

# Meaningful Life & Engagement / Enriching Connections Through Non-Pharmacological Approaches

Nebraska Health Care Association / Webinar Series 1 of 6

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## Session Objectives:

- Define CMS' guidelines and standards of practice for non-pharmacological approaches
- Define non-pharmacological interventions and how to incorporate into an IDT care plan
- Identify 3 life enrichment programs for Memory Care
- Identify 3 ways how memory and cognitive impairment affects living a Quality of Life
- Identify 3 ways communication barriers and guidelines for connecting to those with memory loss
- Define 3 ways to incorporate effective verbal and physical approaches when engaging individuals with cognitive impairment
- Identify 3 activity ideas to incorporate into your daily calendar and routine

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## Quality Indicators

- Quality Indicators
  - Pain Management
  - Behaviors
    - What does the person need
    - What is she/he trying to communicate to us
  - Mood
    - Anxiety / Depression
  - Sleep Disorders

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## CMS Guidelines & Standards of Practice

- Quality of Life: §483.24
  - Fundamental principle that applies to all care and services provided *to residents to enable them to attain or maintain highest practicable well-being*
- Comprehensive **Person-Centered** Care Plan: **§483.21**
- F-Tag 639 / **48-Hour** Baseline Care Plan
  - Incorporates the resident's goals, preferences, and services that are to be furnished to attain or maintain the resident's highest practicable physical, mental, and psychosocial well-being
  - To provide effective, person-centered care starting at admission

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## CMS Guidelines & Standards of Practice Continued:

- Quality of Care: §483.25
  - Fundamental principle that applies to all care and services provided *to residents to enable them to attain or maintain highest practicable well-being*
  - F-Tag 757
    - Requires that “Residents who use antipsychotic drugs receive gradual dose reductions and behavioral interventions, unless clinically contraindicated, in an effort to discontinue these drugs.”

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## CMS Guidelines & Standards of Practice Continued:

- Behavior Health: §483.40 (**New Requirement**)
  - Each resident must receive and the facility must provide the necessary behavioral healthcare and services to *enable residents attain or maintain the highest practicable well-being*, in accordance with the comprehensive assessment and plan of care, including residents with *dementia*  
Behavior Health: §483.40(b)(1)
  - A resident who **displays or is diagnosed with** mental disorder or psychosocial adjustment difficulty, or who has **a history of trauma and or post-traumatic stress disorder**, receives appropriate treatment and services to correct the assessed problem *or to attain the highest practicable psychosocial well-being (as linked to history of trauma and/or post-traumatic stress disorder)*
  - Behavior Health: §483.40(b)(2)
    - **Implementing non-pharmacological interventions**

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## Non-pharmacological interventions

- Refers to approaches to care that do not involve medications generally directed towards stabilizing or improving a resident's mental, physical or psychosocial well- being
  - Quality Assessment and Assurance (QAA)
    - Whether there is sufficient staff to implement the care plan for residents with dementia, so that medication is not used instead of pertinent non-pharmacological interventions, unless clinically contradicted (F-Tags 725 and 605)
    - For a resident who is receiving any type of psychopharmacologic medication, staff must attempt non-pharmacological interventions, unless clinically contraindicated (F-Tags 757 and 679)
    - Whether staff collect and analyze data to monitor the pharmacological and non-pharmacological interventions used to care for residents with dementia

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## Incorporating non-pharmacological approaches into an IDT care plan

- QAPI!
  - Activities need to be part of QAPI
    - Surveyors are looking for this
    - Department of Health & Human Services / Office of Inspector General
    - Core team members
      - 80% of included Activities as part of the QA Committee
    - QA happens / PI falls short
  - Rounding Meetings
    - Individualized Non-Pharmacological Intervention Tool

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## Care Plans

- -Non-pharmacological interventions: *allow* to vent feelings, 1:1 about grandkids, family, and pictures in her room, birds, and plants; foot rubs; gum; granola bars; visits with family; sketching; going outside; likes to dead head the flowers outside; Bible study; chapel services; bingo at ALF and SNF; toileting; assess pain
- -Offer non-pharmacological interventions for pain relief such as *newspaper (What newspaper)*, news, *TV (What shows)*, discuss days in the Army, MN Vikings/football, Lutheran, *1:1 visits (About what)*, ice, rest (*How long?*), therapy (*What therapy?*), repositioning.

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## Care Plans continued:

- -Attempt non-pharmacological interventions such as (*1:1 to discuss feelings*) and observe effectiveness.
- Encourage *out of room activities* that promote *physical activity*.
- Nonpharmacological interventions: *rest, repositioning, therapy, elevation of leg, 1:1*, ice, unwrapping stump and leaving unwrapped for a few minutes before rewrapping.
- Utilize PAINAD as *indicated*.

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## Care Plans continued:

- To promote sleep such as *music, relaxation, massage, snacks*.
- Encourage non-pharmacological interventions to promote sleep such as *quiet environment, snacks, dark room*.
- Offer non-pharmacological intervention for pain control prior to pharmacological as *appropriate such as rest, positioning*.
- Document *intervention utilized and outcome*. Administer analgesic as appropriate.

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## Care Plans continued:

- Nonpharmacological interventions for pain include *rest, ambulation, relaxation, 1:1, offer snack*, offer her to sit with husband.
- Teach Resident/family/caregivers about using non-pharmacological pain management strategies: heat/Cold applications, *Massage, relaxation, Distraction, Acupressure*, Transcutaneous Electrical Nerve Stimulation (TENS), *aromatherapy, repositioning, music, talking*, meditation, warm bath, warm milk, *snacks*. Assist in *identifying lifestyle modifications* that may contribute to effective pain management.
- Observe for *changes in general condition* that may prompt need for change in pain relief method.
- Provide *rest periods* to facilitate comfort, sleep, and relaxation.

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## Care Plans continued:

■ Resident's Recreation/Wellness individual preferences include used to play 500, Solitaire, Cribbage, Uno, use to shop in thrift stores, would play bingo during Thanksgiving, use to play scrabble, Monopoly, use to be a Sunday School teacher, enjoyed going out to eat anywhere, buffets, Branding Iron, has travelled to Germany, Washington state, Ohio, California, Yellow Stone, likes the movie Gone with the Wind, use to be a Lioness, likes to visit in person, likes to watch baseball, football and soccer, use to dance a little bit when first married, liked swimming for a bit, walked 3-4 miles a day. did yard work, little bit up fishing Up North, use to bowl league in Stewartville, is Lutheran, has gone to bible study in the past, likes to be outside, helped with the prayer chain, use to be the book keeper for Church Circle, use to like to read magazines, bible, religious books, might try trivia, use to write her own stories, helped with a flower garden, always cooked or baked, did sewing was a seamstress, crocheted, needlepoint, for occupation she was a seamstress, did tailoring, made dresses, likes to tell stories, use to sing in the church choir, maybe get a manicure, likes dogs and cats, likes game shows, big band/country shows on TV, wrote Christmas letters, is not a registered voter, no use of tobacco, is widowed takes naps in AM/PM, likes to socialize, has 4 kids, knows how to sign language.

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## Care Plans continued:

■ Resident's Recreation/Wellness Individual leisure interests include playing cards 500, was on a card club, shopping at Pro Bass Shop, Fleet Farm, played checkers, loves to eat at Red Lobster and Outback - usually orders Lobster, loves to go car riding with his 64 convertible Mustang/red in color, has travelled to Ireland, Mexico, Virgin Islands, went to Spirit of the Dance in the cities, use to be a member of a Car Cruise Club, enjoys visiting in person, use to play basketball in high school, watches the Vikings, his wife Lois and himself would go dancing all the time at the Terp, Playmore, VFW- Polka, Waltz, 2 step, Rode bike when he was young, did a lot of yard work, fished Up North near Brainerd, every year whole family would get together in a cabin for a week, Hunted for Rabbits, Squirrel, Deer, Pheasants, is Lutheran, Lois was going to call Sharon from Our Savior Church in Spring Valley - currently do not have assigned Pastor, goes to church, takes communion, likes Hymn Sing, loves being outside, CL gave him a devotion book, would usher for a month in church, enjoys reading the paper-Post Bulletin, Sport/Game/Fish magazines that his wife will bring in for him, gave him a large print word search, took a AARP driving course every 3 years to help decrease insurance, had a big garden that has cucumbers, green beans, tomatoes, squash, watermelons, is the master griller, collects cars, made clocks out of barn boards, use to take photos when stationed in Germany, was in the Army for 2 years and then in the reserves for 3, worked for electric fencers for 49 years, water instruments, drove a 4 wheeler, likes to reminisce about History, Radio: has Sirius satellite in his truck but likes old country music, TV: Judge Judy, Lil Big Shots, Judge Judy, Hot Bench, is married, takes napes in the AM/PM, early riser at 6am, prefers to stay in his room. Lives on his acreage, use to own 80 acres but now rents it out.

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# *Look at the environment!!*

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**Pain:** Non-pharmacological interventions may help manage pain effectively when used either independently or in conjunction with pharmacological agents

- ▶ Design
- ▶ Lighting
- ▶ Noise
- ▶ Distance to travel
- ▶ Assistive Devices
- ▶ Comfortable Seating
- ▶ Ice/Heat packs
- ▶ Neutral body alignment
- ▶ Positioning / Repositioning
- ▶ Adjust room temperature
- ▶ Tightening and smoothing linens
- ▶ Using pressure redistributing mattress
- ▶ Baths
- ▶ Massage
- ▶ Acupuncture / Acupressure
- ▶ Exercise

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## Pain continued:

- Relaxation techniques
- Reminiscing
- Diversions
- Music
- Coping Techniques
- Education on pain

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**Behaviors:** F-Tag 679 language / Be pro-active and not wait until resident has escalated...too late

- **§483.40 Behavioral health services (Revised!)**
- Surveyors will evaluate the activities provided to a resident who has behavioral symptoms, they may observe that many behaviors take place at about the same time every day.
  - Trigger times:
    - Before lunch
    - Mid afternoon
    - Shift change
    - Bath time
    - Is there a pattern

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## Behaviors continued:

- Communication Challenge vs Behaviors
  - Some behaviors may be appropriate reactions to feelings of discomfort, pain, or embarrassments i.e. aggressive behavior from residents with dementia during bathing
- Look at the environment
  - Background noise huge
  - Provide a space / environmental cues that;
    - Encourage physical exercise
    - Decreases exit behavior
    - Reduces extraneous stimulation
    - Create seating areas spaced along a walking path or garden
    - Room with a calm, non-rushed atmosphere

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## Behaviors continued:

- Offer activities that the resident will succeed in
- Break activities into simple steps
- 1:1 and/or small groups
- Short and repetitive activities
- Familiar occupational-related activities
  - F-Tag 566 / Work
    - Working outside
    - Sorting supplies
    - Delivering resident mail
- Physical activities
  - Walking
  - Exercise
  - Dancing

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## Behaviors continued:

- ▣ Cognitive stimulation
  - ▣ Games / projects requiring strategy, planning, concentration
    - ▣ Model building
    - ▣ Fine motor / tactile activities
- ▣ Creative activities
  - ▣ Music
    - ▣ Base upon MDS Section F / Cross reference
    - ▣ iPods
  - ▣ Art
  - ▣ Dance

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## Behaviors continued:

- ▣ Physical resistive activities
  - ▣ Kneading clay / bread
  - ▣ Hammering
  - ▣ Scrubbing
  - ▣ Sanding
  - ▣ Punching bag
  - ▣ Stretch bands
  - ▣ Lifting weights
- ▣ Slow exercises
  - ▣ Slow tapping
  - ▣ Clapping / Drumming
  - ▣ Rocking / Swinging motions
    - ▣ Rocking Chairs ROCK!!!

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## Behaviors continued:

- Normalizing activities
  - Stacking canned food onto shelves
  - Laundry folding
  - Sorting objects....be creative
  - Matching objects
  - Organizing tasks
  - Rummage areas
- Value based activities
  - Intergenerational
  - Life Story / Reminiscing
  - Participate in committees
    - Think beyond Resident Council

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## Mood / Psych-social Well-Being: Intertwined through-out the regulatory language

- Gross motor exercises
  - Aerobics
  - Light weight training
  - Social programs
  - Small groups
  - Service projects with opportunities for leadership
  - Singing
    - Journal of Alzheimer's Disease / December 9, 2015

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**Sleep:** Fatigue, lack of sleep or change in sleep patterns which may make the person more likely to misinterpret environmental cues resulting in anxiety, aggression, or confusion

**Insomnia:** Inability to sleep characterized by difficulty falling asleep, difficulty staying asleep, early waking, or non-restorative sleep, which may result in impaired physical, social or, cognitive function

- Pain
- Impaired Mood
- Behaviors
- **Diminished Quality of Life**

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## Sleep continued:

- Team effort!
  - Reading
  - Finger foods
  - Puzzles
  - Night rounds with maintenance
  - Early morning deliver of coffee/juice
  - Activities that reflect life long routines and work patterns
  - Arranging staff schedules to optimize familiarity and consistency, especially for Memory Care Units

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## Life Enrichment programs for Memory Care

- Remember it's the relationship that is MOST important...not the outcome of any one encounter
- Every interaction has the potential to be meaningful and therapeutic
- Just "being there" is important
- Dementia is both a chemical change in the brain and a structural change in the brain
  - So...sometimes you can and sometimes you can't
- Be flexible and patient
- Encourage involvement in daily life
- Avoid correcting the person

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### ■ Life Story

- Who they are
- Where they came from
- What they did
- What their family was like
- Where they lived
  - Can the person/family tell us this information
  - Actions speak as loud as words
    - Observable patterns i.e. wake up time, trying to help other residents/tenants
    - Cleaning
    - Sorting

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➤ Help the individual remain as independent as possible...for as long as possible

➤ Adaptations:


- Adapt only when necessary
  - Be patient
  - Don't correct
- View adaptations as temporary
  - Some days I can and some days I can't
- Adapt on an individual basis
- Adapt for congruence
  - Keep the activity as close as possible to the original activity

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➤ Adaptation methods


- Task Segmentation / Skill Sequencing
  - Break activity down into steps
    - Often used for crafts or activities that require several steps
- Environmental
  - Room set-up
  - Lighting and Glare
  - Temperature
  - Background noise/Distractions
- Alter the activity
  - Change the way the activity is done
  - Change the rules

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- Cues and Prompts
  - Props and Pictures
  - Verbal and Physical Cues
  - Hand over Hand assistance
  - Physical Guidance
  - Verbal Instruction
    - Offer opportunities of choice
    - Establish a familiar routine
    - Provide encouragement and praise
    - You have the power and responsibility to make the present day meaningful for a person who can no longer look forward to a better tomorrow

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## Effects of memory / cognitive impairment on Quality of Life

- An individual with memory loss gets worse, no matter how good our care is
- The individual may not recognize you from day to day
- The person is often unable to give back
- The routine environment, which may be monotonous for us, as caregivers, is ideal for an individual with memory loss

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## Communication barriers

- Difficulty finding the right words
- Repeating words and/or phrases over and over
- Substituting words that sound similar
- Inventing new words
- Easily losing train of thought
- Difficulty organizing words logically
- Reverting to speaking in a native language

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## Barriers continued:

- Using curse words
  - Common with Dementia
- Speaking less often or, not even at all
- Relying more on nonverbal gestures to compensate
- Trouble understanding conversation, questions, and instructions

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## Guidelines to connect to those with memory loss

- Comfort the person with touch
  - Hold their hand
  - Gentle massage
  - Brush hair
- Stimulate the senses
  - Smells
  - Pet therapy
  - Going outside
  - Gazing outside

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## Connecting continued:

- Soothing voice tone
  - Speak gently and with affection
  - Tone can help a person feel safe and relaxed
- Play music and videos
  - Play music individual enjoyed when he or she was young
  - Ethic music
  - Spiritual to person's faith preference
  - Nature videos
    - Native flute
    - Harp

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## Connecting continued:

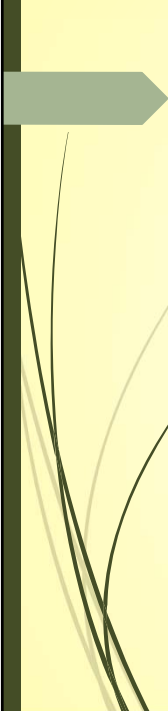
- Reminisce and share
  - Photographs
    - Favorite activities
    - Work history
    - Vacations
    - Recipes of family favorite dishes
    - Military medal
- Read
  - Stories
  - Poems
  - Spiritual passages
    - Family or loved record readings to play

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## Guidelines For Connecting


- C---Care enough to listen carefully
- O---Openly display respect, the resident is an adult
- M---Make eye contact and use gentle touch
- M---Monitor the feeling and emotional needs behind the words
- U---Understand the effect of posture, facial expression, voice tone and work selection
- N---Notice resident's non-verbal communication
- I---Interject/identify missing words, if appropriate
- C---Connect with multisensory cues
- A---Assess the environment for distractions
- T---Try therapeutic fibs, if appropriate
- I---Ignore your need to be right, to argue, or to confront
- O---Observe behaviors as communicators
- N---Nurture well-being through the communication connection
- S---Sensitivity sets the tone and mood for success

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- Person
  - Planning activities is best when you continually explore, experiment and adjust
    - Keep the individual's skills and abilities in mind
      - Was this person an artist? Pianist? Woodworker?
    - Focus on ability rather than disability
      - Maintain current level for as long as possible
    - Pay attention to what the person enjoys
      - Watch body language:  
Happy/Anxious/Distracted/Irritable

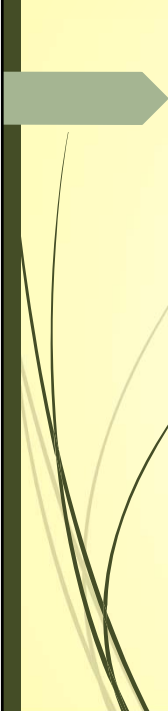
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- Consider if the individual begins the activity without direction or prompting
  - Chores about the unit that would reflect being home i.e. sweeping the floor, wiping down the table, weeding the flower beds
- Be aware of physical concerns
  - Does the individual tire easily
  - Does the individual have difficulty seeing or hearing
  - Does the individual have difficulty performing simple movements


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- Activity
  - Focus should be on enjoyment, not achievement
    - Provide opportunities that build on remaining skills and talents
  - Encourage involvement in daily life
    - Provide opportunities for the individual to give back and feel like a valued part of the household
    - Provide opportunities for a sense of success and accomplishments
  - Relate activity to work life
    - Know who the individuals are and what they did for a life long career

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## Effective verbal approaches / Early stage

- Don't make assumptions about an individual's ability to communicate; dementia affects each person differently
- Don't exclude the individual from conversations with others
- Speak directly to the person if you want to know how he or she is doing
- Give the individual time to respond
  - Don't interrupt or finish sentences unless the individual asks for help finding a word or finishing a sentence

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## Early stage continued:

- Ask the individual what he or she is still comfortable doing and what they may need help with
- Explore which method of communication is most comfortable for the person
- It's okay to laugh
- Be honest and frank; don't pull away
  - Friendship and support are very important

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## Effective verbal approaches / Middle stage

- Allow time for response
- Engage in 1:1 conversations in a quiet space
- Be patient and supportive
  - Offering comfort and reassurance is encouraging to communicate
- Maintain eye contact
- Avoid criticizing or correcting
- Avoid arguing

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## Middle stage continued:

- Don't overwhelm with lengthy request
- Speak slowly and clearly
- Ask 'yes' or 'no' questions
- Ask one question at a time
- Give visual cues
- Written notes vs verbal communication

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## Effective verbal approaches / Late stage

- Treat with dignity and respect
- Approach from the front and identify yourself
- Encourage nonverbal communication
  - Point or gesture
- Look for the feelings behind the words or sounds
  - Body language

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## Late stage continued:

- Use touch, sights, sounds, smells, and tastes
- It's okay if you don't know what to do or say
  - Your presence and friendship are most important

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## Effective physical approaches

- Positive approach
- Buddy walk
- Hand over Hand

Teepa Snow / You Tube

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# Activity Ideas To Incorporate Into Your Daily Calendar And Routine

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## Activity programs for the daily calendar and routine


- 7 Dimensions of Wellness and researched based programs
  - Physical Dimension / Group exercise
  - Emotional Dimension / Individualized music
  - Intellectual Dimension / Gardening
  - Social Dimension / Intergenerational
  - Spiritual Dimension / Story Boxes
  - Vocational Dimension / Sets-Stations and/or Volunteer opportunities
    - COTA classes
  - Environmental / Ties into all Dimensions
- 8-8 Activity calendar

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- 8 am – 8 pm Schedule
  - Or the appropriate time frame for your community
  - Activity every 30-45 minutes
  - Incorporate quiet time
  - Strong teamwork
  - Full 'arsenal' of ideas and supplies
- 101 Things to do...
  - Google 101 Things to do with Alzheimer's patients--- many links
  - Activity Ideas From A-Z with Alzheimer's patients---- Google

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- Board Games---Builds memory skills
  - Scrabble: Memory of basic information
  - Chess: Promotes, skill, intelligence and planning
  - Parcheesi: Hand-eye coordination and basic problem solving
  - Chinese Checkers: Logic and sequencing
  - Simple Sudoku
- Sorting---Uses cognitive thinking skills
- Family History Scrapbook---Increases self- esteem through fond memories, improves eye-hand coordination and small motor skill
- Name That Tune---Encourages conversation and stimulates long/short term memory

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- Card Bingo/Hoy (Played with 8 playing cards instead of regular Bingo card)
- Yarn Cards (Mount photos of family members of cardboard, punch holes around the edges and let person 'sew' borders with yarn or leather around picture:
  - Glamour Day for Women
  - Barber Shop Chat for Men
  - Theme day (ANY theme will work!)
  - Social events with family/friends
  - Spelling Bee

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- Famous Faces---Increases cognition, communication skills, problem solving
- In My Suitcase---Increases cognition
- Product Slogan---Multiple outcomes
  - Cognitive: Memory, creativity
  - Emotional: Feeling of success, competence, challenge, reminiscing
  - Social: Group interaction, conversation, laughter
- Music and a Story---Stimulates cognitive abilities, initiates reminiscing, and increases socialization

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## For the Gentlemen


- Arrange chairs for the activities
- Call Bingo
- Pass out Bingo cards/Collect after done playing
- Change and/or put up calendars
- Church usher
- Deliver mail/daily newspapers
- Fill bird baths/feeders
- Fill water glasses
- Gardening
- Give Devotions
- Help with lawn cushions/chairs
- Lead a sing-a-long
- Raise/Lower the flag
- Walk the facility pet
- Water plants (in and out)

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## Ideas For Sensory

- Auditory
  - Bells
  - Musical instruments
  - CD player or iPod
  - Blank tapes to record self
- Visual
  - Bubbles
  - Pinwheels/Spinners
  - Flowers
  - Colorful pictures mounted on poster boards
  - Collages

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- Smell
  - Perfumes
  - Aromatherapy (Pure oils)
    - Research for specific outcomes that you want
  - Spices:
    - Cinnamon,
    - Vanilla
    - Ginger
    - Garlic
    - Lemon
    - Coffee Grounds
    - Seasonal scents

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# Tactile

- Hand lotions
- Pine cones
- Comb/Brush
- Rocks
- Sand paper
- Macaroni
- Seashells
- Burlap
- Felt
- Velvet
- Spools of thread
- Macaroni
- Baby shoes

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## Reminiscing Ideas \*Props\*

- ▶ Favorite summer
- ▶ Great inventions
- ▶ States and Capitols
- ▶ Name the presidents
- ▶ Finish famous sayings/lyrics/nursery rhymes/Bible passages
- ▶ Simple trivia
- ▶ First kiss
- ▶ Friendships
- ▶ An amusing story
- ▶ Pen pals
- ▶ How you met your spouse
- ▶ Favorite pet
- ▶ Keepsakes
- ▶ Collections
- ▶ Favorite gift received or given
- ▶ Vacation

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- ▶ Miscellaneous
  - ▶ Playing cards
  - ▶ Puppets
  - ▶ Make-up
  - ▶ Bible
  - ▶ Word Games
  - ▶ Craft items
  - ▶ Magazines and Greeting cards for cutting up
  - ▶ Fingernail polish and emery boards
  - ▶ Seasonal decorations
  - ▶ Button boxes
  - ▶ Relaxation/Soothing items
    - ▶ Videos
    - ▶ Stuffed animals
    - ▶ Baby dolls

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## Non-Pharmacological Interventions

- Exercise
- Hot/Cold Pack
- Music
- Pet Therapy
- Aromatherapy
- Massage
- Purposeful Activities
- Meditation
- Gardening
- Breathing Exercises
- Guided Imagery
- Light Therapy

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## Resources For Activity Ideas

- [www.theactivitydirectoroffice.com](http://www.theactivitydirectoroffice.com)
- [www.dhspecialservices.com](http://www.dhspecialservices.com)
- [www.recreativeresources.com](http://www.recreativeresources.com)
- [www.activityconnection.com](http://www.activityconnection.com)
- [www.goldencarers.com](http://www.goldencarers.com)
- The Alzheimer's Association
- The Best Friend's Approach To Alzheimer's Care series
- Pinterest

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## Meaningful Activities:

- One **song** can spark a moment
  - One **flower** can wake the dream
  - One **tree** can start a forest
  - One **bird** can herald spring
  - One **smile** begins a friendship
  - One **handclasp** lifts a soul
  - One **star** can guide a ship at sea
  - One **word** can frame the goal
  - One **vote** can change a nation
- One **candle** wipes out darkness
  - One **laugh** will conquer gloom
  - One **step** must start each journey
  - One **word** must start a prayer
  - One **hope** will raise our spirits
  - One **touch** can show you care
  - One **voice** can speak with wisdom
  - One **heart** can know what is true
  - One **life** can make a difference

~~~Author Unknown~~~

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*“Happiness in life is all  
about 3 things:*

*“Something to do...  
Someone to love...and  
Something to look forward to”*

*Brad Thor, Author*

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## Resources:

- State Operations Manual
- Requirements of Participation
- Alzheimer's Association
- Carly Hellen / *Alzheimer's Disease: Activity-Focused Care*
- CMS
- Teepa Snow
- Department of Health and Human Services /  
Office of Inspector General

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