe hearing impairment, use paper and pen to communicate; use a photocopier to enlarge printed questions; use visual aids and gestures.
**IPPI: Simple reminiscence about Gardening**

**Benefits:**

*For the participant:*
- Increases general level of awareness
- Stimulates attention span and concentration
- Encourages decision-making
- Provides a pleasant emotional experience
- Stimulates memories of gardening activities
- Encourages the expression of emotion
- Enhances social interaction skills
- Decreases isolation and loneliness
- Increases self-esteem
- Utilizes verbal receptive and expressive skills

*For the caregiver:*
- It’s an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
  - to assist the resident with memory recall and verbal expression.
  - to gain understanding of the resident’s history.

**Supplies Needed:**
- pictures of flowers with the name of each flower and any facts about each flower
- gardening gloves and tools
- silk flowers

**How to Complete the Individualized Positive Psychosocial Intervention:**

**CHOICE**  Present 2 items from the gardening reminiscing kit and ask which one reminds him/her of gardening. If the resident is unable to choose, pick one yourself.

**ASK**  the resident about his/her memories of the items. Ask, "Do you know what this is?" "do you know what this is used for?"

**SHOW**  the pictures of the flowers one at a time

**ASK**  questions like, "Looking at these pictures, what colors do you see? Which of these pictures do you like best? Why?"

**ENCOURAGE DISCUSSION**  Encourage the resident to remember as much as possible about gardening activities. Questions to ask to stimulate discussion include:
- What did you grow in your garden? (flowers? vegetables?)
- What are your favorite flowers?
- What kind of houseplants do you or did you have?
- Did you name your plants or talk to them?
- Can you name some other things that can grow in a garden? Could you identify what that was?
Variations:
- weather permitting, sit outside near a garden and reminisce.
- if you have a greenhouse sit in there to reminisce.
- use live plants, flowers, vegetables, and fruits for reminiscing and additional sensory stimulation.
- for persons with severe hearing impairment, use gestures, visual aids, and pen and paper to communicate; use a photocopier to enlarge the printed questions.
- for persons with severe visual impairment, focus on the feel and smell of the props; describe the colors in the pictures.
IPPI: Simple reminiscence about Housework

Benefits:
For the participant:
Increases general level of awareness
Stimulates attention span and concentration
Encourages decision-making
Stimulates memories of doing housework
Encourages the expression of emotion
Enhances social interaction skills
Decreases isolation and loneliness
Utilizes verbal receptive and expressive skills
Provides a pleasant emotional experience
Increases self-esteem

For the caregiver:
• It’s an opportunity:
  ➢ for an enjoyable one-to-one interaction with the resident.
  ➢ to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
  ➢ to assist the resident with memory recall and verbal expression.
  ➢ to gain understanding of the resident’s history and culture.

Supplies Needed:
- laundry basket
- towels and clothes
- photos of items associated with

Variations:
❖ for persons with severe visual impairment, focus on the feel and smell of the props; describe the items in the pictures, give clues as to what they’re used for, and encourage the resident to identify what you are describing.
❖ for persons with severe hearing impairment, use pen and paper to communicate; use a photocopier to enlarge the printed questions.
❖ include other household items as props in your kit, such as an old wooden ironing board, wash tub, scrubbing board, mop, etc.
❖ try other tasks if resources are available to you (keeping in mind resident ability and safety precautions); for example, wiping tables, dusting, sweeping the floor, ironing a shirt, washing and drying dishes, doing a load of laundry.
SHOW Begin by showing the resident the laundry basket with the unfolded towels and clothes.
ASK the resident about his/her memories of housework. What were some of the chores you did?” (Most women of the resident’s generation did all the housework such as washing, ironing, dusting, scrubbing floors, vacuuming, etc.) “What was involved in spring cleaning?”

CHOICE Give the resident the choice between looking at the pictures of household items or folding the laundry. If the resident is unable to choose, pick one yourself. If time allows, do both as explained below.
SHOW the resident the photos of household items. Present the photos one at a time and pause at each photo while you ask questions.
ASK questions about each picture. For example,
“Do you know what this is?”
“Do you know what it’s used for?”
“Did you ever use one of these before?”
SHOW the resident the laundry basket full of clothes and towels
FOLD Ask the resident if he/she would be willing to help you fold the clothes/towels.
While you are folding the clothes, continue asking questions about doing housework.

ENCOURAGE DISCUSSION by asking some of the questions below:
What day was wash day in your house? (for most people it was Monday)
Did you ever use a washboard? If so, was it hard on your fingers?
What did you use for soap?
Did you ever use a wringer washer?
Did you ever boil your clothes?
Where did you hang your clothes to dry? How about in the winter time?
Did your family have a hired laundress? Or a laundry service?
If you had a service, when did they pick up and drop off the laundry?
What day was ironing day? (usually Tuesday)
Was starch used heavily on clothing?
Do you remember the early irons? Ones that had to be heated on the stove?
Do you remember your first electric iron?
What kinds of things did you iron?
How did you clean your rugs before the invention of a vacuum cleaner?
Did you ever have to use a rug beater? Do you remember what it looked like?
Were all the rooms of your house covered by rugs or were some floors bare?
Do you recall early electric vacuum cleaners? What were they like?
**IPPI: Simple reminiscence about Movie Stars and Going to the Movies**

**Benefits:**

For the participant:
- Increases general level of awareness
- Encourages decision-making
- Stimulates attention span and concentration
- Stimulates memories of movie stars and going to the movies
- Encourages the expression of emotion
- Enhances social interaction skills
- Decreases isolation and loneliness
- Increases self-esteem
- Utilizes verbal receptive and expressive skills

For the caregiver:

It’s an opportunity:
- for an enjoyable one-to-one interaction with the resident.
- to increase knowledge of the resident’s emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
- to assist the resident with memory recall and verbal expression.
- to gain understanding of the resident’s history and culture.

**Supplies Needed:**

- photo cards of movie stars and ELDERGAMES®
- other movie paraphernalia (tickets, pictures, movie posters, etc.)

**CHOICE**  Provide the resident with 2 choices from the movie star categories and ask the resident which one he/she prefers. If the resident is unable to choose, pick one yourself.

**SHOW**  the pictures one at a time.

**ASK**  the resident about his/her memories of the different movie stars in the picture.

**READ**  the descriptions on the back of the pictures which explains what each one is.

**ENCOURAGE DISCUSSION**  Encourage the resident to remember as much as possible. Ask questions from the back of each card. Other ideas for questions are:
- Did you like going to movies when you were younger?
- Who were your favorite movie stars?
- What kinds of movies did you like best? (Musical, Comedy, Romance, Mystery, Western)
- What did it cost to go to the movies?
- Whom did you go to the movies with?
- Do you remember when movies didn't have any sound (silent films)? What were they like? How long did they last?
How to Complete the Individualized Positive Psychosocial Intervention:

Variations:

- for persons with **severe hearing impairment**, use paper and pen to communicate; use a photocopier to enlarge the printed questions.
- without showing the photo, read the information on the back of the card and give verbal clues to encourage the resident to guess whom you may be talking about.
IPPI: Reminiscing about Old Time Radio Shows & Early TV

Benefits:
For the participant:
Increases general level of awareness
Stimulates attention span and concentration
Stimulates memories of radio programs and early TV
Encourages the expression of emotion
Enhances social interaction skills
Decreases isolation and loneliness
Increases self-esteem
Utilizes verbal receptive and expressive skills
Utilizes auditory acuity skills

For the caregiver:
It’s an opportunity:
➢ for an enjoyable one-to-one interaction with the resident.
➢ to increase knowledge of the resident’s emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
➢ to assist the resident with memory recall and verbal expression.
➢ to gain understanding of the resident’s history and culture.

Supplies Needed:

- Taped segments of old time radio shows
- Tape player
- Radio and early TV photo cards (Eldergames® Leisure Time)

Variations:

✦ for persons with severe hearing impairment, use pen and paper to communicate; use a photocopier to enlarge the questions to ask; do not use the tape.
✦ show video clips of early TV shows (e.g., Honeymooners, Ed Sullivan, I Love Lucy).
How to Complete the Individualized Positive Psychosocial Intervention:

**CHOICE** Give the resident the choice between looking at the photo cards or listening to the tape. If the resident is unable to choose, pick one yourself. Depending on what the resident chooses to do first, follow the directions below:

**PLAY** the tape. Each radio show segment lasts 30-45 seconds.

**PAUSE** the tape after each segment and ask the resident, "Did that sound familiar? Does it remind you of anything?" "Do you remember that show?"

**OR**

**SHOW** the resident the photo cards, and ask the resident, "What do you see in this picture?"

**VARY** You can vary what you are doing by alternating playing the tape, asking questions, and showing the photo cards.

**ENCOURAGE DISCUSSION** Encourage the resident to remember as much as possible by asking questions such as:

- When you were growing up, did your family own a radio?
- What did it look like?
- What were your favorite shows?
- How many channels could you get?
- Who were your favorite radio personalities?

Some names include:

Ed Wynn  Will Rogers  Jimmy Durante
Burns & Allen  Jack Benny  Eddie Cantor
Groucho Marx  Rudy Vallee  Kate Smith

Do you have a radio today? What do you listen to?

The Guiding Light was the first soap opera that went from radio to TV; Did you ever hear the show?

Do you remember the first time you saw a T.V.?

- What did it look like?
- How was the screen shaped? Was it round or rectangular?
- When did you get your first T.V. set?
- Did you ever put a plastic sheet over the screen that was green and blue and red?
- Do you remember any early programs?
- Who was Charlie McCarthy? (He was a wooden dummy controlled by Edgar Bergen)
- What was Jimmy Durante’s most prominent feature? (his big nose)
- Who was known as Mr. Television? (Milton Berle)
IPPI: Simple reminiscence about pets

**Benefits:**

*For the participant:*
- Increases general level of awareness
- Stimulates attention span and concentration
- Encourages decision-making
- Provides a pleasant emotional experience
- Stimulates memories of his/her pet
- Encourages the expression of emotion
- Enhances social interaction skills
- Decreases isolation and loneliness
- Increases self-esteem
- Utilizes verbal receptive and expressive skills
- Provides tactile stimulation

*For the caregiver:*
- **It's an opportunity:**
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
  - to assist the resident with memory recall and verbal expression.
  - to gain understanding of the resident’s history.

**Supplies Needed:**
- imitation dog fur and lamb's wool
- dog toy catnip toy
- curry comb
- cat collar
- dog bones
- food dish
- dog brush
- laminated photos of pets
How to Complete the Individualized Positive Psychosocial Intervention:

**CHOICE**  Provide the resident with 2 props and ask the resident if either one reminds him/her of a pet. If the resident is unable to choose, pick one yourself.

**ENCOURAGE TOUCHING** the props. Ask the resident about the sight, smell, and feel of the objects.

**ASK** the resident questions about his/her own pets. Try to encourage the resident to remember as much as possible about the pet. Some ideas for questions are:
- Did you ever have a cat/dog/bird as a pet?
- What was your pet's name?
- How did your pet get its name?
- What color was it?
- What was it's fur like? Was it like this [show fur prop]?
- Where did you get it?
- What did you like best about this pet?
- What was your favorite thing to do with this pet?
- Did you ever brush your pet [show curry comb]?
- What was your pet's favorite thing to do?
- Did your pet have any toys like these?
- Are there any special tricks your pet could do?
- Do you know any amusing stories about you (or someone else) and a pet?
- What is your favorite type of dog/cat?

**Variations:**

- for persons with **severe visual impairment**, focus on the feel and smell of the objects; focus more on the discussion; describe the color, shape, etc. of the objects.
- for persons with **severe hearing impairment**, use pen and paper to write questions; use a photocopier to enlarge the printed questions; focus on identifying objects by sight.
- if you have a resident pet, bring it along and include in your program.
**IPPI: Touching Textures**

**Benefits:**
For the participant:
- Increases general level of awareness
- Stimulates attention span and concentration
- Encourages decision-making
- Stimulates memories with different fabric textures and patterns
- Encourages the expression of emotion
- Utilizes tactile discrimination skills
- Encourages texture discrimination
- Provides tactile stimulation
- Enhances social interaction skills
- Decreases isolation and loneliness
- Provides a pleasant emotional experience
- Utilizes fine motor movement and coordination

For the caregiver:
- It’s an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
  - to assist the resident with memory recall and verbal expression.

**Supplies Needed:** bound fabric swatches of varied colors and textures
How to Complete the Individualized Positive Psychosocial Intervention:

**WASH HANDS**  It is a good idea to have the person wash his/her hands before handling the fabrics.

**OFFER** the person pieces of material, one at a time. Allow the person time to feel the texture. (Limit the number of pieces of material to about 3-5 per session.)

**ENCOURAGE DISCUSSION**  Encourage discussion about the fabric by asking the resident:

- What does it feel like?
- Does it feel good?
- Does it feel soft or rough?
- What does it remind you of?
- Did you ever wear something made of this in the past?
- What could be made using this fabric? (dress? tablecloth? curtains? trousers?)

**ENCOURAGE TOUCHING**  Along with talking about "feeling" the object and "seeing" the colors it is important to encourage touching and holding the material.

**MODEL BEHAVIOR**  If necessary, model the behavior for the resident. Hold the material and rub it between your fingers. Touch the fabric to your own cheek and then to the resident's, especially if he/she appears to be enjoying the texture.

Variations:

- for persons with **severe visual impairment**, focus on the feel of the objects; describe the colors and patterns in the material.
- for persons with **severe hearing impairment**, use paper and pen to communicate; use a photocopier to enlarge the printed questions.
**IPPI:** Sensory Stimulation with familiar smells

**Benefits:**
For the participant:
- Provides a pleasant emotional experience
- Increases general level of awareness
- Encourages expression of emotions
- Stimulates memories of familiar smells
- Stimulates attention span and concentration
- Utilizes olfactory discrimination skills
- Stimulates olfactory sense
- Enhances social interaction skills
- Decreases isolation and loneliness

For the caregiver:
- It's an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning.

**Supplies Needed:**
- scented lotions and oils
- cotton balls
- pictures and/or props associated with the smells
How to Complete the Individualized Positive Psychosocial Intervention:

**CHOICE**  Begin by showing the resident the bottles with the scented lotions and oils. Pick 2 scents and ask the resident to choose 1. Put that one aside. Then pick 2 more and ask the resident to choose 1. If the resident is unable to choose, then pick 2 yourself. **REMIND** the resident of the 2 scents he/she selected. **LOTIONS** can be rubbed on the back of the resident's hand (if he/she agrees). **OILS** are only to be dabbed onto the cotton ball. Do not rub onto the skin. **PRESENT** one scent at a time, and ask the resident, "What does this smell like?"

**ASK QUESTIONS** to encourage discussion. Questions to ask can include:
- Does this smell remind you of anything?
- Does it bring any memories to your mind?
- Is it a pleasant or unpleasant smell for you?

**SHOW PICTURE OR PROP** If there is a corresponding picture or prop for that smell, show it to the resident after he/she has tried to identify the smell. **CONTINUE** with the next smell. For each session, use only 4-5 scents.

**Variations:**

- for persons with **severe hearing impairment**, use pen and paper to communicate with him/her; use a photocopier to enlarge the printed questions.
- do not exceed 4-5 smells, and allow enough time between presenting different smells.
- for persons with **severe cognitive impairment**, show the picture or prop first, then present the scent.
**IPPI: Sensory Stimulation with familiar sounds**

**Benefits:**
- For the participant:
  - Provides a pleasant emotional experience
  - Increases general level of awareness
  - Stimulates attention span and concentration
  - Encourages decision-making
  - Stimulates memories associated with familiar sounds
  - Encourages the expression of emotion.
  - Decreases isolation and loneliness
  - Enhances social interaction
  - Utilizes auditory acuity skills
  - Stimulates memories associated with the sounds

- For the caregiver:
  - It's an opportunity:
    - for an enjoyable one-to-one interaction with the resident.
    - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
    - to learn more about the resident's history and culture.

**Supplies Needed:**
- tape player
- tape of familiar sounds, preferably grouped into categories (for example: animals, nature, famous people's voices, home, etc.)
How to Complete the Individualized Positive Psychosocial Intervention:

**CHOICE**  Pick 2 categories of sounds and encourage the resident to choose which category of sounds he/she would like to listen to. If the resident is unable to choose, then pick one yourself.

**PLAY** the first sound.

**PAUSE** the tape after the sound.

**ASK** the resident questions about the sound.

Some questions you can ask are:
- What sound do you hear?
- Is it loud? soft? high-pitched? steady?
- When would you hear this sound?
- Does this sound remind you of anything?
- Do you like this sound?
- What memories does this sound bring to you?

**SHOW PICTURE**  If there is a corresponding picture for that sound, show it to the resident after you have asked the questions. It is particularly helpful to do so if the resident is unable to identify the sound.

**CONTINUE** playing the rest of the sounds in that category, pausing the tape after the sound, asking the above questions again, and showing a corresponding picture.

**Variations:**

- you may decide not to use the pictures at all and not focus on a correct response. Focus on what the resident is reminded of when he/she hears the sound. This allows for a failure-free experience for the resident, and may even stimulate interesting answers.
- for persons with severe cognitive impairment, show the picture first, and then play the sound.
- for persons with a severe visual impairment, use verbal cues to assist in identifying the sound.
IPPI: Hand massage

Benefits:
For the participant:
- Stimulates memories
- Stimulates circulation in the hands
- Provides tactile stimulation
- Encourages the expression of emotion
- Decreases isolation and loneliness
- Increases general level of awareness
- Reduces stress
- Enhances social interaction skills
- Facilitates relaxation
- Encourages decision-making
- Stimulates attention span and concentration
- Provides a pleasant emotional experience

For the caregiver:
- It’s an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.

Supplies Needed:
- scented lotions
- CD/tape player
- CD/tapes of quiet music (sounds of nature, classical music, etc)

Variations:
- describe what you are doing as you are doing it.
- weather permitting, sit outside to do the massage (as long as it is relaxing for the resident).
How to Complete the Individualized Positive Psychosocial Intervention:

**BEFORE** beginning the massage remove all rings, then wash the resident’s and your hands thoroughly.

**CHOICE** Present the resident with 2 choices of scented lotions and ask the resident which lotion he/she prefers for the hand massage. If the resident is unable to choose, then pick one yourself.

**CHOICE** Present the resident with 2 choices of music to listen to during the massage. If the resident is unable to choose, then pick one yourself.

**BEGIN** Follow the steps below for giving a hand massage:

**Note:** Do not massage any injured, reddened or swollen area of the hand.

**BACK OF HAND**
- Use short to medium length, straight strokes from the wrist to the fingertips using moderate pressure
- Then use large half-circular strokes from center to side of hand using moderate pressure
- Next use small circular strokes over the entire back of the hand using light pressure (making little O's with your thumb)
- Finally use featherlike straight strokes from wrist to fingertips using very light pressure

**PALM**
- Use short to medium length straight strokes from the wrist to the fingertips using moderate pressure
- Then go over the entire palm, gently lifting the tissue using moderate pressure.
- Next use small circular strokes over the entire palm of the hand using moderate pressure (making little O's)
- Finally, use large half-circular stretching strokes from the center of the palm to the sides using moderate pressure.

**FINGERS**
- Gently squeeze each finger from the base to the tip on the sides and top/bottom using light pressure
- Gently use circular range of motion on each finger followed by a gentle squeeze of the nail bed

**END**
- Lay the resident's hand on yours and cover it with your other hand. Gently draw your top hand toward you several times. Turn the resident's hand over and gently draw the other hand toward you several times.

**REPEAT** with the other hand.

**ENCOURAGE DISCUSSION** During the interaction encourage discussion by asking the resident:

- How does this feel?
- Have you ever had a hand massage before?
- Is this soothing or relaxing?
IPPI: WOW: Wonders of Water

by Creative Forecasting, Inc.

Benefits:
For the participant:
Increases general level of awareness
Stimulates attention span and concentration
Utilizes fine motor movement and
Improves circulation in hands
Provides tactile stimulation
Utilizes tactile discrimination skills
Encourages expression of emotions
Stimulates memories
Provides a pleasant emotional experience
Decreases loneliness and isolation
Enhances social interaction
Encourages decision-making

For the caregiver:
It's an opportunity:
 for an enjoyable one-to-one interaction with the resident
 to increase knowledge of the resident’s emotional reactions to pleasant events which can be communicated to the team in care planning meetings.

Supplies Needed:
foil container or plastic basin  seashells  coral  sponges
bottles of bubbles  warm water  towels

Variations:
 for persons with severe visual impairment, focus on the feel of the objects; describe the colors, shapes, etc.
**IPPI: Stretching Exercises**

How to Complete the Individualized Positive Psychosocial Intervention:

**SET UP** the foil pan with supplies on a table in front of the resident.

**CHOICE** Encourage the resident to choose one of 2 items from the table to look at and feel. If the resident is unable to choose, then pick one yourself.

**ASK QUESTIONS** Encourage the resident to talk about the item he/she chose. Questions to ask can include:
- Why did you choose that item?
- What do you like about it?
- What does it remind you of?
- How does it feel?

**PLACE HANDS IN WATER** Encourage the resident to put his/her hands in the warm water. Say to the resident, "Feel the warmth and the soothing touch of the water on your hands and fingers."

**ADD PROPS** Begin adding more props to the pan.

**TOUCH SPONGES** Encourage the resident to touch the sponges. Say to the resident, "Look for the brightly colored sponges under the water. Reach for them. Squeeze them with your fingers."

**ASSIST** the resident in finding, touching, and or squeezing the sponges, if he/she needs assistance.

**TOUCH SHELLS** Encourage the resident to find the sea shells. Say to the resident, "Let's search for a sea shell. Look at its beautiful color and shape. Is it smooth? Is it hard?"

**ASSIST** the resident if needed.

**TOUCH CORAL** Say to the resident, "Next we will find the coral. Look at its shape and color. Feel it. Is it rough?"

**COMPARE** the textures of the different items. Ask the resident if he/she notices the differences.

**ADD BUBBLES** to the pan. Say to the resident, "Splash the water, like this, and watch the bubbles appear."

**DRY HANDS** Dry the resident's hands.
**Supplies Needed:**  
ape player  
audiotapes with background music

**Benefits:**

**For the participant:**
- Increases general level of awareness
- Encourages decision-making
- Provides a pleasant emotional experience
- Encourages expression of emotion
- Strengthens muscles
- Improves circulation
- Increases endurance
- Utilizes gross motor coordination
- Utilizes fine motor movement and coordination
- Stimulates attention span and concentration
- Provides outlet for self-expression through movement
- Enhances social interaction skills
- Decreases isolation and loneliness

**For the caregiver:**
- It's an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.
  - to gain understanding of the resident's history and culture

**Variations:**

- ask the resident if he/she has an idea for an exercise and try it.
- weather permitting, sit outside (in a shaded area) and do the exercises.
How to Complete the Individualized Positive Psychosocial Intervention:

1. Take 3-4 slow, deep breaths each for a count of eight.
2. Neck rotation: move chin from one shoulder to chest to other shoulder (2x, for a 4 count)
3. Chin lift: lift chin up and down slowly (1x, 8 count)
4. Ear to shoulder: lay one ear on your shoulder and then alternate (1x, 8 count)
5. Head turn: turn head to the right, then left (1x, 8 count)
6. Shoulder circles: move shoulders in circles, first forward, then backward. (1x each way, 8 count)
7. Shoulder lift: lift shoulder up toward your ears, then relax (1-2x, 8 count)
8. Rub shoulders: rub your left shoulder with your right hand (or rub the resident's shoulder for them if they can't do it) (1x, 8 count)
9. Arm reaches: reach arms to the ceiling, then out in front of you, then to the side, and finally, to the floor. (2-3x, 4 count)
10. Arm lift: lift arms up and down in front of you (like you are bowing) (1-2x, 8 count)
11. Arm circles: place arms out at your side and circle forward, then backward. (1-2x each way, 8 count)
12. Shoulder touch: extend arms out from your side, touch your own shoulders, then reach out (1-2x, 8 count)
13. Wrist circles, first one way, then reverse. (1-2x each way, 8 count)
14. Wrist stretches: up and down (2-3 x, 8 count)
15. Open and close fists (1-2x, 8 count)
16. Piano: move fingers as if you were playing a piano
17. Partner clap: sit across from the resident and clap hands with them (1-2x, 8 count)
18. Knee lifts: alternate lifting first one knee, then the other (2-3x, 8 count)
19. Kick: first kick out one leg, then the other (2-3x each leg, 8 count)
20. Marching: march in time with the music (2-3x, 8 count)
21. Ankles circles: circle ankle one way, then reverse direction (1-2x each way, 8 count)
22. Heel, toe: touch floor with heels, then toes (1-2x, 8 count)
23. Leg cross over: cross at ankles (1-2x, 8 count)
How to Complete the Individualized Positive Psychosocial Intervention:

**CHOICE** Offer the resident a choice of 2 types of music. Encourage the resident to choose, but if he/she is unable to, pick one yourself.

**PLAY** Turn the tape on and begin with deep breathing exercises.

**MODEL BEHAVIOR** Refer to the step-by-step sequences of exercises. Encourage the resident to do what you are doing. Demonstrate first if necessary.

**HELP** the resident gently move his/her head, arms, hands, and legs, if necessary.

**ASK** questions about exercise, like:
- What kind of exercise have you done in the past?
- What is your favorite sport? athlete?
- What are some of the benefits of stretching?
- Where else do you use some of these movements? (daily activities like dressing, reaching for objects)
- Which exercise feels the best?
- When is your favorite time to exercise?
- Why do you think exercise is so popular today?

*The resident may not do all of the exercises in one session. It is alright to do only some of the exercises in one session and others in another session.*
Breathing

Benefits:
For the participant:
- Increases general level of awareness
- Stimulates attention span and concentration
- Provides a pleasant emotional experience
- Encourages decision-making
- Strengthens muscles
- Improves circulation
- Increases strength and endurance
- Enhances social interaction skills
- Decreases isolation and loneliness

For the caregiver:
- It's an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.

Supplies Needed:
- tape player
- audiotapes with background music
- exercise sequence card

Variations:
- ask the resident if he/she has an idea for an exercise and try it.
- for persons with severe visual impairment, use more verbal cues and hands on assistance.
- weather permitting, sit outside (in a shaded area) to do the exercises.

1. Take 3-4 slow, deep breaths each for a count of eight.

Head
2. Eyes: (without moving the head) look up, down, right, left, open wide, close tightly.
3. Mouth: pantomime kissing, fill cheeks with air, press air out of cheeks with hands.
4. Neck: lower head, gently massage back of neck, let head fall to each side, massage side of neck.
5. Neck: move head slowly up and down, then side to side
6. Face: gently massage face, like putting on lotion.

Hand and Arm
7. Hand: make a fist with both hands; relax.
8. Arm Rotations: extend arms forward; rotate from shoulder so palms alternate from up to down position.
9. Wrist: circle wrists clockwise; counterclockwise; arms may be at side or bent at elbow with hands chest-high.
10. Shoulders: shrug shoulders up and down; alternate; then both together
11. Arm Lifts: lift one or both arms while inhaling; lower arms while exhaling; increase the height in waves: start a few inches above the knees; continue to shoulder height or above.
12. Arm circles: arms at side or in front, elbows straight; make circles moving from the shoulders; change size of circle and direction for variety.
Range of Motion

Benefits:
For the participant:
- Increases general level of awareness
- Encourages expression of emotions
- Provides a pleasant emotional experience
- Stimulates memories of playing games
- Encourages decision-making
- Stimulates attention span and concentration
- Encourages problem-solving
- Utilizes eye-hand coordination
- Strengthens muscles
- Improves circulation
- Increases endurance
- Utilizes gross motor coordination of arms
- Enhances social interaction skills
- Decreases isolation and loneliness

For the caregiver:
- It’s an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident's emotional reactions to pleasant events which can be communicated to the team in care planning meetings.

Variations:

- ask the resident if he/she has an idea for an exercise and try it.
- for persons with **severe visual impairment**, use more verbal cues and hands on assistance.
- weather permitting, sit outside (in a shaded area) to do the exercises.

Supplies Needed:
- tape player
- audiotapes with background music
- exercise sequence card
1. Take 3-4 slow, deep breaths each for a count of eight.
2. **Head**
   3. Neck rotation: move chin from one shoulder to chest to other shoulder (2x, for a 4 count)
   4. Chin lift: lift chin up and down slowly (1x, 8 count)
   5. Ear to shoulder: lay one ear on your shoulder and then alternate (1x, 8 count)
   6. Head turn: turn head to the right, then left (1x, 8 count)
3. **Arms**
   8. Shoulder circles: move shoulders in circles, first forward, then backward. (1x each way, 8 count)
   9. Shoulder lift: lift shoulder upward to your ears, then relax (1-2x, 8 count)
   10. Rub shoulders: rub your left shoulder with your right hand (or rub the resident's shoulder for them if they can't do it) (1x, 8 count)
   11. Arm reaches: reach arms to the ceiling, then out in front of you, then to the side, and finally, to the floor. (2-3x, 4 count)
   12. Arm lift: lift arms up and down in front of you (like you are bowing) (1-2x, 8 count)
   13. Arm circles: place arms out at your side and circle forward, then backward. (1-2x each way, 8 count)
   14. Shoulder touch: extend arms out from your side, touch your own shoulders, then reach out (1-2x, 8 count)
4. **Wrist and Hands**
   16. Wrist circles, first one way, then reverse. (1-2x each way, 8 count)
   17. Wrist stretches: up and down (2-3 x, 8 count)
   18. Open and close fists (1-2x, 8 count)
   19. Piano: move fingers as if you were playing a piano
   20. Partner clap: sit across from the resident and clap hands with them (1-2x, 8 count)
5. **Legs**
   22. Knee lift: alternate lifting first one knee, then the other (2-3x, 8 count)
   23. Kick: first kick out one leg, then the other (2-3x each leg, 8 count)
   24. Marching: march in time with the music (2-3x, 8 count)
   25. Ankles circles: circle ankle one way, then reverse direction (1-2x each way, 8 count)
   26. Heel, toe: touch floor with heels, then toes (1-2x, 8 count)
   27. Leg cross over: cross at ankles (1-2x, 8 count)
IPPI: Bowling
How to Complete the Individualized Positive Psychosocial Intervention:

**CHOICE** Offer the resident a choice of 2 kinds of music and ask which he/she would prefer. If the resident is unable to choose, pick one yourself.

**PLAY** Turn the tape on and begin with deep breathing exercises.

**MODEL BEHAVIOR** Refer to the step-by-step sequences of exercises. Encourage the resident to do what you are doing. Demonstrate first if necessary.

**HELP** the resident gently move his/her head, arms, and hands if necessary.

**ASK** questions about exercise, like
- What kind of exercise have you done in the past?
- What is your favorite sport? athlete?
- Which exercise feels the best?

*THE RESIDENT MAY NOT DO ALL OF THE EXERCISES IN ONE SESSION. IT IS ALRIGHT TO DO ONLY SOME OF THE EXERCISES IN ONE SESSION AND OTHERS IN ANOTHER SESSION.*
Benefits:
For the participant:
- Increases general level of awareness
- Encourages expression of emotions
- Provides a pleasant emotional experience
- Stimulates memories of playing games
- Encourages decision-making
- Stimulates attention span and concentration
- Encourages problem-solving
- Utilizes eye-hand coordination
- Strengthens muscles
- Improves circulation
- Increases endurance
- Utilizes gross motor coordination of arms
- Enhances social interaction skills
- Decreases isolation and loneliness

Supplies Needed: adapted bowling set

For the caregiver:
- It’s an opportunity:
  - for an enjoyable one-to-one interaction with the resident.
  - to increase knowledge of the resident’s emotional reactions to pleasant events which can be communicated to the team in care planning meetings.

Variations:
- Simplify the activity by only using 5 pins instead of all 10.
- For persons with severe cognitive impairment, hand-on-hand assistance may be needed.
- If the person was a serious bowler in the past you may want to consider keeping score the professional way.
- For persons with severe hearing impairment, use visual cues and pen and paper to write directions; use a photocopier to enlarge the printed questions.
- Include sports trivia questions if the resident is cognitively intact enough to participate.

How to Complete the Individualized Positive Psychosocial Intervention:

**CHOICE** Begin by giving the resident the choice of having the pins set up in either a bowling format or in a small circle in front of the resident. If the resident is unable to choose, pick a format yourself. Keep in mind the resident’s functional level.

**SET UP** the pins in front of the resident

**PLAY** Give the resident 2 chances to knock down the pins. If you want to keep score, give one point for each pin knocked down.

**ASK** Questions to ask the resident as you play or after you play a couple of rounds:
- Have you ever bowled before?
- Tell me about your best experience bowling?
- Have you ever watched bowling tournaments on TV?
- Have you ever played any other sport? What was it?
- Were you good at it?
- Do you like to watch sports on TV? Which ones?