10 Keys to Stay Motivated & On Top Of Your Game

What do you dream about? Do you have dreams of building a blockbuster business, material wealth, taking great vacations, writing the next bestseller, or contributing to the lives of others? Whatever dreams you have big or small, staying motivated can sometimes be a challenge.

Initially, many people hit the ground running towards their goals with great enthusiasm and determination. They keep up the momentum for a period of time and often lose steam, (emotionally, psychologically, physically, and spiritually) for a variety of reasons. That's just part of being human!

Below are 10 ways to help you stay motivated and moving forward:

1. Create a vivid and compelling vision of the dream you wish to achieve. Consider all the aspects of your life as if you were looking through a wide-angled lens. See your vision take form as a picture in your mind. Write down all you see, think, and feel. See yourself in that vision of having what you want. Now, you must make the decision to say YES to have what you want. Making the decision is the first step to committing to a dream. In other words, how bad do you want it and what are you willing to do (or be) to have your dream?

2. Identify what stimulates and motivates you. It might be certain music, books such as Lance Armstrong’s amazing success story, exercise, magazines, places or people (heroes, role models) that get you juiced and pumped. Notice the people and things that drain and de-motivate. See #4.

3. Be passionate. Webster’s dictionary defines passion as "A powerful emotion or appetite; boundless enthusiasm". Passion is a great motivator and if you are motivated you are passionate! These are three strategies to keep your passions strong:
   - Revisit your vision, goals, and dreams daily so they stay up front in your heart and mind.
   - Design a "rough day" strategy. We all have days when it seems nothing is going the way we want. When faced with "one of those days", having a strategy on how to stay positive will be key to sustaining motivation. For me personally, I meditate to quiet my mind so that I feel more centered. Reaching out to a close friend also helps me regain perspective to recommit to my dreams.
   - Take control of your environment. We make choices everyday about the people we associate with, where we live, the work we do, and where we go. If your environment isn’t supporting you, identify three actions you will take immediately to improve your situation so that you can move forward. See #4

4. Decrease and eliminate energy drains. What are you tolerating and putting up with that drains your energy? We put up with, accept, take on and are dragged down by: clutter, people’s behavior, unmet needs, unfinished business, repairs, avoided conflicts/confrontations, and negative thinking. Clearing out clutter and energy drains will dramatically free up energy and lift your spirits.

5. Practice extreme self-care. I use extreme because taking the best care of YOU is serious! Give yourself permission to make self-care a priority. When needs are not being met, negative thoughts and reactions intensify. When we feel replenished, we handle situations (Continued on page 16)
Activities You Can Do
By Linda Lucas, AD
Site Owner: The Activity Director’s Office
http://www.theactivitydirectorsoffice.com

Throw a Basket Making Party

Source: http://www.hersheys.com/easter/home.asp

With some careful planning, you can transform your next get together into a fun event. Have your residents B.Y.O.B (Bring Your Own Basket - which you furnish) and throw a fabulous Easter basket making party.

Here are some tips and ideas to help make your party a success:

Make sure to open up bags of candy before the party and place the candy in brightly-colored bowls. Don’t forget to include a nice variety of Easter candies and chocolates from HERSHEY’S.

You’ll want to have variety of craft supplies and tools to help let your imaginations fly. Some great things to keep handy are buttons, pipe cleaners, glue, scissors, glitter, ribbons, and lots of colorful Easter grass.

Try displaying all your Easter supplies in pretty photo boxes. Once the party is done, put the lids on, write the contents on the boxes, and easily store them away for next year.

To make your clean up a snap, spread a disposable paper tablecloth over your table. Once your residents are done assembling their baskets, just roll up the tablecloth and throw it away.

In place of baskets, try using clay pots. They’re inexpensive and easy to find at any craft supply store or gardening center. Make sure to wipe down the pots with a damp cloth, and then add some Easter grass and candy. You can spice up your pot, by painting or stenciling designs on the outside or by simply tying a ribbon around the base.

As a party favor for your residents or a sweet embellishment for your baskets, place some ROBIN EGGS Candy Miniatures into a little bird’s nest. You can find the nests at any craft store or from a floral supply company.

You can also help your residents to participate by providing them something different and fun for the Easter baskets besides candy. Some great ideas are: crayons, coloring books, books, movies, and little stuffed toys.

Create a little excitement with an Easter giveaway. Compose an eggs-tra special basket as a prize and then hold a drawing or play a fun trivia game to decide the winner.

Try using a plastic sand pail and shovel as an Easter basket. The pail can be filled with Easter grass, small toys, and candies. Once they’re done with the goodies, they can use the pail later on. Other ideas to try are: a toy dump truck with treats in the back, a baseball or football helmet filled with candy, a purse or a backpack brimming over with Easter fun.

Remember: the intent of making the Easter baskets is to give them away to their family, friends and visitors.

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http://www.theactivitydirectorsoffice.com

APRIL 2007
The Legend of Easter Lily
©2005 by Dot McGinnis

Loveliest flower was I to see, In the garden of Gethsemane. My head erect, my pure white face Such a delight for all to embrace.

For all who entered the garden gate, I'd boldly lift my head and wait 'Til they gazed upon my beauty fair. All who came would see me there.

On the night before he was crucified, Jesus entered. He passed me by. He wept and prayed in silence there. All my friends bowed their heads in prayer.

In pity and sorrow they gathered round, Except for me. I could not be found. I would not join in. I was much too proud. Bow my lovely head? No, I would not allow!

News spread quickly, the very next day. All 'round the garden, I heard everyone say Jesus was going to be crucified. Oh, I wanted to run. I wanted to hide!

I'd been much too vain to hang my head low, That first Good Friday; long, long, ago. I would not join the others who prayed with our King. Now, how can I bear such a sorrowful thing?

No longer will I proudly face the sun. My head will hang lowly, ashamed of what I've done. My blossom forever will down turned be, In honor of Jesus; at Gethsemane.

©2005 by Dot McGinnis
dot720@wpa.net
http://our.homewithgod.com/heavenlyinspirations
http://groups.yahoo.com/group/HeavenlyInspirations-originalwritings

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About Jewish Passover

Passover is an eight day celebration observed each year by the Jewish religion. It commemorates the freedom of Jewish slaves from Egypt during the reign of Pharaoh Ramses II.

Families celebrate Passover by having a seder. With special foods, songs, and customs, the Seder is the focal point of the Passover celebration. Seder means order, and the passover story is read in order from a book called a haggadah.

Fearing that Jews were becoming too strong, a Pharaoh decreed that all male Jewish babies were to be killed. Jocheved and Amran, a Jewish couple, wanted to save their infant son - so they put him in a basket that floated him down the river. The infant was rescued by the Pharaoh's daughter and she raised him as her own son. She named the baby Moses, which means "take from the water."

When Moses grew up, he empathized with the Jewish slaves and tried to get the Pharaoh to free them. The Pharaoh refused - so there were 10 plagues sent down to Egypt: Blood, Frogs, Lice, Beasts, Cattle Disease, Boils, Hail, Locusts, Darkness, and Slaying of the Firstborn. The name Passover comes from the Plague of Slaying the Firstborn. The Angel of Death passed over the homes of the Jews who had put lambs blood on their doors.

After the 10th plague, Pharaoh agreed to let the Jewish slaves go. They gathered up their belongings quickly, and didn't have time for their bread to rise, so they had to bake it and take it the way it was. This is why the Jewish people eat matzah during Passover.

As the Jews were fleeing, Pharaoh changed his mind, and sent his army after the people to bring them back. Moses parted the Red Sea for the Jews to cross, and as soon as they were safely to the other side, the waters closed on the soldiers, drowning them all. The Jewish people were free.
To Care Plan or Not to Care plan
By Debbie Hommel, ACC

There has been much debate on some of the activity based bulletin boards about the need to write an “activity” care plan for “every” resident in the facility. Some facilities have made it a policy to mandate an activity specific care plan (meaning an activity based problem, activity specific goal and activity interventions) for every resident – regardless of their functional or cognitive status. Maybe this is in response to the specific references to care planning within the new guidance for F-248.

Before putting in all the time and effort to create individualized activity care plans for every resident who resides in the facility, the activity professional should consider the following points:

1. If the decision to add an activity care plan for every resident is based on the new guidance, it should be noted that nowhere in the guidance does it say we have to have such a care plan.

2. All references to care planning within the guidance support the interdisciplinary model of care planning. Most references in the guidance refer to the care plan as the “comprehensive care plan” and refer to activities involvement as the “activities component” of the care plan. It does not say anywhere there needs to be a separate activity specific problem, goal or interventions.

3. The act of separating the activity component from the comprehensive care plan (through a separate activity based care plan) does not support the integrated, interdisciplinary intent of the new guidance. If the activity department separates the activity based interventions from the main comprehensive care plan, symbolically – it minimizes the responsibility and involvement of the team in implementing quality of life interventions.

4. If we use the comprehensive care plan as the activity care plan and integrate activity based interventions throughout interdisciplinary issues, the team can be more readily involved. An integrated approach to quality of life and activity participation is a team responsibility, as is stated throughout the new guidance.

5. Some activity professionals make the mistake of thinking “if the resident has not triggered I do not need to care plan anything”. Nothing could be further from the truth. Many of our residents do not trigger (which is another discussion) and if we used that as criteria to care plan, very few residents would have any care plan interventions at all.

6. The guidance states that many residents would most likely benefit from some sort of activity care plan intervention. In order to achieve this, the activity professional needs to review the entire care plan to see where we can assist or integrate. The guidance has over five pages of suggested care plan interventions to be considered for a variety of interdisciplinary issues. The goal of the activity professional is to imbed quality of life and activity based interventions into as many interdisciplinary care plan needs or concerns as relevant.

7. What does one do if the comprehensive care plan offer minimal means to integrate quality of life or activity based approaches? Some facilities have simplified their care plans a great deal and have adopted the philosophy that if it is a “standard of care or standard of practice” it should not be on the care plan. The activity professional would need to evaluate if the individual resident had some special needs regarding activity involvement or quality of life that went beyond standard of care, even if the resident did not trigger. In that case, the activity professional should introduce the need to the care plan team and within the care plan, actively involving the care plan team into the new concern or need. Care plans can address needs as well as problems. If a resident is in a special program or has specialized interventions developed to meet a specific need, it should be noted with the care plan. More importantly, the team should be a part of that care plan as they should be ensuring the resident is assisted to the special group or the specialized interventions are implemented consistently.

Care planning trends come and go. As activity professionals, we need to rely on our knowledge of therapeutic care planning and the regulations to guide us. Our ultimate goal is to address the needs and problems of our residents and clients through an integrated team approach. - END

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/

CMS announces its “2007 Action Plan for Further Improvement of Nursing Home Quality”
Will ADs see a big increase in their responsibilities?
By Bill Freiberg, Publisher

The Centers for Medicare and Medicaid Services (CMS) has announced a major “Action Plan” designed to improve…and equalize…quality of care standards throughout the nation’s nursing homes.

The 38-page document contains a lot of major new changes that the CMS expects to impart on nursing homes in order to “provide reliable care of consistently high quality.”

As per usual, though, enforcement of any new guidelines and initiatives is a key factor as to whether or not any new CMS rules are followed by nursing homes.

Recently, members of Congress and others have complained that standards and enforcement vary far too much by state and that more states’ survey activities need to be brought more in line with CMS nursing home standards. And their new “plan” may be a part of that process, depending upon how CMS enacts and enforces this new initiative.

Payment schedules may differ according to quality of care

When CMS launched its new Activity and Psychosocial Outcome Severity guidelines last year, many professionals started watching closely to see how strictly those new rules were enforced.

Reason: They were so comprehensive and detailed, and required so much major change in how nursing homes handled daily activities of individual residents, that they could require major budget changes at many facilities to even begin to accomplish.

In analyzing the details of these new guidelines, it became obvious that in order to even begin to comply, activity directors would soon become among the most significant members of the nursing home staff, with sometimes major budget increases in order to do the job. Otherwise, the home would risk not being in compliance.

The big question: How tough is enforcement?
Whether or not this is occurring, we’re not sure. Current Activities hopes to explore this situation in future editions. However, as we’ve pointed out many times, it’s the strength of enforcement of the survey inspections that makes all the difference.

And we’ve heard reports from various ADs varying from “nothing has changed” to “we’ve had to enact big changes.” And the difference is apparently largely on how different states enforce the new CMS rules.

Apparently, CMS is finally starting to take all this seriously and will soon start

(Continued on page 15)
New Activity Director- What to do first?

Assisted Living, Nursing Homes, Adult Day Care and CCRC’s are being built faster than we are turning out experienced, certified and qualified Activity Directors. Activity Directors who are experienced are switching facilities and types of communities they work in for many reasons. When a new director begins at a facility often times the director jumps right in to make changes with no clear vision or plan for the changes. Here are some recommendations before making changes and to help guide the new director through the process.

Administrators should require that the activity director report back in 30 days with written plans, objectives and goals the new director wants to implement. One week is just not enough time to provide a sound, well thought out and effective plan.

1. On the first day, the Executive Directors should provide to the Activity Director; job description, facility department head names & phone numbers, past survey results, Resident Rights, survey expected visit date, state regulations, federal regulations (Long Term Care), JCAHO requirements, policy and procedure manuals, budget, dates / times of facility meetings and resident council minutes. Additionally, the Activity Director should be provided with an Activity Care Plan Book, MDS book, spend down sheets, staff budgeted hours and past Quality Assurance reports. If, you are participating in services such as Press Ganey, the Activity Director would need to see these results and understand this program. If, you have a board, community service board, organizations committed to your community and or clergy committees, the Activity Director needs to have those names and phone numbers. Dates and times should be set up for the Director to meet with these special groups and organizations.

The Executive Director should plan enough time to go over these materials with the new director. At minimum three hours should be allotted for this meeting. Additionally, the Executive Director should provide in writing concerns, expectations and time frames for meeting these expectations.

An Activity Director should never begin the job without this information. For example, it is amazing how many directors have never read the state regulations and pending regulatory changes. It’s important to note any regulations that pertain to the Activity Department, documentation, position requirements, dementia unit, pet therapy, volunteers and resident rights. The director should have an overall basic understanding of all the regulations. If the director is switching from assisted living to nursing home or medical adult day care setting, it is even more important that they understand the regulations. All of these tools will assist the director in having a successful outcome.

If, you have a consultant, arrange a time for the Activity Consultant to meet with the new director. If this is a brand new director and new to the field, you may want to bring in a consultant for a couple of months as they can provide clear objectives and time frames for meeting goals.

This may seem like a little thing, but make sure the director has office supplies. Provide a tour of the community and or clergy groups and organizations.

and give inside information like the best place to park or restaurants to order food from. It is amazing how many Executive Directors do not provide a department head luncheon to welcome the new department head. Finally assign a mentor that the new director can go to for questions. All of these tips will ensure the new director gets started on the right foot and that the Administrator and Activity Director have clear objectives.

2. The Activity Director needs to complete a comprehensive assessment of the community as well as population and calendar analysis. These tools can be purchased at http://www.activitytherapy.com

3. Conduct a population and calendar analysis. The new director must know the residents, diagnosis, back grounds, interests, cultures, spiritual interests, leisure pursuits and therapy schedules.

(Continued on page 17)

ABOUT SANDRA

Sandra Stimson has experience as a corporate consultant, Corporate Trainer and National Speaker. Her experience is in long term care, as Activity Director, Director of Alzheimer’s Units and Assistant Administrator of a 550 bed long term care county home. She is Co-founder of Pet Express Pet Therapy Club, is a Life Replay Specialist. Sandra implements dementia units nationwide. Sandra has written several books, Volunteer Management Essentials for Long Term Care and Pet Express Pet Therapy Program. Sandra has been a facilitator for Alzheimer’s support groups and is the Awards Chair for the NJ Association of Activity Professionals. Sandra is the Executive Director of National Council of Certified Dementia Practitioners http://www.nccdp.org

http://www.activitytherapy.com offers resources for health care professionals in many areas of dementia care, care plans, Snoezelen products, dementia activity calendars, adult day care calendars, sensory calendars, reminiscence videos for dementia, activity books, and dates to remember, party supplies, resources and links.
Activity Humor
By Silvana Clark

Since April is National Humor Month, why not look for extra silly ways to add humor to your programs? Here are some ideas to make residents and their family’s wonder where you come up with these ideas!

How about a few magic tricks? Don’t worry, you don’t need to cut anyone in half. These tricks are easy yet have a big impact.

The Non-Popping Balloon: Ahead of time, blow up an ordinary balloon and tie the end shut. Take about a 2” strip of ordinary tape and put it anywhere on the balloon. Now add another piece of tape on top, forming an “X”. With great flourish, show everyone that you have an ordinary balloon. Bang it in the air, so people know it isn’t a trick balloon. Bring out a straight pin. Make up some sort of magician-sounding patter and announce you will put the needle in the balloon and it will NOT pop. Poke the needle right through the middle of the “X” with the tape. The balloon will slowly lose air, but will not pop. Let everyone see that yes indeed, you did stick the pin in the balloon without popping it. To show the balloon is real, remove the pin and quickly pop the balloon on any other location. The crowd is guaranteed to burst into applause!

The Amazing Appearing Name: Here’s a trick you can use over and over for different occasions. Let’s say you want to honor someone having a birthday. Ahead of time, when no one is watching, use clear chap stick to print the birthday person’s name on the underside of your arm. Then stand in front of the group, announcing you have nothing up your sleeve. Wave your arms back and forth so people see your arms look “normal”.

Again, in your best magicians’ voice, announce, “Ladies and Gentlemen. We’re here to celebrate a very special person having a birthday today. That person’s name will now be revealed to all of us. At this point, simply sprinkle some colored sand from your craft closet or even some flour, over your arm with the Chap Stick. The flour sticks to the Chap Stick. Shake tour arm to remove excess powder and the person’s name will magically be written on your arm. Watch out David Copperfield!

After you’ve amazed everyone with your magical skills, it’s time to add humor with this humorous type of talent show. This month, focus on every resident’s special talents. Set aside an evening or two for a “Wild and Wacky Talent Show”. Residents and staff take turns demonstrating their unique talents. One slight difference…the talent has to be something that wouldn’t be seen at a traditional talent show. Oh no! These talents include skills such as your nursing director balancing a broom handle on the palm of her hand or a resident demonstrating how he can burp on command. (Now that’s a skill!) Can you regale your residents by doing your perky high school cheer-leading routine? One assisted living center had two displays of “un-talent” each day at lunch. By the end of the month, the displays of “talent” consisted of popcorn popping demonstrations and knuckle cracking contests!

Add some humor to your normal game of BINGO. Make up new cards with HALLELUJAH across the top, and numbers down below. Play as you would the regular game, except the winning person has to yell out “Halleluiah”!

Tell your residents they are all getting their own aquariums for their rooms. Go to the Dollar Store and buy inexpensive jars of blue styling gel. Put a few Tablespoons of gel in a re-sealable bag. Toss in a few small plastic or gummy fish. Seal the bag and reinforce with a trip of duct tape. Give your residents their own mini-aquariums.

April 25th is National Penguin Day. Add humor to an ordinary day by:

- Dress in Black and White to look like a penguin.
- Serve a black and white smorgasbord of Oreo cookies, mashed potatoes, black eyed peas, licorice, rice, chocolate pudding, milk, etc.
- Play penguin waddle with the staff as residents cheer. Put a foam ball between your knees and race to see who can waddle over the finish line first.
- Tell penguin jokes. Why do penguins sit on marshmallows? (So they won’t fall into the hot chocolate.)
- Why are penguins popular on the internet? (Because they have web feet.)

Keep laughing!

About Silvana
Silvana Clark began her activity/recreation career 20 years ago as a spotter for kids on a trampoline. Every Saturday, for four hours, she'd watch kids bounce up and down, up and down, and…you get the idea. Since then she's written eleven books and is a popular speaker at conferences around the country. She was a keynote at the British Columbia Activity Professionals conference and recently gave a keynote for the Wisconsin Activity Professionals Conference. Her sessions are filled with humor, practical information and small group activities. She is recovering from her appearance on the Fox reality show, Trading Spaces, where she spent a week living with a family that saw no need for any kind of fun activities. Contact her at http://www.panicbuttons.com or http://www.silvanaclark.com

- END
Care Plan Confidence  
By Kimberly Grandal

The role of activities in the IDC process is crucial. Activity professionals bring a wealth of knowledge into the care plan process, defining the resident’s specific individual traits, preferences, lifestyle, religious/spiritual expressions, behavior, likes and dislikes, leisure lifestyles, relationships, social skills, cognitive skills, memory recall, responses to sensory stimulation, and more. Without the activities component of the care plan, there would be a medical care plan rather than a quality of life approach.

As an Activity Director, I have spent countless hours in care plan meetings. Too many to count! At times, the meetings seemed to be endless. Unfortunately, there are many times in which there is no activity representation, leaving the IDC summary and the care plan, absent of vital, personal, individualized, information and strategies.

As a consultant, I train activity professionals to be confident, outspoken, and outcome based during the care plan process. I have witnessed care plan meetings where the MDS coordinator skips the activities component or simply states the types of activities the resident participates in, rather than the specific responses residents have to activity interventions and programs. Other times, the IDC team looks to the activity professional for recommendations, answers to important issues such as pain, behavior, psychosocial issues, falls, restraints, nutrition, resident rights, communication, and so on.

Often times, in care plan meetings, I have experienced disagreements with the IDC team in terms of resident abilities and responses. I explain to the team that residents may respond differently when in a social setting, than they do during medical care. For example: residents may respond to a variety of sensory stimulation techniques such as opening their eyes, vocalizing, smiling, etc. but do not respond when provided with ADL care. Residents may also find it easier to express themselves verbally or non-verbally when in a group setting or a one to one intervention with an activity staff or volunteer. I encourage activity professionals to voice these observations and not back down because of the differences in observations.

I was once dismissed for reporting that a resident in a semi-comatose state seemed to be responding to the music therapy sessions as evidenced by smiling. I was told that it was impossible for the resident to voluntarily respond to external stimuli, therefore, the observations reported by the Music Therapist, were overlooked. Several months later, after bi-weekly music therapy sessions, the resident responded to the Music Therapist with a “thumbs up” movement. This was reported to the IDC team and this time, taken seriously. The resident began receiving Physical, Occupational, and Speech Therapy, and after about nine months of therapy, the resident was off of the feeding tube, able to move his upper extremities, speak, socialize, sing, etc. He was soon discharged home. I tell activity professionals this story to encourage them to speak out and share their observations with the IDC team, regardless of the differences of opinion.

It is also important for activity professionals to be an active member of the IDC team to learn as much as possible about clinical conditions, medications, other disciplines, etc. I was always one to ask a lot of questions. The care plan meeting is the best place to learn this type of information. Knowledge is power and helps build confidence. This learned information is then used to formulate professional assessments, RAPs, care plans, programming, and so on.

Activity professionals often feel there is a lack of understanding about the role of activities and they are right. Participation in the IDC process is one of the methods we educate others about what we do, why we do it and the benefits to the residents. For care plan information, resources, and samples, visit http://www.recreativeresources.com/careplanning.htm

For those of you going for Track 5 NCCAP Certification, or would like to enhance your care planning and documentation skills, Re-Creative Resources will be hosting an all-day documentation workshop entitled, “Taking the Write Path: Recreation Documentation for Quality of Life” on April 12, 2007 at the Canterbury Care Center in Cedar Grove NJ. For more information visit http://www.recreativeresources.com/seminars.htm. - END

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About Kimberly

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

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

Re-Creative Resources  
By Kimberly Grandal, CTRS, ACC, Executive Director  
http://www.recreativeresources.com
PART 2 of 2

In Part 1 you learned what the six dimensional wellness model is and why you should consider incorporating it into the nursing home/activity program. This second article will speak to how to incorporate it and give you some specific examples.

Incorporating the six dimensional wellness model into your nursing home/activity program may be as simple as changing your activity department philosophy, tweaking your policies and procedures, and adding new and interesting activities to your already great program. But if you are still in the “bingo, birthday party and church” model of the old days, you will have a lot more work ahead of you.

It does require you to change your focus to meeting individual needs, which corresponds with the rewrite of the Interpretive Guidelines for F248/F249. I also believe it will help increase the participation of the younger generation we see in our Medicare residents, who expect more and very different things than our 85/90 year olds. Many of the suggested activities that follow in the sections below are things that the “baby boomers” already do. I questioned a few “baby boomers” about their expectations of a nursing home stay and here are a few responses I received (no surprise to me as I’m there myself): We don’t want a once a week shower going down the hall in a shower chair; spa treatment, massages and the like are what we want; Computer labs and access to the Internet; choice for our meals and setting our own daily agenda, maintain our independence and routine (we are a generation who take care of ourselves and are used to getting our way after all!) are just a few repeated comments I received. These actually go beyond wants and are perceived as expectations by many. How does your facility fit in with these expectations? Most likely, there’s a long way to go to get here! This is also what is coined as Culture Change (another whole topic I won’t discuss here.)

I have separated the six dimensions and listed some specific activity programming ideas that fall into each category.

(Continued on page 13)
The NCCAP Page
The National Certification Council of Activity Professionals
http://www.nccap.org

Mission Statement: The National Certification Council of Activity Professionals is a credentialing body, which sets standards and criteria to ensure that those we serve have optimal life experiences.

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): workshops, seminars, college courses that keep the activity professional abreast of present trends. NCCAP's Body of Knowledge contains 27 areas of education with many subheadings that are applicable.
D. CONSULTING EXPERIENCE May include: advising a group, working one to one, teaching a class, conducting workshops, publishing professional articles, supervising students and/or managing 5 or more activity staff persons.

FEES: The cost of being certified initially ranges from $45 to $65 depending upon the level. Renewal is required every two years with 20-40 hours of continuing education and a fee of $40.

For further information visit http://www.nccap.org

BUTTERFLY

One day while walking through the woods, a man found a cocoon. He decided to take the cocoon home to watch its transformation into a beautiful butterfly. He gently placed it on his table and watched it for several days.

One day a small opening appeared and the cocoon started to move. The old man sat and watched it for several hours as it struggled and struggled to force its body from the cocoon.

Then it seemed to stop making any progress. It appeared as if it had gotten as far as it could and was unable to go any farther. Finally, the old man feeling sorry for the cocooned butterfly, decided to help the butterfly. He took a pair of scissors and snipped off the remaining bit of the cocoon. The butterfly then easily emerged.

But it had a swollen body and small, shriveled wings. The man continued to watch the butterfly because he expected that, at any moment, the wings would enlarge and expand to be able to support the body, which would contract in time.

Neither happened! In fact, the butterfly spent the rest of its life crawling around with a swollen body and shriveled wings. It never was able to fly.

What the man in his kindness and haste did not understand was that the restricting cocoon and the struggle required for the butterfly to get through the tiny opening, were God's way of forcing fluid from the body of the butterfly into its wings, so that it would be ready for flight once it achieved its freedom from the cocoon.

Sometimes struggles are exactly what we need in our life. If God allowed us to go through our life without any obstacles, it would only cripple us. We would not be as strong as what we could have been.

And we could never fly.

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

Monthly Events

Alcohol Awareness Month
Cancer Control Month
Child Abuse Prevention Month
Community Services Month (California)
Freedom Shrine Month
Grass Month
Holy Humor Month
International Amateur Radio Month
International Guitar Month
International Twit Award Month
Keep America Beautiful Month
Listening Awareness Month
Mathematics Education Month
Month of the Young Child
Multicultural Communication Month
National Anxiety Month
National Florida Tomato Month
National Food Month
National Garden Month
National Home Improvement Month
National Humor Month
National Knuckles Down Month
National Occupational Therapy Month
National Parkinson's Awareness Month
National Sexually Transmitted Diseases Education and Awareness Month
National Welding Month
National Woodworking Month
Pets Are Wonderful Month
Philatelic Societies Month
Prevention of Cruelty to Animals Month
Sea Cadet Month
Sports Eye Safety Month
Stress Awareness Month
Thai Heritage Month
VD Awareness Month
Famous Weeks in April...

Week 1
Consider Christianity Week
Hate Week
Medic Alert Week
National Bake Week (begins 1st Mon)
National Birth-parents Week
National Healthcare Consumer Advocacy Week
National Public Health Week
National Reading a Road Map Week
Publicity Stunt Week
Straw Hat Week
Week of the Young Child

Week 2
Be Kind to Animals Week
Harmony Week
National Building Safety Week
National Garden Week
National Guitar Week
National Home Safety Week
National Library Week
National Medical Laboratory Week
National Patient Advocacy Week
Private Property Week (10th-16th)

Week 3
Astronomy Week

Week 4
Administrative Professionals Day and Week
Big Brothers/Sisters Appreciation Week
Consumer Protection Week
Egg Salad Week
Forest Week
Grange Week
Intergenerational Week
Jewish Heritage Week
Keep America Beautiful Week
National Give-A-Sample Week
National Lingerie Week
National Pain Management Week
National Volunteer Week
National YMCA Week
Professional Secretaries Week
Reading Is Fun Week
Sky Awareness Week
T.V. Turn-Off Week
Teacher Appreciation Week (begins Last Mon)
Week of the Young Child
Clipart for the Month*

*You may copy any clipart you find in Activity Director Monthly. To copy: right click on the image you want; left click on “save picture as”; select a folder on your computer and click “save”.

NAAP 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.

A person with physical wellness:
- enjoys a healthy body and high energy levels
- has good cardiovascular endurance, muscular flexibility, and muscular strength and endurance
- practices good nutritional choices, strives for balance and variety among the recommended foods
- exercises regularly
- does flexibility and/or stretching exercises daily

Activities that would promote this are:
- Anything promoting an active lifestyle, eating nutritious foods and practicing proper self-care. A general fitness workout for strength building, Tai Chi, yoga (It can be done in the w/c, Creative Forecasting featured an article on yoga in the past and I have incorpo-
A person with emotional wellness:
- is self-confident and respectful of others
- has a healthy sense of play and humor
- gets satisfaction from simple, everyday pleasures
- is comfortable with asking for help with problems when necessary
- copes well with stressful situations
- feels comfortable expressing thoughts and feelings to others
- becomes involved in programs and activities that require skills and talents
- is able to say “no” without feeling guilty
- enjoys relaxation without using drugs

Activities that would promote this are: relaxation activities, yoga, meditation, deep breathing exercises, sensory rooms, massage, sensory/serenity gardens, guided imagery, support groups within the facility or community, laughter clubs, clean joke club, promoting residents expression of feelings, encouraging daily decision making, building up residents self-esteem.

A person with intellectual wellness:
- welcomes new ideas and experiences
- sets realistic personal and professional goals

Activities that would promote this are: voluntar work, learning on one's own, games like Millardy, Wheel of Fortune, Bunco, Scrabble, Yatzee, cards, and many, many others that require the use of the mind (I call this Mind Arobics), speakers, anything that teaches them something new, taking up a new hobby, crafts. Anything that encourages individuals to expand their knowledge and skills through a variety of resources and cultural activities.

A person with occupational wellness:
- determines occupational interests
- achieves personal satisfaction through meaningful activities
- participates in volunteer work
- learns a trade
- pursues a hobby

Activities that would promote this are: activities that bring community groups in i.e. Hmong (or other cultural) dancers, ethnic festivals, adopt-a-grandparent, fundraising activities that help the less fortunate i.e. humane society, persons in disaster areas. Anything that promotes creation and maintenance of healthy relationships with others and nature.

A person with spiritual wellness:
- seeks inner peace and well-being
- has compassion and a sense of justice about global concerns
- experiences forgiveness and acceptance
- has reservoirs of strength for times of loneliness, suffering and loss
- learns to meditate or pray
- learns more about their faith
- is part of a spiritual community
- practices a spiritual discipline that brings meaning to one’s life
- shares one’s spiritual journey with others who hold similar views

(Continued on page 15)
Activities that would promote this are: scheduled church services of different denominations, religious groups, prayer groups, rosary groups, devotional groups, daily devotions, serenity gardens (or other quiet places for reflection, contemplation, meditation, prayer), Spa activities, Memorial Services (formal service to recognize a collective group), Memorial Remembrances (an area created to set up a Memorial for each resident as they pass away), Comfort Carts, Meditation groups, Yoga, walking in nature, simply sitting quietly alone, practicing mindfulness, keeping a daily gratitude journal or any journaling. The spiritual dimension is a very personal matter. It’s seeking meaning and purpose in human existence, including developing a strong sense of personal values and ethics.

The six dimensional wellness model gives you a new way to market your facility and activity program. Today’s residents are much more informed on the long term care market and they increasingly have greater expectations of service and a desire to be actively engaged in life. We, as Activity Professionals, are better prepared to assure that our residents have choices toward a more optimal existence – wellness of the body, mind, and spirit! - END

The plan

Here are some of the highlights of the plan:

**Substantial improvement in effectiveness of nursing home surveys, standards and enforcement of regulations.** The CMS says it will undertake more than 14 initiatives this year in this area, including improvement of investigations of complaints against nursing homes.

As we’ve reported in past issues of *Current Activities*, some members of Congress have asked the CMS to substantially strengthen its survey process, as they feel it’s often too lax, and complaints and problems are not always equally enforced among the states.

**Quality improvement.** The CMS says it will initiate a quality improvement program in a number of areas, including reduction of restraint use and the overall reduction of pressure sores.

**Culture change in nursing homes to emphasize residents as individuals.** This, says the CMS, means that each nursing home needs to “respect each nursing home resident in order to provide individualized care that best enhances each person’s quality of life.”

The CMS says it will “encourage facilities to change outdated practices, to allow residents more input into their own care,” and also encourage staff to “serve as a team that responds to what each person wants and needs.”

**Staff encouraged to serve as a team that responds to each resident as an individual**

This initiative, if enforced, would certainly strengthen compliance with the new CMS Activities and Psychosocial Assessment Guidelines and dramatically increase the importance…and budgets…of many activity director programs, since they’re at the center of this initiative.

**Improve the coordination of CMS activities with all its “partners,” including the state survey agencies.** This may result in more close alignment and coordination of surveys and enforcement among all the states…which is something Congress has asked CMS to accomplish.

**Study the possibilities of exerting the CMS’ massive “purchasing power” with nursing homes as a method of “exerting leverage to insist on basic levels of quality care.”** In other words, the CMS may pay for nursing home services on the basis of whether or not that home is providing quality care, according to CMS standards.

The CMS suggests that payment schedules may differentiate between excellent, mediocre and poor-quality care.

If enacted, this could be a powerful tool to enforce the quality of care regulations and force many more nursing homes to enact them in their facilities.

We’ll keep you informed as all this rolls out, and see if the CMS is finally going to enforce major changes in nursing homes…and overall improvement of activities of daily living and quality of life issues for residents everywhere. Stay tuned.

- END
LIFE'S 13 RULES

Sometimes we just need to remember WHAT the Rules of Life really are:

1. Never give yourself a haircut after three margaritas.
2. You need only two tools. WD-40 and duct tape. If it doesn't move and it should, use WD-40. If it moves and shouldn't, use the tape.
3. The five most essential words for a healthy, vital relationship “I apologize” and "You are right."
4. Everyone seems normal until you get to know them.
5. When you make a mistake, make amends immediately. It's easier to eat crow while it's still warm.
6. The only really good advice that your mother ever gave you was, "Go! You might meet somebody!"
7. If he/she says that you are too good for other person was right about you.
8. Learn to pick your battles; ask yourself, "Will this matter one year from now? How about one month? One week? One day?"
9. Never pass up an opportunity to pee.
10. If you woke up breathing, congratulations! You have another chance!
11. Living well really is the best revenge. Being miserable because of a bad or former relationship just might mean that the other person was right about you.
12. Work is good, but it's not that important.
13. And finally... Be really nice to your friends. You never know when you are going to need them to empty your bedpan.

Thanks to our friends at Suddenly Senior
http://www.suddenlysenior.com/
etc. This would include types of residents you have in your community such as very low functioning, dementia, high functioning, short term stay etc.

In designing calendars to fit the needs of the populations it’s important to know your population you are designing programs for. You also need to know what your competition activity programs are. You would not to loose a potential customer because the competition has trips and your community does not offer community trips. Planning the programs is extremely important as it pertains to your populations. If you’re an assisted living community who does not allow aging in place, you may have very high functioning residents who want more community programs, trips, speakers, intellectually stimulating programs, self esteem, wellness and empowerment groups. Where a nursing home may have lower functioning residents who may need more tactile, relaxation, reminisce, music, spiritual programs, intergenerational programs and sensory enrichment programs. A facility that caters to dementia residents may need a more structured program that is heavy in exercise, music, reminiscences, relaxation, spiritual and life skills programs. A facility that is strictly rehabilitation and sub acute may need more one on one programs tailored to the rehab needs and out comes.

A population analysis would clearly show the types of residents living in the community and will guide the director in types of programs required, interest, cultural, religion, past interest, cognitive abilities and design a program for the specific types of residents living in the community.

4. The calendar analysis is also very important. Traditionally, facilities had one calendar to fit the needs of the residents. We now know that approach does not work. Planned programs need to be designed to fit all residents. As well as independent activities need to be offered. Calendars need to be developed based on function and cognitive levels, as well as past interest, cultures, spiritual and past / current leisure pursuits. The calendar analysis looks at what you currently have and guides you in what changes you need to make based on the population analysis. The calendar analysis will also show what specific activities are lacking or that you have too much of.

5. Tour the community to note which areas can be used for programs, times of day they can be used, size of room and location.

6. Conduct a comprehensive inventory Q/A. The new director needs to know what supplies the facility has and where the supplies are located. Determine if there is an MSDS for each product. Are their adaptive supplies such as adaptive paint brushes, magnifying glasses, and large print books? Are all electrical supplies inspected yearly by the Maintenance director? Once this is determined supplies can be ordered. Anything that is not in excellent working condition should be discarded.

The new director must clearly know the budget. It’s a huge mistake on the part of administration not to let the director know their budgets. How are they expected to stay in budget, if they do not know what the budget is? Additionally, they have to be able to run their departments and the budget has to fit the size population you have and their leisure pursuits.

What a complete waste of money to order supplies that the facility already has. Once an inventory has been completed this will clearly show what supplies are needed. The director should also prepare a wish list of major purchases she wishes to purchase over the coming year such as computers, printers, piano, fish tanks, sensory rooms, etc.

Additionally, note where products are located for independent leisure pursuits such as computer / internet access, library, games, puzzles, art supplies, videos, CD’s, computer games, office supplies, etc. Residents should have access to independent leisure supplies. There should be a designated place that residents can access these supplies “when awake” and not be dependent on staff unlocking a closet or room.

7. Quality Assurance: For one week the Activity Director should document who is in program and times the programs are beginning. Can everyone participate and if not why? Are the programs beginning on time and are their proper supplies. Are nursing assistants assisting with programs? Are nursing assistants assisting with transporting? Are there clear lists at the nurses stations of program times and which residents should be brought to programs?

8. Quality Assurance: For one week the Activity Director should document who is not in program and note the resident’s location. At 10:00 and 2:00 document resident names who are still in bed, dressed but left in the room, dressed but left at nurse’s station or in hallway. Meet with the unit managers to determine why?

9. Quality Assurance: Meet with activity staff and nursing to determine residents who are unable to participate in programs and why. This would also include any residents who is ill, self isolator or refuses to attend programs.

10. Pull the group attendance, individual attendance records and room visit attendance forms. Are these current? Do you have these? There is no other way to determine participation other than tracking group and individual attendance. This is especially important for residents receiving room visits. Are the room visits happening? Are the room visits following the care plans goals and interventions?

11. Quality Assurance: Review all charts to insure that Initial Assessments, MDS, Care Plans and Activity
12. Meet with the resident council as well as review old minutes. The Activity Director should look for patterns and repeat concerns. Often times there are not clear resolutions for resident concerns. Without clear resolutions, residents believe that administration does not care and that concerns go unresolved. Ask the residents what their concerns, recommendations and complaints are? It’s ok to ask! Don’t we want to know first?

13. Meet with staff with in the first week and clearly provide the expectations of the department, such as programs starting on time, preparation for programs, documentation expectations, etc. All staff should sign in on a sign in sheet for every meeting. The sign in sheet should clearly note using bullets the agenda for the meeting. The director should find out what concerns, suggestions and recommendations the staff have and document this. Daily the Activity Director should meet with the staff to go over changes, new admissions, upcoming programs, etc. Recommend purchasing a large hard back book (journal) vs. using memo pads. This will help keep the director organized vs. using many memo pads that require a search to find a specific item. Highlight any item that needs follow up and check off the item once you have completed it. This hard back book should be used for all phone calls requiring attention, meetings, department head meetings, etc.

14. It’s important to know the staffing schedule, days of the week they are working, hours they are working. Many communities are learning quickly that they have to increase these hours. Often time’s weekends have only one activity professional working in the community. Those hours need to be increased as a weekend is no different than a week day. If you have four full time workers Monday to Friday than you need four staff on the weekends. You need proper activity staffing for all the reasons you determined your staffing patterns for week days. Determine what you are budgeted for and what you actually have.

15. Obtain the schedules for the staff and volunteers and post it clearly in the Activity Office.

16. Determine who the volunteers are and what protocols are in place. In many communities it’s amazing that there are volunteers working in the community and no one knows their name and worse, there is no volunteer application on file. Every volunteer needs a name tag; sign in procedures, clear chain of command, volunteer policies and procedures, volunteer welcome packets. The new director should schedule a volunteer meeting to meet with the volunteers and volunteer clergy. After everything is completed in this recommendation document, only than should the director begin recruiting volunteers. The director should be getting a local phone books and city newspapers to familiarize with the resources available in the local city. Policy and procedures / welcome packets can be ordered through www.activitytherapy.com.

17. Q/A Pet Therapy: Determine what pets are either living in the community or visiting. Check to make sure the health certificates are on file and current. These should be updated yearly. Know the state regulations pertaining to pets. Determine if you have policy and procedures for Pet Therapy. Read the state regulations regarding pet therapy, visiting pets and live in pets.

18. The Activity Director should meet with the directors of house keeping, maintenance and dietary to understand what the expectations are for their departments and what their needs are in meeting the goals of the activity department. For example, Activity Directors can not give 30 days worth of food requests on the 1st of the month, as the director needs time to order and plan the budget around these requests. The dietary director should be getting these food requests at minimum no later than the 20th of the month for the next month.

Once this is completed, the Activity Director would go over the typed report with the Executive Director of the findings, plans, objectives and time frames for implementing the goals. The Activity Director should review this report with the Activity Department.

The Activity Director should not throw out any files from the director’s office but simply box it up and store at least for one year. You never know what you may be throwing out.

If these steps are taken the new director should have a smooth transition into the new position and will guide the director in the necessary steps to be taken.

See http://www.nccap.org for Activity Certifications and a list of instructors for MEPAP Revised courses.

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On Aging…

I feel like my body has gotten totally out of shape, so I got my doctor’s permission to join a fitness club and start exercising. I decided to take an aerobics class for seniors. I bent, twisted, gyrated, jumped up and down, and perspired for an hour. But, by the time I got my leotards on, the class was over.
The Guys' Rules

At last a guy has taken the time to write this all down. Finally, the guy's side of the story. (I must admit, it's pretty good.)

We always hear "the rules" from the female side. Now here are the rules from the male side. These are our rules! (Please note... these are all numbered "1" ON PURPOSE!)

1. Men ARE NOT mind readers.
2. Learn to work the toilet seat.
   You're a big girl. If it's up, put it down. We need it up, you need it down.
   You don't hear us complaining about you leaving it down.
3. Sunday sports. It's like the full moon or the changing of the tides. Let it be.
4. Shopping is NOT a sport. And no, we are never going to think of it that way.
5. Crying is blackmail.
6. Ask for what you want.
   Let us be clear on this one:
   Subtle hints do not work!
   Strong hints do not work!
   Obvious hints do not work!
   Just say it!
7. Yes and No are perfectly Acceptable answers to almost every question.
8. Come to us with a problem only if you want help solving it! That's what we do.
   Sympathy is what your girlfriends are for.
9. A headache that lasts for 17 months is a problem. See a doctor.
10. Anything we said 6 months ago is inadmissible in an argument. In fact, all comments become null and void after 7 Days.
11. If you won't dress like the Victoria's Secret girls, don't expect us to act like soap opera guys.
12. If you think you're fat, you probably are. Don't ask us.
13. If something we said can be interpreted two ways and one of the ways makes you sad or angry, we meant the other one.
14. You an either ask us to do something or tell us how you want it done. Not both. If you already know best how to do it, just do it yourself.
15. Whenever possible, Please say whatever you have to say during commercials.
16. Christopher Columbus did NOT need directions and neither do we.
17. ALL men see in only 16 colors, like Windows default settings. Peach, for example, is a fruit, not a color. Pumpkin is also a fruit. What the heck is mauve?
18. If it itches, it will scratch it. We do that.
19. If we ask what is wrong and you say "nothing," We will act like nothing's wrong. We know you are lying, but it is just not worth the hassle.
20. If you ask a question you don't want an answer to, Expect an answer you don't want to hear.
21. When we have to go somewhere, absolutely anything you wear is fine...Really.
22. Don't ask us what we're thinking about unless you are prepared to discuss such topics as baseball, the shotgun formation, or golf.
23. You have enough clothes.
24. You have too many shoes.
25. I am in shape. Round IS a shape!
26. Thank you for reading this. Yes, I know, I have to sleep on the couch tonight. But did you know men really don't mind that? It's like camping.
27. Pass this to as many men as you can - to give them a laugh. Pass this to as many women as you can - to give them a bigger laugh.

(Thanks Joann! Keep the e-mails coming!)
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, present your mail, prepare a billing form and deliver the newsletters to the post office. Although it sounds complicated, it becomes routine after you have done it a couple of times.

DISTRIBUTION

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

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

TIMING

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

(ARA) - Each year, Easter brings families together to celebrate and enjoy quality time with each other. In 2007, 90 percent of American families will decorate Easter eggs, according to a recent survey commissioned by PAAS, the egg decorating kit preferred by more than 83 percent of American families.

Not surprisingly, decorating eggs ranks as the activity people have the fondest family memories of doing, finishing ahead of gathering for Easter dinner, indulging in Easter candy and attending church services. All generations can join in the fun, with 91 percent of families making egg-decorating an event for the entire family.

These easy tips will help your family create "egg-ceptional" eggs that are sure to wow the Easter bunny himself:

* Keeping with the fashion trends for spring, bright colors are the most popular for eggs. Purple (36 percent) is America's preferred color for eggs, with teal (17 percent) a runner-up and denim blue (14 percent) not far behind. To make your eggs very vibrant, add a few tablespoons of white vinegar, such Heinz White Vinegar, to the egg wash before dyeing eggs.
* Kids love having multiple options to really get crafty. Between stickers, sparkles and getting wild with tie-dye, there's something for everyone. Have kids personalize their eggs by using a wax crayon to write their name before dyeing. Use the dyed eggs as place cards for Easter dinner or place them together as a centerpiece.
* Try wrapping rubber bands around eggs before dyeing. After the rubber bands are removed, the areas where they were will remain white. Repeat this several times for each egg to create a very cool tie-dye effect.
* Take a new twist on an old tradition -- arm the kids with flashlights and have your Easter egg hunt at night! Use glow-in-the-dark paints and stickers from the PAAS Eggs-A-Glow egg decorating kit to help make the moonlight search a little easier and a lot of fun!
* A tisket, a tasket … a basket of hand-decorated eggs will brighten anyone's day! Have children decorate a few special eggs and deliver them to friends and neighbors. Taking a basket of eggs to a local nursing home is a sure way to bring smiles to residents' faces and show children how rewarding giving to others can be!

If you are wondering what to do with all those beautiful eggs, don't fret about cracking your family's art. More than 85 percent of people say they chow down on their eggs right away or within a few days of Easter.

For more Easter egg decorating tips and tricks, visit http://www.paaseastereggs.com.

Courtesy of ARA content
Tips for a Heart Healthy Life

(ARA) - Cardiovascular disease is the single greatest health threat for women today, more than all cancers combined. Recent studies have shown that the general public is more aware of this threat than physicians, which is cause for concern when so many entrust their health to their doctors.

A national study from the Association of Women's Heart Programs (AWHP) and the California Pistachio Commission (CPC) showed 59 percent of women and 44 percent of men were aware that heart disease was the leading cause of death among women. However, a recent American Heart Association survey showed that an overwhelming number of doctors did not necessarily know the basic, important facts about women and heart disease. According to the most recent data from a 2005 study, only eight percent of primary care physicians and 17 percent of cardiologists knew that heart disease killed more women than men.

"No matter what your age might be, it's never too early to start taking better care of yourself and living a heart-healthy lifestyle," states Dr. Susan Bennett, cardiologist and president of the AWHP. "These tips will help improve heart and cardiovascular system health and help build stronger partnerships between patients and their doctors."

* No matter how young or old you are, talk with your doctor now about heart health. Discuss the differences between men and women, including primary symptoms that signal disease. Ask about prevention, diagnosis and treatment of heart disease. Set goals for your blood pressure and cholesterol.

* Get moving -- exercise and give your heart a workout. The heart is a muscle too, and strong hearts pump blood and nutrients more easily through the body.

* Give your body balanced nutrition. Keep heart-healthy snacks including fresh fruits, vegetables and nuts -- like pistachios -- on hand whenever you're on the go to keep you on track for healthy eating habits. Remember, a one-ounce serving of pistachios is 49 nuts, more than any other snack nut.

* Keep your weight under control. The key to including nuts in the diet without adding extra calories is portion control. Losing excess weight will help lower blood levels of harmful LDL cholesterol and prevent other risk factors. Limit saturated fats, trans fats, cholesterol, salt and added sugars.

* Research published in 2006 suggested when healthy men and women ate pistachios for 20 percent of their daily calories their risk for heart disease was decreased. Their total cholesterol level dropped and their HDL (good) cholesterol level significantly improved.

* Stop smoking. All research arrives at the same conclusion -- smoking is not good for your health or your heart. Women who smoke have up to six times greater risk of a heart attack or stroke.

* Don't put off regular checkups. See your doctor regularly and don't hesitate to speak up if you're not feeling "right." Your doctor is there to listen and keep you healthy, so ask questions and be honest.

"With more than 350,000 women dying each year from heart disease, it is vital that public education -- and perhaps even more important, more rigorous education of medical care providers -- about this issue continues," stated Karen Reinecke, CPC president. "A healthy heart starts with the individual and continues with a positive patient-doctor relationship."

Taking control of your heart health is important and can save your life or the lives of loved ones. For more information, visit http://www.pistachios.org.

Courtesy of ARA content
Three blondes died in a car crash trying to jump the Grand Canyon and are at the pearly gates of Heaven. St Peter tells them that they can enter the gates only if they can answer one simple religious question. The question posed by St. Peter is "What is Easter"?

The first blonde replies, "Oh, that's easy! It's the holiday in November when everyone gets together, eats turkey and are thankful..."

"Wrong!, you are not welcome here, I'm afraid. You must go to the other place!" replies St. Peter.

He turns to the second blonde, and asks her the same question: "What is Easter?"

The second blonde replies, "Easter is the holiday in December when we put up a nice tree, exchange presents, and celebrate the birth of Jesus."

St. Peter looks at the second blonde, bangs his head on the pearly gates in disgust and tells her she's wrong and will have to join her friend in the other place. She is not welcome in Heaven.

He then peers over his glasses at the third blonde and asks, "Do YOU know what Easter is"?

The third blonde smiles confidently and looks St. Peter in the eyes, "I know what Easter is."

"Oh?" says St Peter, incredulously.

"Easter is the Christian holiday that coincides with the Jewish celebration of Passover. Jesus and his disciples were eating at the last supper and Jesus was later deceived and turned over to the Romans by one of his disciples. The Romans took him to be crucified and he was stabbed in the side, made to wear a crown of thorns, and was hung on a cross with nails through his hands and feet. He was buried in a nearby cave which was sealed off by a large boulder."

St. Peter smiled broadly with delight.

The third blonde continued, "Every year the boulder is moved aside so that Jesus can come out and, if he sees his shadow, there will be six more weeks of winter."

A man was blissfully driving along the highway when he saw the Easter Bunny hopping across the middle of the road. He swerved to avoid hitting the Bunny, but unfortunately the rabbit jumped in front of his car and was hit. The basket of eggs went flying all over the place.

The driver, being a sensitive man as well as an animal lover, pulled over to the side of the road and got out to see what had become of the Bunny carrying the basket. Much to his dismay, the colorful Bunny was dead. The driver felt guilty and began to cry.

A woman driving down the same highway saw the man crying on the side of the road and pulled over. She stepped out of her car and asked the man what was wrong.

"I feel terrible," he explained. "I accidentally hit the Easter Bunny and killed it. There may not be an Easter because of me. What should I do?"

The woman told the man not to worry. She knew exactly what to do. She went to her car trunk and pulled out a spray can. She walked over to the limp, dead Bunny and sprayed the entire contents of the can onto the little furry animal.

Miraculously the Easter Bunny came to back life, jumped up, picked up the spilled eggs and candy, waved its paw at the two humans and hopped on down the road. 50 yards away the Easter Bunny stopped, turned around, waved, and hopped on down the road. Another 50 yards, turned, waved, hopped another 50 yards and waved again!

The man was astonished. He said to the woman, "What in Heaven's name is in your spray can? What was it that you sprayed on the Easter Bunny?"

The woman turned the can around so that the man could read the label. It said: "Hair spray. Restores life to dead hair. Adds permanent wave."
All I Need to Learn about Life I Learned From the Easter Bunny!

Don’t put all your eggs in one basket. Walk softly and carry a big carrot. Everyone needs a friend who is all ears. There’s no such thing as too much candy. All work and no play can make you a basket case. A cute little tail attracts a lot of attention. Everyone is entitled to a bad hare day. Let happy thoughts multiply like rabbits. Some body parts should be floppy. Keep your paws off other people’s jelly-beans. Good things come in small-sugarcoated packages. The grass is greener in someone else’s basket. An Easter bonnet can cover the wildest hare. To show your true colors you have to come out of the shell. The best things in life are still sweet and gooey.