Stress Management for the Working Mom and Family Relations

By: Leon Edward

In today’s economy, it is sometimes necessary to have a two family income. This can create problems in families where there has been a stay at home mom.

Studies have shown that just because mom is not home, children can still thrive in other atmospheres. They have also shown that both working and stay at home moms can contribute equally to a child’s development.

Stress is a part of everyday life. However, for the working mom, it can be even more so. Moms rise and shine way before anyone else, to prepare breakfast, and school lunches if needed, and then wake up the rest of the family. It is mom who deals with the tired cranky children, get them ready and off to school. Then it is her turn to get ready for work, drop the babies off at daycare, and then off to work they go to work long hours.

When the workday is done, they go home to their families, cook dinner, do laundry, run errands clean the house, check the homework, pay the bills, and tuck the little ones in bed for the night. If the working mom is lucky, she can sit for an hour or so with her spouse.

This may seem like it is an awful lot to take in, and you may wonder how can anyone do this day after day to this, the result will undoubtedly be stress. The amount of stress can be limited with good time management skills.

When you present a good self-image to your children, they will naturally develop to be better adjusted. Children, even small children, can sense stress and will naturally react to it.

Parents are the biggest influence in a child’s life. Parents are whom the child models themselves after and it is the parents who shape their child. If a parent is a contributing member of society, then the child will be also.

It is important to talk about your day, your child will want to hear about your trials and tribulations of the day, it helps them to understand what you do for work during the day.

When both parents work, it is crucial that the household responsibilities be shared. Children need to feel that they are loved by both parents, not just mom. When the father shares in the childcare routine, they are forming a bond with their children as strong as mom is. This is crucial to developing a well-adjusted happy child. Starting a routine where dad is involved also gives mom a chance to catch her breath after a long day.

When stress from work is brought home, children sense it and can make it difficult for them to express themselves. They do not understand the (Continued on page 21)
Dear Activity Professional,

This month The Activity Director’s Office welcomes Kimberly Grandal, CTRS, ACC, and Executive Director of Re-Creative Resources, Inc. [http://www.recreativeresources.com/]. Kimberly will be contributing to a webpage on The Activity Director’s Office and Activity Director Monthly. Be sure to read her article, Activities: Now’s the Time to Advocate and Educate! On page 8 of this issue.

Most March activities are overwhelmed by the celebration of St. Patrick’s Day. However, there are many more observances happening than we have room to cover. Please check out page 11 of this issue. Also take a look at the March Activity Planner at [http://www.theactivitydirectorsoffice.com/03MAR.html].

We pray that you will have a wonderful and meaningful activity program for your residents this month. They depend on you.

Best wishes,

Linda Lucas

Linda Lucas: co-owner of The Activity Director’s Office website. Linda has been an Activity Director in Indiana since 1983.

Readers may contact Linda at: admin@theactivitydirectorsoffice.com

Vol. 03, No. 03

March 2007
The Mozart Effect

[The Amazing Effects of Music Therapy]

Resource:
http://www.heart-soul-music.com/

In his book, The Mozart Effect, Don Campbell tells this story about the power of music as demonstrated by one elderly woman in a nursing home in New Jersey:

"Arriving for a sing-along at a Ridgewood, New Jersey, nursing home, music therapist Grant J. Scott noticed a striking woman sitting at the back of the room in her wheelchair, silent and withdrawn. He was told that the woman, Ruth, did not speak or interact with other patients. But partway into his program, while he was singing the standard, You Made Me Love You, Ruth suddenly straightened her back, and, after two years of silence, broke into song, with a well-defined contralto voice that once must have been thrilling—as it was again that magnificent night. Scott hasn’t seen Ruth since then, but he understands that Ruth continues to sing and that she talks once again to her loved ones and to other members of her community."

And Mr. Campbell tells this story about Fred:

"At a nearby veterans home, Scott led a program of songs for a group of old solders and their spouses. Gradually, those who could got up to dance, and that attracted others. The sleepers awoke and began to tap their wheelchairs with their hands and fingers. Eventually, the dancing became more vigorous. Couples formed and embraced, reaching a climax with Sweet Georgia Brown. As Scott began the song, he looked over to see Fred, an Alzheimer’s patient who had been watching and chewing gum for more than 45 minutes, struggle to his feet, leaning heavily on his silver walker. A volunteer asked if he would like to dance, and Fred replied that he couldn’t walk without his walker.

"But then he grew steadier on his feet, made motions like a trombone player, and smiled broadly at the volunteer. He was having a wonderful time. ‘From silence and quiet,’ Scott observes, ‘he had come alive to the beat of this old-time, down-home Southern song. When I looked back at him, I was overwhelmed by what I saw. Fred was dancing with his walker. He swung it from side to side and dipped as the beat carried him to the end of the song. Fred continued with our farewell song and then, in complete satisfaction, put the walker down and shook his finger at it with what I called his inner joy of ‘wasn’t that the cat’s meow?’”

It’s stories just like this; witnessed each time we’re in a facility, that keep us moving forward with this project. What a wonderful gift this music can be! What a wonderful gift it was to Ruth and her family ... a return of communication after two years of silence! And to Fred ... the freedom to not just move, but to dance!

Heart & Soul Music

Thanks to our friends at Heart & Soul, the following list of songs is available in full length midi and lyric download. You can find these and many more at http://www.heart-soul-music.com/.

- APRIL SHOWERS
- BABY FACE
- BILL BAILEY (WON’T YOU PLEASE COME HOME?)
- DAISY BELL
- DANNY BOY
- DIXIE
- GIVE MY REGARDS TO BROADWAY
- GREENSLEEVE
- HELLO MY BABY!
- IN THE GOOD OLD SUMMERTIME
- LET ME CALL YOU SWEETHEART
- MA (HE’S MAKING EYES AT ME)
- MARY’S A GRAND OLD NAME
- MY WILD IRISH ROSE
- ROCK-A-BYE YOUR BABY WITH A DIXIE MELODY
- SHINE ON HARVEST MOON
- SIDEWALKS OF NEW YORK
- THE BAND PLAYED ON
- WHEN IRISH EYES ARE SMILING

(Thanks Robert, Tugger and Lynda!)
Introducing Interdisciplinary Sensory Approaches

By Debbie Hommel, ACC

Residents with severe cognitive and physical impairments need individualized, ongoing and appropriate sensory approaches, cues and environments. “How much is enough?” is a common question. The magic time frame of 15 minute visits – three times a week – is often quoted. For some residents – a visit of 15 minute duration is too long, for others three times a week is not enough. Many activity departments barely have enough staffing to conduct group programs, let alone daily visits with the frail resident.

We need to remind ourselves of a couple of key points as we work toward developing an appropriate program for the very frail, potentially isolated resident. From an assessment perspective, we need to remind ourselves that each resident has different needs. Through the assessment, we can define specific needs for 1-1 programming, stimulation and solace. The timing, frequency and content of approach can be developed through individualized assessments.

Secondly, from a programming perspective – let’s not forget that everyone needs a balance of active and passive stimulation throughout their day and week. Through the care planning process, specific approaches can be defined and communicated.

Finally, it is a team responsibility to meet the on-going and daily quality of life needs of the resident. The activity professional may schedule formal visits several times per week, however throughout the remainder of the week and when the activity staff are not present – the team also needs to ensure appropriate forms of stimulation are in place. By the team, we mean the Nurse, the Nursing Assistant, the Social Worker, as well any other person who may come in contact with the resident. The activity professional can create the plan, define what is appropriate, obtain the materials, make the materials available and in-service the team as to how to use the materials. With the team’s commitment, the daily needs of the very frail resident would be suitably met.

The following is a list of suggestions for staff techniques which could be shared with any staff that provide 1-1 contact with the very impaired resident or sensory programming. How to approach the resident, using available materials and making the most of every interaction could be topics for an in-service.

* Prior to starting the visit or process, verbally greet the resident and let them know what is about to happen. Even if the resident is very cognitively impaired, they should be informed of what is about to occur. A tactile greeting can accompany the verbal greeting.

* When presenting any sensory cues, they should be presented one at a time, allowing the resident time for processing and response. Simple verbal cues should accompany the presentation of the sensory cues, to explain and reinforce what is happening.

* When talking about the cues presented, ask them what the cue reminds them of. Refrain from asking questions where there is a right or wrong answer or they have to correctly identify a cue.

* Consider the amount of cues and stimulation being presented at one time. Music can be used as a compliment to the sensory experience or it can act as extraneous over-stimulation for the very impaired. In some cases, quiet is the best

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ABOUT DEBBIE

Debbie Hommel is a Certified Activity Consultant on State and National level, with over twenty-seven years of experience in providing direct care and consultation to long term care, medical day care, assisted living, and ICF/MR facilities throughout New Jersey, New York, Maryland, and Pennsylvania. She is an experienced trainer and workshop presenter, conducting a variety of seminars throughout the Tri-State area for the Activity Professional, Administrator, and allied healthcare professional. She is ACC certified through the NCCAP.
Current Activities in Longterm Care
By Kate Lynch, Editor
Current Activities in Longterm Care
http://www.activities4elders.com/

New CMS Regulations on Unnecessary Medications for Elders Coming Up

The Centers for Medicare and Medicaid Services has sent a letter to its surveyors advising them of major changes in its “Guidance for Unnecessary Medications” (F329) and a re-write of the entire Pharmacy Services section, whereby they collapsed the current regulations in three tags: F425, F428 and F431.

Revisions to the regs are extensive and include several pages of new guidelines relative to medications for the elderly, including considerable new information, charts, and so on, designed to avoid unnecessary medications for residents.

The new regulations are set to become effective December 18. In the meantime, readers can get an advance copy of the new regulations on the CMS Internet site at http://www.cms.hhs.gov/SurveyCertificationGenInfo/downloads/SCLetter06-29.zip

New Survey Compliance Tool from Alternative Solutions

Alternative Solutions in Long Term Care has developed a comprehensive Survey Compliance Tool for Activity Departments, says Sandra Stimson CALA, ADC, CDP, executive director of the consulting firm.

According to Stimson, the tool was developed to assist Activity Directors to objectively look at their department and determine areas that needed to be improved. These are the same areas that Federal Surveyors and State Surveyors will be looking at and includes: Documentation, Care Plans, Attendance, Initial Assessments, Calendar Programs, Room Visits, Special Programs, MSDS, Special Adaptive Products, Resident Council and Management Styles.

Stimson says the Survey Compliance tool is an extensive document, and simply asks the Director specific questions regarding the Activity Department. Each area that the Activity Director determines is not in compliance would be areas that the Director would need to work on.

For example, the Survey Compliance tool asks questions specifically related to room visits. How many residents require room’s visits and specifically what does the care plan and attendance record indicate? Often times, Activity staffs are not documenting room visits or specifically what was provided and the room visit can be in direct contradiction to the care plan interventions and goals.

Another example would be to determine if there are MSDS for all products. Often times this is an area that is over looked.

In addition, the Survey Compliance tool can be used in conjunction with the Population and Calendar.

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How Can We Encourage CNA Participation in Activities?

As an Activity Consultant and Dementia Consultant, what I see across the nation is lack of involvement by the nursing assistants in daily scheduled activities. Activity professionals are frustrated because of the lack of involvement. Nursing Assistants clearly do not see this as part of their daily duties.

So the big question is how can we get the nursing assistants involved in activities and residents daily quality of life? That is a complicated question with no easy quick solution. There are many systems that need to be put into place to encourage CNA participation. If we want them to participate, we as a staff have to participate first in their daily routine and that means answering the call bells. It’s not just their job! Any CNA will tell you that the majority of call bells that they answer daily are for simple requests and are not medical emergencies or direct patient care. All staff must be involved in answering call bells. The other area that Activity staff should be involved in is passing the trays or meal time set up. Nursing Assistants have packed schedules and often times; they see activities as an area that they don’t have time for. If we expect them to participate in transporting and day room activities, we have to be open to helping in these areas.

Let’s face it. A strong activity programs with nursing assistant involvement clearly drives the survey process. I think we can all agree on this! Clearly, Administrators have to look at this issue and make some changes.

But to answer the question, how to get CNA’s to buy into activities, covering the day rooms and assisting with transporting to the programs requires some systems to be put into place. Often times, we hear that they don’t have time to transport but interesting enough when the survey teams are present, everyone is transporting, helping out in the day rooms and participating in programs. So it only makes sense that this can happen on a daily basis. Activity professionals can not transport the entire facility by themselves. Activity professionals can not stop their program to go transport a resident to a program because they were not ready when the scheduled program began. ADL’s is an important part of the resident’s day and should not be rushed to get the resident to programs on time. But once they are dressed, the nursing assistant should bring the resident to the program.

The Activity Assistant can not be expected to run programs with no assistance in the day rooms as they have many behaviors or residents at risk for falls to monitor. If the activity professionals are to have success oriented programs they need CNA involvement. If you are a nursing home, the federal guidelines, F248 clearly state that all staff will transport and be involved in day room programs.

Because of the new guidelines F248, the burden is now on the Activity Directors to design appropriate daily programs to fit all residents. This includes, men’s programs, bed bound programs, dementia programs, very low functioning programs, etc. This means more programs with in the facility. If your community has not completed a Population and Calendar Analysis, those tools are located at www.activitytherapy.com

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Liven Up Those Staff Training Sessions!

Does this sound like your typical day? A family member walks up to the front desk, confused about their mother going to an upcoming musical event at the park. Someone complains about the temperature of the activity room. You pick up trash from the front entrance. All in a day’s work for you. You handle each situation with a smile and a professional attitude. But what about your young and inexperienced staff? How do they handle customer service issues? Administration often assumes all staff understands the importance of conveying a professional image. The following are some ways to make staff training interesting while helping staff convey first class service to residents and their families at your healthcare facility.

Facility Scavenger Hunt:

Of course you know where the extra first aid supplies are stored and where to find the Halloween decorations. However, not everyone has a handle on your facilities like you do. During staff training, pair new staff with “old” staff for a lively game of Facility Scavenger Hunt. Have each team locate items and locations around the property. This could include finding items such as:

- Locate at least three first aid kits.
- How many toilets are in the farwest restrooms?
- Where would you find balloons and crepe paper?
- What color are the chairs in the activity center?
- What is the seating capacity in the dining room?

The scavenger hunt helps all staff familiarize themselves with the layout of your facility so they can answer questions.

Simple smiles:

Several major hotel chains have the “15 Foot Rule”. Whenever a staff person is within 15 feet of a guest, the staff member needs to give an acknowledgment such as, “Good Morning” or “Have fun at the pool”. Encourage staff to do the same thing with residents and guests. Bring out a tape measure and show how far 15 feet is. Ask staff to mill around and come up with different greetings to acknowledge residents.

Are You Communicating?

Communication is all-important. Your staff members might think they explained about the monthly birthday party, yet many residents and family members forget the details. Use this exercise to demonstrate the need to communicate clearly. Hand out pieces of paper to everyone. (Go ahead and use scrap paper, as long as all pieces are the same size.) Ask staff to close their eyes. Give the following directions:

- Fold the paper in half
- In the top right hand corner, tear off a “quarter-size” piece of paper. Let the little piece of paper drop.
- Fold the paper in half again.
- Tear off a quarter size piece of paper on the top left corner.
- Tear off a quarter size piece of paper on the top left corner.
- Fold paper in half again.
- Tear a quarter size piece of paper from the bottom left corner.

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Activities: Now’s the Time to Advocate and Educate!

In January, 2007, I had the wonderful opportunity to give a presentation for the New Jersey Society of Nursing Home Administrators. The session was entitled: “F248 Activities: Conquering the Challenge of the Revised Guidance to Surveyors.” There were over 60 healthcare professionals in attendance, most of which were Administrators. Other professionals included CEO’s, Activity Directors, Directors of Nursing, and Staff Educators. The evaluations indicated that the session was well-received, interesting, and very informative.

It is vital for Activity Professionals to educate others about the revised F248 Activity Guidance to Surveyors, as well as the role and importance of meaningful activity. The focus of my session included an overview of the revised interpretive guidelines for F248 as well as a variety of strategies that may be used to offer a well-balanced program of activities. Such strategies included: interdisciplinary, staffing, programming, and documentation.

I placed a great deal of emphasis on an interdisciplinary approach to quality of life and the potential F-tags related to activities. Through leisure awareness and team building activities, the participants learned that all facility staff is responsible for providing meaningful activities to the residents. Brainstorming offered an opportunity for numerous department-specific quality of life strategies and ways to communicate residents’ interests and needs.

Another area reviewed was staffing. Appropriate staffing in Activity Departments across the country is often a topic of great concern for Activity Professionals. Unfortunately, not all states have mandatory staffing ratios for resident activities, and even those that do, may be considered bare minimum. Depending on the needs and acuity levels of the residents, I recommend that facilities aim to have two full-time activity personnel per 45-60 beds unit. For some of you, this sounds like a dream, but many facilities in NJ have this type of staffing. I also recommend that facilities hire a separate Volunteer Coordinator who works with the Activity Director. Volunteers play an instrumental role in offering a vast array of activities and services, ranging from religious/spiritual needs, cultural/language considerations, gender, and age-related needs.

In my session, I also discussed various programming strategies and recommendations. Environmental considerations included benefits of a therapeutic environment and sample therapeutic environments such as SNOEZELEN or multi-sensory environments, neighborhoods, Eden Alternative, and reminiscence environments. Other significant programming strategies included: parallel programming, small group programs, one to one interventions, Resident Council, adapting activities and adaptive equipment.

Lastly, the session included a variety of documentation strategies. Much discussion revolved around the importance of activities within the comprehensive care plan. Other topics covered included: population analysis, calendar analysis, resident satisfaction surveys, quality of life audits, care planning, assessment, attendance records, progress notes and the development of a system that communicates residents’ activity needs and interests.

Whether it’s at a state convention, local group, within your facility, etc. get out there and educate anyone and everyone about the role and benefits of activities. Many healthcare professionals just do not know the full extent of what we do and

(Continued on page 16)
I will be writing a two-part series about incorporating The Six Dimensional Wellness Model into your nursing home/activity program. Part 1 will cover an explanation and why you should consider adding this to your programming. Part 2 will provide you with information on how to incorporate it and specific activity programming ideas.

Part 1

Dr. Bill Hettler, Cofounder and President of the Board of Directors of the National Wellness Institute developed the Six Dimensional Wellness Model. It is a total wellness concept. The model encourages people to become aware of the different areas in their lives and to identify areas that need improvement. Then choices can be made to help you achieve a higher level of health and a more optimal existence. It’s a holistic concept of optimal living. It’s finding personal satisfaction and a sense of purpose in life. Complete well-being encompasses wellness of the body, mind and spirit.

The six dimensions model stresses the importance of creating balance in the areas that make up your life – social, occupational, spiritual, physical, intellectual and emotional. These areas should all sound very familiar with Activity Professionals. These are the areas we cover in our programming to some degree.

Social – The social dimension encourages contributing to one’s environment and community. It emphasizes the interdependence between others and nature, being more aware of society as well as the impact you have on the environment, preserving the beauty and balance of nature, all as you discover the power to make willful choices to enhance personal relationships, important friendships, and build a better living space and community. Social wellness follows these tenets:

~ It is better to contribute to the common welfare of our community than to think only of ourselves.
~ It is better to live in harmony with others and our environment than to live in conflict with them.

Occupational – The occupational dimension recognizes personal satisfaction and enrichment in one’s life through work. At the center of occupational wellness is the premise that occupational development is related to one’s attitude about one’s work. By contributing your unique gifts, skills and talents to work, you find it personally meaningful and rewarding. We convey our values through our involvement in activities that are gratifying to us. Occupational

(Continued on page 13)
State Association Management

Kathy Hughes, ADC
NCCAP President

Membership

The key to any association is membership. Local, state and national associations are always looking for people to join their associations. All too often the members are looking for the benefits to joining and the officers cannot give them concrete answers as to their benefits, which in turn lowers the amount of people in the association. This segment will address membership building, retaining members and what those allusive benefits are.

Membership Building

The first challenge to the Membership Committee is to find those people who are passionate about your association and recruit them to help with a strategy on building a good membership base. These are the members that have been in the association the longest and have a vested interest in making sure that the association lasts. They are the people that bring in the new members and the people who should welcome the new members at any association function. Make them the “Welcoming Committee” at your next conference or workshop.

Why Become NCCAP Certified?

1. Federal Law, OBRA, states that an activity department must be directed by a “qualified professional.” One of the ways to become qualified is to become a Certified Activity Professional.
2. NCCAP certification is recognized by HCFA (Health Care Financing Administration) as an organization that certifies activity professionals who work specifically with the elderly.
3. NCCAP certification assures administrators and surveyors that you have met certain professional standards to become certified.
4. Many administrators will only hire activity professionals who are already certified.
5. Some administrators offer a higher salary to a certified professional.
6. Become NCCAP certified so others will know that you are nationally qualified and giving quality activity service to residents/clients.

QUALIFICATION DESCRIPTION:

A. ACADEMIC EDUCATION May derive from a wide variety of curricula: Social Work, Recreation, Education, and Business degrees. These are a few of the educational backgrounds that represent our certified members.
B. ACTIVITY EXPERIENCE Activity work experience with elderly populations, where at least 50% are 55+ years of age. Some volunteer work with elderly clients may be applied.
C. CONTINUING EDUCATION Current education (within past 5 years):

- Make sure that they are recognized at every event and honored in a way that makes them part of the membership team. One of the ways to do this is to give them a professional nametag that has their name, work title (certification title or work title) and the name of the association. Encourage everyone to wear these “golden name tags” at all of your events.

The second challenge is your marketing tool. Is your association brochure professional looking? Does it have all of the benefits written out and/or all of your association accomplishments? Do the members have enough of the brochures to take with them to meetings, workshops or conferences?

Does it have the person’s name, address and work number so that potential members can call with questions? Is the brochure sent to activity educators in your state so that they can display them at their session? Making sure that the bro-

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Monthly Observances
For activity idea nuggets visit us at:
http://www.theactivitydirectorsoffice.com/ActPlannerIntro.html

Monthly Events

Academy Awards Month
American Red Cross Month
Cataract Awareness Month
Frozen Food Month
Humorists Are Artists Month
Mental Retardation Month
Music in Our Schools Month
"Talk With Your Teen About Sex"
National Chronic Fatigue Syndrome Awareness Month
National Craft Month
National Feminine Empowerment
National Flour Month
National Furniture Refinishing
National Hobby Month
National Noodle Month
National Nutrition Month
National Peanut Month
Professional Social Work Month
Sauce Month
Women's History Month
Philatelic Literature Month
Poison Prevention Awareness Month
Rosacea Awareness Month
Spring Month
Youth Art Month
"On Hold" Month

Weekly Events

Week 1
American Camping Week
Chamorro Week (Guam)
Help Someone See Week
Aardvark Week
PTA Drug & Alcohol Awareness Week
Volunteers of America Week
Women's History Week
Return the Borrowed Book Week
Save Your Vision Week
Surfside Salutes Canada Week
Universal Human Beings Week

Week 2
American Camp Week
Bubble Gum Week
Chocolate Week
Cycle Week
Fun Mail Week

MARCH 17 - ST. PATRICK'S DAY
Garden Book Week
Girl Scout Week
Music in Our Schools Week
Lutheran Schools Week
Professional Pet Sitters Week
Procrastination Week
School Breakfast Week
Surveyor's Week
Newspaper in Education Week

Week 3
American Chocolate Week
Camp Fire Boys & Girls Week
Children & Hospitals Week
National Free Paper Week
National Manufacturing Week
National Poison Prevention Week
National Wildlife Week
World Humanist Week

Week 4
American Chocolate Week
Art Week
National Agriculture Week

Activity Director
Apparel & Gift Store
http://www.cafepress.com/theadoshop

Activity Director
Party Store
http://www.theado.makesparties.com

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http://www.theactivitydirectorsoffice.com
March 2007
Clipart for the Month
MEMBERSHIP
WHY NOT JOIN NAAP TODAY?

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

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

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

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

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

(Six Dimensional - Continued from page 9)

wellness follows these tenets:
~It is better to choose a career which is consistent with our personal values, interests, and beliefs than to select one that is unrewarding to us.
~It is better to develop functional, transferable skills through structured involvement opportunities than to remain inactive and uninvolved.

Spiritual – The spiritual dimension recognizes our search for meaning and purpose in human existence. It includes development of a deep appreciation for the depth and expanse of life and natural forces that exist in the universe. It can include experiencing many feelings of doubt, despair, fear, disappointment and dislocation as well as feelings of pleasure, joy, happiness and discovery – which are the important experiences and components to our search and are displayed in the value system we adapt to bring meaning to our existence. When you are spiritually well, your actions become more consistent with your beliefs and values. Spiritual wellness follows these tenets:
~It is better to ponder the meaning of life for ourselves and to be tolerant of the beliefs of others than to close our minds and become intolerant.
~It is better to live each day in a way that is consistent with our values and beliefs than to do otherwise and feel untrue to ourselves.

Physical – The physical dimension recognizes the need for regular physical activity. Physical development encourages learning about diet and nutrition while discouraging the use of tobacco, drugs and excessive alcohol consumption. Optimal wellness is met through the combination of good exercise and eating habits. You strive to build physical strength, flexibility and endurance while also taking care of your medical needs. You understand and appreciate the relationship between sound nutrition and how your body performs. The physical benefits of looking good and feeling terrific most often lead to the psychological benefits of enhanced self-esteem, self-control, determination and a sense of direction. Physical wellness follows these tenets:
~It is better to consume foods and beverages that enhance good health rather than those which impair it.
~It is better to be physically fit than out of shape.

Intellectual – The intellectual dimension recognizes one’s creative, stimulating mental activities. A well person expands their knowledge and skills while discovering the potential for sharing their gifts with others. Using intellectual and cultural activities combined with human resources and learning resources, a well person cherishes intellectual growth and stimulation. It is important to explore issues related to problem solving, creativity and learning. Spend more time pursuing personal interests, reading books, magazines, and newspapers, while keeping abreast of current issues and ideas. Actively strive to expand and challenge your mind with creative endeavors. Intellectual

(Continued on page 19)
Here are some steps to take to get nursing assistant to buy in to the Activity program.

1. We recommend every facility have a lead CNA. Most communities who have a Lead CNA can attest to the buy in by the other CNAs as the Lead CNA insures that the CNA’s are involved in transporting, assisting in programs and supervision of the day rooms. Companies such as CareOne and Spring Hills Assisted Living have tried this in several of their communities and have shown that lead CNA’s programs work.

2. Insure you have proper coverage of CNA’s. Hard to get any CNA to assist with transporting, covering a day room and assisting with activities if they have heavy case load and not enough CNA’s scheduled or on duty.

3. Provide education about activities, the types of programs you offer and how to run simple activities. Explain the expectation of the CNA when in the day rooms. Make sure this also a part of general orientation. Often times CNA’s are not engaged in the activity because we have not taken the time to show them what to do. If you don’t want to see them sitting in the back of the room, explain your expectations. They want to help. Utilize the in-service at www.activitytherapy.com

4. Post a CNA schedule to clearly show the times the CNA is required to be in the day room. The unit manager would be responsible for creating a schedule.

5. Speak to the CNA’s about times a resident can attend activities. As we know there are some residents that require a lot more time to complete Adl’s, dressing, medications as well as schedules for other therapies.

6. Provide a list to the nursing stations of the residents who need assistance in transporting. State which programs you would like them to attend, the times of the programs, the dates of the programs and locations of the programs. Most CNA’s realize the importance of quality of life and the impact recreation plays and will work hard to get the resident ready in time for a program. This schedule should be updated by the Activity Director on a monthly basis.

7. Post a calendar in the day rooms that clearly shows the programs. A calendar should be posted in the resident room so the CNA is aware of the schedule.

8. Make sure the CNA understands the programs that are listed. Especially in Assisted Living where often times CNA’s are asked to con-
9. Ownership by the unit managers for quality of life activity programs. Often times, the Unit Manager has so much to do that they are not aware of who is getting to the programs. It takes only a minute to walk over to the day room and observe if the CNA is present. The Unit Manager should observe who (residents) is in programs and especially who is not in program and take the time to find out why. The Unit Managers should take the time to explore why residents are not in the day room.

As many care plans now address activity interventions and supervision for those residents with behavior issues or at risk for falls, it makes sense that there has to be a CNA in the day room to carry out the supervision. Unit managers should be aware of any resident who is not participating in programs and why? There has to be programs for everyone. The Unit Manager should walk the floor at 10:00 and note any resident who is still in their room or bed, left in the hallway or at the nurse’s station. Explore why?

The Unit Managers must make it clear that once a resident is dressed that the residents are brought to the programs unless they decline the activity. Often times, residents are placed at the nurses station for supervision, but if the day rooms have proper supervision, it makes sense that the residents are brought to the day rooms. The nurses really can’t provide adequate supervision at the nurse’s station due to phone calls, medication pass, dressing changes, etc.

10. Have weekly socials and invite all the CNA’s to come and participate. Especially when there is entertainment and deserts, you are sure to get their buy in. They enjoy this as well. This way, the Activity staff is getting extra help during the socials and entertainment. Generally at special events there can be 30 residents with only a few Activity Staff. If most residents are at the special event, there should be no reason why the nursing assistants are not the special event.

11. Most Director of Nursing recognize not only the importance of quality of care but see the value in Quality of Life Activities. They need to play an active role with the Unit Managers in insuring that the nursing assistants are helping with activities, transporting and providing coverage in the day rooms. I know of no DON who would approve of dementia residents in a day room with no supervision. Activity staff can not be in the day rooms at all times as they have additional responsibilities such as care plan meetings, initial assessments and room visits. Additionally, there has to be “relaxation time” for the residents. During these ‘down times’, nursing assistants can provide the supervision.

12. Administrators have to take an active role in insuring that the Activity Departments have enough Activity staff to carry out daily (including weekends), programs to fit the types of populations living in your facility and that the Administrator has buy in from the nurses and nursing assistants. MBWA manage by walking around. Walk around at 10:00 and 2:00. You should not see residents in their rooms dressed, left in the hallway, left at the nurse’s stations or in crowded day rooms with only one activity assistant.

13. Insure the initial assessment is placed on the chart and filled out completely. The nursing assistants should be required to read the Initial Assessments and understand their past occupations, religion, lei-
14. Care plans should have interventions from the Activity Department. The Care Plan should include the nursing and nursing assistants. For example; you may have some one care planned for weight loss. The intervention might be to “invite resident to food related programs”. The nurse would be on the care plan to “provide treatments prior to the event”. Nursing Assistants intervention may be to, “remind resident of food related program and transport to food related programs.”

15. In many states Activity Associations have CNA of the year. Take the time to nominate a CNA who goes the extra mile in helping with activities. Even if your CNA does not win, you can post the nomination in your local paper, facility paper and recognize the CNA within your facility. The nursing assistants would be thrilled.

16. Thank the CNA for their help in assisting with transporting, helping in the day rooms and participating in programs. A “Thank You” goes a long way.

The CNA’s love their patients and most feel that activities are an important part of their day. If systems are put into place, change may be slow to come but change can happen, especially when this type of positive change is best for the resident’s quality of life. - END

why we do it. Contact your local Administrators’ Association, Social Services, Volunteer Ombudsman Programs, etc. You may even try to incorporate mandatory annual activity in-services at your facility. So go ahead and take the challenge: Advocate and educate! If you are interested in speaking on this subject but just don’t have the time to organize the material, contact Kimberly Grandal.

For those of you in the tri-state area, I will be offering this session again at the New Jersey Activity Professionals Association Convention on March 30, 2007. - END

clarify directions to residents. This is a very visual exercise and quickly shows how people misinterpret simple directions.

Smile! You’re on Candid Camera!

Bring out the video camera and film staff role-playing situations. Set up scenarios such as a family member complaining about the food or location of their loved one’s room. As staff act out the situations, tape the scene. Afterwards, review the film and point out positive points. Tactfully make suggestions on how to improve the situation. Often staff think they are smiling and helpful, but in actually, come across as abrupt. The tape helps staff see how improvements could be made.

The Wise Ones Have Spoken!

Here’s a light-hearted way to convey valuable information to staff. Invite 3-4 senior members of your staff to attend a staff training session. Hang signs around each of their necks that say “Wise One”. As Wise Ones stand in front of group, explain that the rest of the staff has the opportunity to gain insight into customer service from these Wise Ones. Begin by asking each Wise One a few basic questions such as, “What was the activity professional industry like when you began working?” “What was one of the biggest mistakes you made as an entry level staff person?” Why do you like working in assisted living or long term care?” After each Wise One has answered questions (and provided helpful information) ask if anyone else has questions. This provides a unique opportunity for staff to ask questions of senior level staff. They’ll enjoy interacting with the Wise Ones and hopefully establish a positive working relationship with each other.

Most staff training sessions involve lengthy (and often boring) lectures. Try some of these interactive training techniques to help staff understand and implement outstanding customer service for your health-care facility. - END
A Large Variety of Items are Available Including...

Activity Director Apparel & Gift Store

http://www.cafepress.com/theadoshop

Why should I join your organization? WIFM? (What’s In it For Me?) Interestingly there is an untapped resource available for activity professionals that they take little advantage of. Perhaps we figure that activity professionals don’t have the tools to use it. Perhaps we think that many people are unaware of it’s potential. That resource is the Internet. Few State/Province Associations can be found on the Internet, yet those that are available have seen an increase in their membership and their conference participation. Most of the websites that are available will gladly let you post-upcoming conferences and meetings for FREE! Why should you take advantage of this? Because the Internet offers the ability to market to hundreds of Activity Professionals who don’t know about your association, but are searching for information. Just check the various “Bulletin Boards” available for Activity Professionals.

NCCAP’s Bulletin Board receives about 300 visitors a day with 100 of them looking for educational opportunities. SeniorAct also has listings of upcoming conferences that allow individuals to look for an educational session near them. The various websites offer their associations the ability to track and record visitors to their sites and they know who is looking for what type of information.

Then revisit your association to discuss what you can do to market your association to those looking for information. Interesting programs that meet the needs of your members will have others talking about how great it is to access your association. Marketing is not
exclusive to mailings, newsletters or your website. Having all three tools does allow your association to cover the needs of your potential members. Having your state code available in all three types of marketing will educate those looking that information. Having a State Surveyor speak at your next meeting or conference will encourage people to attend and just might peek the interest of Administrators.

Marketing not only includes investing in the future of your association but also says that your association is a professional entity that supports the long-term care industry. You may want to take out an ad in an Administrators Convention Booklet or sponsor an educational event at a Dietary conference. Both would bring the activities side to other professions and encourage participation in your association.

Membership Retention

Making sure that your association meets the needs and interests of its membership is just like a “Quality Assurance” study for your association. A team from the membership committee should be surveying the membership on a regular basis. Finding out what the members want and what the association can do for them is an important element in membership retention. Making members feel good about their investment and their careers is crucial to a good association. Empowering members to take an active role also leads to members sticking around.

The first impression is always the lasting impression, “you never get a second chance to make a first impression”. What does the new member receive upon joining your association? The mailing of a packet of information to a new member can include by-laws, committee descriptions, a listing of officers, a listing of committee chair people, the state and/or federal regulations concerning activities and a welcoming letter from the President. Some associations include another membership brochure and ask the new member to sign up some one else within thirty days and they will receive an additional discount to the annual conference. Information about other associations or opportunities can also be included in the new member packet.

Survey your members through direct mailings. The newsletter could work but if someone gets a personal letter with a stamped return envelope you are more likely to get a larger return. Find out what they would like for their membership, what topics they would like for continuing education, what information is valuable to them, what they would like to see in the newsletter or how they feel about upcoming legislation. Keep the questions simple and the responses simple, as activity professionals don’t think that they have a lot of time to answer a lot of questions.

Recognize your members every chance that you get. Make sure that at all of your events there is time set aside to reward your members. Include recognitions in your newsletters; celebrate milestones such as the 100th member, or 25 years in the field. Make sure that the members are given the opportunity to be proud of what they do at your annual meeting. Send a card to everyone during National Activity Professionals Week that is positive and can be displayed.

Member Benefits

So many times the officers of associations are challenged with the question, “What’s in it for me?” Besides the obvious benefits of the discounts to conferences, workshops and seminars, the newsletter and the opportunity to run for an office and work more, this can turn anyone’s hair gray. The benefits can be hard to pinpoint for any association.

The members will get out of an association as much as they put into it. Teaching members that there is strength in numbers for legislative issues could be stated in the newsletter. Telling members that they have opportunities to network with other professionals and to gain state of the art activity programming can be done through the Presidential welcome at the annual conference. Giving the members an opportunity to earn six free continuing education credits for their NCCAP certification through your newsletter is worth the cost of most memberships and deserves an article in your newsletter.

The ability to meet people from other parts of the state/province or country through attending your conferences and workshops is also a “hidden” benefit. The opportunity to bring information back to their facilities can be a benefit. Encouraging members to utilize these benefits and to seek out opportunities through your association can be very beneficial.

Your membership committee is the key to your success. Make

(Continued on page 19)
Membership Committee Ideas

- Develop a “New Member Packet” to include information about your association
- Target a section of your state/province for a membership drive at least six months prior to your annual conference.
- Offer a new member discount for your next event.
- Target Activity Assistants for a membership drive offering a reduced rate to your association.
- Have committee members survey existing members to see what else you can offer.
- Recognize new members in each newsletter as well as the members who have renewed their membership.
- Offer a discount coupon in your newsletter for any upcoming event or ask a vendor to recognize your membership with a specific discount.

Emotional – The emotional dimension recognizes awareness and acceptance of one’s feelings. Emotional wellness includes the degree to which one feels positive and enthusiastic about oneself and life. It includes the capacity to manage one’s feelings and related behaviors including the realistic assessment of one’s limitations, development of autonomy, and ability to cope effectively with stress. The well person maintains satisfying relationships with others. It is essential to be aware of and accepting of a wide range of feelings in yourself and others. You are able to express feelings freely and manage feelings effectively. You are able to arrive at personal choices and decisions based upon the synthesis of feelings, thoughts, philosophies, and behavior. You can live and work independently, yet realize the importance of seeking and appreciating the support and assistance of others. You are able to form interdependent relationships with others based upon a foundation of mutual commitment, trust and respect. You take on challenges, risks, and recognize conflict as being potentially healthy. By managing your life in personally rewarding ways, and by taking responsibility for your actions, you see life as an exciting, hopeful adventure. Emotional wellness follows these tenets:
~It is better to stretch and challenge our minds with intellectual and creative pursuits than to become self-satisfied and unproductive.
~It is better to identify potential problems and choose appropriate courses of action based on available information than to wait, worry and contend with major concerns later.

That is the basic principles of the six dimensions of wellness model. So why should you incorporate these principles into the nursing home/activity program? It improves the quality of life for older adults by caring for the whole person within the six dimensions of wellness. With increasing life expectancy and the aging baby boomers, we see the need to engage this generation into changing the way we age. We can do this by staying active, to the fullest extent possible, within all areas of life: emotional, intellectual, physical, spiritual, social and occupational. Aging within these dimensions of wellness keeps us involved, alert, and enjoying a productive life. The concept of Active Aging is summed up in the phrase “engaged in life”. Individuals can participate in life as fully as possible, regardless of socioeconomic status or health conditions, within the wellness dimensions. It empowers older adults with prevention and wellness strategies. Older adults have the capacity to grow, develop, modify and change regardless of age! As Activity Professionals we need to provide opportunities that support active aging – so that those we serve can say “I am engaged in life.” (Do you see the similarities here between the six dimensions of wellness and the rewrite of the interpretive guidelines for F248? I certainly do!)

Of course there are many benefits

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of wellness. These are some of the benefits:
- Fall risk reduction
- Balance and mobility
- Range of motion in all joints
- Muscle endurance and strength
- Flexibility, fine motor skills, breath work
- Visual, vestibular and somatosensory systems and Participation, fulfillment and enjoyment

Being physically active is one of the most important things older adults can do to stay healthy. Wellness is maximizing potential, maintaining a continuum of balance and purposeful direction within the environment and moving toward increased capability and functioning.

Part 2 will provide you with information on how to incorporate the six dimensional wellness model and specific activity programming ideas. - END

(Sensus Approaches - Continued from page 4)
compliment to sensory.

*When using touch in a quality of life interaction, rubber gloves are not necessary. What contributes to the quality of life interaction is the human-to-human touch. Infection control can be maintained through hand washing and antiseptic gels.

* Be respectful and speak in an adult manner. Maintaining a calm, soothing, conversational tone is most effective.

*Expect a response, even when one may not be forthcoming. Being aware of small responses, such as increased eye blinking, increased body movement, ceasing of body movement, tensing of body/facial expressions (to name a few) is important.

*Let them know you enjoy being with them through your tone of voice and gentle touch.

*Continually analyze stimulation levels to avoid over stimulation. We need to create a balance of active stimulation and passive stimulation. It is not our goal to constantly stimulate the resident actively. For very low functioning residents, five minutes of active stimulation can be a long period of time. Be intuitive of the resident's response and if it seems they have had enough, don't be afraid to stop.

*We must never forget that each resident is an individual and our approach should be based on past interests of the resident. - END

(Survey Tool - Continued from page 5)
lar Analysis. The population analysis tool provides a chart to document the exact types of populations you have in your community.

For example, the population analysis may determine that you have 20 very low functioning residents, and comparing it to the calendar, the findings may show that the activity department does not offer enough programs for low functioning or dementia residents.

The findings from the calendar analysis and population analysis would drive the planning process of the activity calendars.

The Survey Compliance tools should be done on a yearly basis and long before your survey window to allow time to implement changes, adds Stimson.

The Survey Compliance tool, Population and Calendar Analysis tools can be purchased at www.activitytherapy.com

Helping your elders with reading abilities improves their depression
Researchers at Arlene R. Gordon Research Institute, New York, examined the relationship between use of assistive devices, disability, and depression in 438 visually impaired elderly, who were followed over a period of six months. Visual loss resulting from various conditions (age-related macular degeneration, glaucoma, cataracts) is the most common disability in old age, affecting one in five elderly over 65 years of age (20 percent) and one in four (25 percent) of those over 75.

Twenty-three percent of all visually impaired elders use some form of vision-assisting device, in addition to glasses, to accomplish daily activities, according to data from the National Health Interview Survey and Assistive Device Supplement. Assistive devices can be optical (magnifiers, telescopic lenses, magnified television screens.) Adaptive devices include such things as talking books and appliances, large-print materials, telephone aids.

The researchers, led by Dr. Amy Horowitz, found that use of optical devices was associated with significant reductions in disability and depression, thus supporting the functional and psychological benefits of these devices. No improvement in depression was observed for use of adaptive devices. Researchers think the reason for the improvement in depression with the

(Continued on page 21)
assistive devices, is that they’re primarily used to improve the elders’ reading ability… and that’s one of their most-favored activities.

“For older adults, losing the ability to read is one of the most devastating consequences of vision loss,” says Horowitz. “Because most optical devices specifically target near reading… [they] allow these valued activities to be continued.”

The new Centers for Medicare and Medicaid Services (CMS) guidelines for activities surveyors give activity directors, and their support staff, the responsibility for making sure all their elders have proper glasses, or other visual assistive devices.

The findings appeared in September in the Journal of Gerontology: Social Sciences.

For the latest news subscribe to Current Activities in Long-term Care today! Only $49! - END

(Continued from page 1)

feelings that they have and tend to act out more.

When a child has these feelings, the subconscious reactions that they have can cause them even more stress.

It is important to keep the stress from work at work and not bring it home.

When a child is born, the first year of their life is crucial to their development. It is in the first year that all of the child’s major emotional bonds are formed. These bonds will last for the rest of your child’s life. They recognize their primary caregiver as their protector, and if both parents work outside the home, it can have a serious impact on the child. Some children view their parents as company, and some children even fear when their parents take them home from their daycare provider. If it is possible, staying home for the first year of life will help your child to bond with you.

There are some parents who feel a sense of loss because they work long hours. They feel that they are letting their children down in some way. This can lead to a dangerous cycle of buying gifts for their children to make up for not being home. Experts advise against this because children will inevitably take advantage of these feelings. As the child gets older, the gifts get more expensive and the child grows to expect it.

Spending quality time with your children is far better than gifts of guilt. The time that you spend together will last far longer than the gifts that you can buy.

Article Source: http://www.articleemporium.ca


- END
Following is Your Free Facility Newsletter

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

Suggestions for the Effective Use of Your Newsletter

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

PREPRINT

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

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

PRINTING

- If you decide to print your newsletter on your facility copier you may print the newsletter on 8.5”x11” sheets of paper. However, it is far more professional looking to use 17” x 11” sheets (this size is larger than legal size paper, but can be hand fed into most modern printers).
- If you use a print shop have them print your newsletter on 17”x11” paper. They will have a variety of colors for both your paper and ink. You can expect to pay more for color ink. If you decide to print your newsletter on color paper, avoid using dark colors and extremely bright colors (e.g. fluorescents), they are too difficult to read.
- If you take it to the print shop they will also print and insert your extra material and fold your newsletter for you. One fold makes your newsletter ready for hand outs. Two folds prepares the newsletter for mailing.

MAILING

(An excellent activity for your residents)

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

BULK MAILING

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

DISTRIBUTION

For the most effective marketing of your facility, we recommend that you make an extensive mailing list including these listed below. The more newsletters you circulate, the more successful your marketing will be.

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

TIMING

For timely distribution, your newsletter will always be available to you at the first of the month. It should be published by the last week of the month and mailed prior to the first of the month the newsletter is dated.
Let’s Celebrate St. Patrick’s Day

Saint Patrick is believed to have been born in the late fourth century, and is often confused with Palladius, a bishop who was sent by Pope Celestine in 431 to be the first bishop to the Irish believers in Christ.

Saint Patrick was the patron saint and national apostle of Ireland who is credited with bringing christianity to Ireland. Most of what is known about him comes from his two works, the Confessio, a spiritual autobiography, and his Epistola, a denunciation of British mistreatment of Irish christians. Saint Patrick described himself as a "most humble-minded man, pouring forth a continuous paean of thanks to his Maker for having chosen him as the instrument whereby multitudes who had worshipped idols and unclean things had become the people of God."

Saint Patrick is most known for driving the snakes from Ireland. It is true there are no snakes in Ireland, but there probably never have been - the island was separated from the rest of the continent at the end of the Ice Age. As in many old pagan religions, serpent symbols were common and often worshipped. Driving the snakes from Ireland was probably symbolic of putting an end to that pagan practice.

While not the first to bring christianity to Ireland, it is Patrick who is said to have encountered the Druids at Tara and abolished their pagan rites. The story holds that he converted the warrior chiefs and princes, baptizing them and thousands of their subjects in the "Holy Wells" that still bear this name.

There are several accounts of Saint Patrick's death. One says that Patrick died at Saul, Downpatrick, Ireland, on March 17, 460 A.D. His jawbone was preserved in a silver shrine and was often requested in times of childbirth, epileptic fits, and as a preservative against the "evil eye." Another account says that St. Patrick ended his days at Glastonbury, England and was buried there. The Chapel of St. Patrick still exists as part of Glastonbury Abbey. Today, many Catholic places of worship all around the world are named after St. Patrick, including cathedrals in New York and Dublin city.

Saint Patrick's Day has come to be associated with everything Irish: anything green and gold, shamrocks and luck. Most importantly, to those who celebrate its intended meaning, St. Patrick's Day is a traditional day for spiritual renewal and offering prayers for missionaries worldwide.

So, why is it celebrated on March 17th? One theory is that that is the day that St. Patrick died. Since the holiday began in Ireland, it is believed that as the Irish spread out around the world, they took with them their history and celebrations. The biggest observance of all is, of course, in Ireland. With the exception of restaurants and pubs, almost all businesses close on March 17th. Being a religious holiday as well, many Irish attend mass, where March 17th is the traditional day for offering prayers for missionaries worldwide before the serious celebrating begins.

In American cities with a large Irish population, St. Patrick's Day is a very big deal. Big cities and small towns alike celebrate with parades, "wearing of the green," music and songs, Irish food and drink, and activities for kids such as crafts, coloring and games. Some communities even go so far as to dye rivers or streams green!
What Family Caregivers Want "Relief"

(ARA) - Over 44 million American adults provide care for an aging loved one, and that number is only expected to rise as the Baby Boomer generation ages. Caregiving can be very rewarding, but the day-to-day tasks are demanding -- it can start as simple as providing transportation to and from doctor appointments, grocery shopping, preparing meals and organizing medications, but grow over time to include bathing, dressing and feeding a loved one. And, family caregivers often juggle caring for a loved one while working at a full-time job. What gets dropped in this balancing act is the caregiver's own health and well-being.

Evercare, one of the nation's largest care coordination programs, recently surveyed family caregivers who had previously reported their health had declined due to caregiving -- a representative sample of the 2.5 million caregivers nationwide -- to find out what services they felt would help them most.

Of the several services described to them, these caregivers preferred:

* Respite relief -- a professional home health aide to stay with their loved one to relieve them of their caregiving responsibilities so they can get a break (50 percent)
* A mobile health service in their neighborhood so they can drop in for routine health services (63 percent)
* An objective consultant who can help them get more support from friends and family (51 percent)
* Someone who calls to check in on their own health, and remind them of personal health goals (47 percent)
* Help learning how to do caregiving tasks more efficiently (45 percent)

Fortunately, the government is taking notice. Congress and President Bush just signed the "Lifespan Respite Care Act," which provides $289 million over the next five years for states to make respite care available to family caregivers, allowing them to run errands, visit their own doctors or just relax.

"The Evercare Study helped sound an alarm bell -- for caregivers but also for our legislative leaders -- that caregiver health is a serious public health issue," says Sherri Snelling, director of caregiving services at Evercare. "Providing relief -- which we spell R-E-S-P-I-T-E -- is exactly what caregivers told us they need. Our message to these important family caregivers is 'You are not alone -- help is available.'"

Many caregivers don't know that programs exist to help them with their daily tasks, or don't take advantage of all the available resources. Evercare offers health plans for people with Medicare and Medicaid in many states that include respite services to help caregivers get a break and cope with the day-to-day challenges of caring for a loved one. Evercare also has a program called Solutions for Caregivers, primarily offered through employers benefit plans, that gives caregivers access to expert advice from a Care Manager who can help manage their loved ones needs and develop a personalize plan for future care.

When you help a caregiver, you're really helping two people. To find out more about Evercare, contact (866) 323-7568 or visit www.evercarehealthplans.com.

"The Evercare Study helped

Courtesy of ARA Content
Update Your Home Décor Instantly With Flowers and Indulge Yourself

(ARA) - Flowers are an easy and simple way to refresh your home. Not only does a flower bouquet add instant style and personality to a room, but it's a treat for your overall well-being. In fact, according to a behavioral research study conducted by Nancy Etcoff, Ph.D. of Harvard University Medical School and Massachusetts General Hospital, people feel more compassionate toward others, have less worry and anxiety and feel less depressed when fresh-cut flowers are present in the home.

"Living with flowers can provide a boost of energy, happiness and enthusiasm," says Jill Slater, flower designer for Flowerpossibilities.com. "Not only do flowers enhance the atmosphere of your house or work place, but overall they make people feel more positive. Like a relaxing spa treatment, flowers can enhance your mood and rejuvenate not only a room, but how you feel."

Flowers are an easy way to enliven your home décor and a great way to indulge your senses. It’s proven that flowers can be a true treat and Flowerpossibilities.com offers fun ideas to display these beautiful blooms to satisfy your hunger for beauty.

Brunch Bunch Colorful and fragrant bunches of blooms can turn regular brunches into a bountiful feast for the eyes. Try using a porcelain creamer filled with lavender, freesia and mums in colorful motifs. Use teacups to enhance décor. Consider taking cupcakes with frosting, placing in the teacup, and adding a single flower on top of the fluffy frosting.

Cool Carnations Floral Sundae Use classic sundae glasses to create a unique treat to display. Carnations work great to mimic a real sundae's ice cream and whipped topping. A small red rose bud tops off the theme as a faux cherry.

Bakery Blooms Use a footed cake plate or decorative plate as a base for your delicious looking flower display. Soak floral foam and shape on plate in form of a cake. Use white mums on the sides and top as frosting. Fill in the center with colorful carnations. Use ribbon and other accessories for the final touches on the cake.

Indulge your mind, body and senses with a healthy treat that will enhance your home décor. For more design ideas, or to order a free brochure about decorating with flowers, visit www.Flowerpossibilities.com.

Courtesy of ARA Content

1950’s Memories

These statements were quite common during the 1950s. How many of today's sayings will ring as true 50 years from now?

1. I'll tell you one thing, if things keep going the way they are, it's going to be impossible to buy a week's groceries for $20.

2. Have you seen the new cars coming out next year? It won't be long when $5,000 will only buy a used one.

3. If cigarettes keep going up in price, I'm going to quit. A quarter a pack is ridiculous.

4. Did you hear the post office is thinking about charging a dime just to mail a letter?

5. The Government is wanting to get its hands on everything. Pretty soon it's going to be impossible to run a family business or a farm.

6. If they raise the minimum wage to $1, nobody will be able to hire outside help at the store.

7. When I first started driving, who would have thought gas would someday cost 50 cents a gallon. Guess we'd be better off leaving the car in the garage.
Irish Humor

What do you call an Irishman who knows how to control his wife?
A bachelor.

Definition of an Irish husband:
He hasn't kissed his wife for twenty years, but he will kill any man who does.

Courtship is a time during which the girl decides whether she can do better or not.

Dinny was standing in the street the other day when an English chap came up to him and said, "I say old chap, could you show me the way to the nearest boozers?"

Says Dinny, hopefully, You're looking at him."

An Irishman who had a little too much to drink is driving home from the city one night and, of course, his car is weaving violently all over the road. A cop pulls him over.

"So," says the cop to the driver, "where have you been?"

"Why, I've been to the pub of course" slurs the drunk.

"Well," says the cop, "it looks like you've had quite a few to drink this evening".

"I did all right," the drunk says with a smile.

"Did you know," says the cop, standing straight and folding his arms across his chest, "that a few intersections back, your wife fell out of your car?"

"Oh, thank heavens," sighs the drunk. "For a minute there, I thought I'd gone deaf."