PLANNED ACTIVITIES
Activities are an important part of maintaining a resident’s physical and mental health.

During this time where visitation may be limited or restricted, providers have an increased obligation to engage with residents in a safe manner.

Activities should be encouraged but modified to help prevent the transmission of COVID-19 in the facility.
SPEAKERS

Pam Dickfoss, MPPA
Deputy Director
Community Care Licensing Division

Ley Arquisola, RN, MSN
Assistant Deputy Director
Community Care Licensing Division

Vicki Smith, Ph.D
Program Administrator
Community Care Licensing

Tony Chicotel
Staff Attorney
CANHR

Meredith Greene, MD
Assistant Professor, Division of Geriatrics
University of California, San Francisco

Susan Howland, MSG
Program Director
Alzheimer's Association

George Kutnerian, MS, MBA
Senior Vice President
6Beds, Inc.

Josh Allen, RN
Principal
Allen Flores Consulting Group
GENERAL LICENSING REQUIREMENTS

Licensing requirements for planned activities are:

- Licensee must provide planned recreational activities.
- Group interaction.
- Social activities.
- Physical activities.

**Planned Activities. CCR, Title 22, Sections:**

- 87219 for Residential Care Facilities for the Elderly
- 82079 for Adult Day Programs
- 85079 for Adult Residential Facilities
- 81079 for Social Rehabilitation Facilities

**Note:**
SRFs and ADPs must also have a written activities plan and SRFs must post those notices in a central location. For both RCFEs and ARFs that have seven or more persons, notices of planned activities must be posted in a central location and copies of the notices retained for at least six months.
PLANNED ACTIVITIES -
RCFE REGULATION AND STATUTORY REQUIREMENTS

CCR, Title 22, Section 87219(a) - Residents shall be encouraged to maintain and develop their **fullest potential for independent living** through participation in planned activities. The activities made available shall include:

1. Socialization: group discussion/conversation, recreation, arts, crafts, music, and pet care.
2. Daily living skills/activities which foster and maintain independent functioning.
3. Leisure time activities cultivating personal interests/pursuits and activities with other residents.
4. Physical activities such as games, sports and exercise which develop and maintain strength, coordination and range of motion.
5. Education, achieved through special classes or activities.
6. Provision for free time so residents may engage in activities of their own choosing.
(b) Residents served shall be encouraged to contribute to the planning, preparation, conduct, clean-up and critique of the planned activities.

(c) The licensee shall arrange for utilization of available community resources through contact with organizations and volunteers to promote resident participation in community-centered activities which may include:

1. Attendance at the place of worship of the resident's choice.
2. Service activities for the community.
3. Community events such as concerts, tours and plays.
4. Participation in community organized group activities, such as senior citizen groups, sports leagues and service clubs.
87101(b)(2) - Basic Services: services required to be provided by the facility ... in such combinations as may meet the needs of the residents ... planned activities.

87464(f)(7): Basic services includes a planned activities program which includes social and recreational activities appropriate to the interests and capabilities of the resident.

HSC 1569.2(r): Supportive services: help to maintain residents’ functional ability and meet their needs as identified in the individual assessment. Includes recreational and leisure activities; social services; and counseling services.

HSC 1569.312(f): Encouraging residents to maintain and develop their maximum functional ability through participation in planned activities.
OTHER REGULATORY CONSIDERATIONS

- CCR, Title 22, Section 87468.2(a) / HSC 1569.269(a) - Residents Rights the right to be encouraged to develop and maintain their fullest potential for independent living through participation in activities designed and implemented for this purpose, according to CCR, Title 22, Section 87219.

- CCR, Title 22, Section 87466 - Observation of resident’s physical and mental condition.

- CCR, Title 22, Section 87307 - Regulations regarding activity rooms for use by residents.

ALSO: Per Section 1512(A) of the Health and Safety Code:
"...The community care facility's policy concerning family visits and communication shall be designed to encourage regular family involvement with the ... client and shall provide ample opportunities for family participation in activities at the facility."

*Don’t forget to update or add an amendment to the Activity description in the facility’s Program Plan.*
DEMENTIA RELATED REQUIREMENTS

- Dementia 87705(c)(7): An activity program shall address the needs and limitations of residents with dementia and include large motor activities and perceptual and sensory stimulation.
- 87707(a)(2)(A): Positive therapeutic interventions and activities such as exercise, sensory stimulation, activities of daily living, and social, recreational and rehabilitative activities;
- HSC 1569.7: Activities to decrease the effects of “sundowning,” including increasing outdoor activities in appropriate weather conditions.

ALSO

- HSC 1569.2(m): the psychosocial comfort of residents is a concern of the licensee.
§ 87462: The facility shall obtain sufficient information about each person's likes and dislikes and interests and activities ... to suggest the program of activities in which the individual may wish to participate.

§ 87467(a)(1): Prior to, or within two weeks of the resident's admission, the licensee shall arrange a meeting with the resident ... to prepare a written record of the care the resident will receive in the facility, and the resident's preferences regarding the services provided at the facility.

§ 87467(a)(3): The licensee shall arrange a meeting with the resident ... to review and revise the written record as specified, when there is a significant change in the resident's condition, or once every 12 months, whichever occurs first.

§ 87466: The licensee shall ensure that residents are regularly observed for changes in physical, mental, emotional and social functioning and that appropriate assistance is provided when such observation reveals unmet needs.
GUIDANCE FOR MEMORY CARE

Engaging with Family

- This forward-looking section of the webinar examines what the Memory Care landscape will be like when facilities begin allowing family members to visit residents.

- Best practices of what types of preparation should be done leading up to this time. It is important that staff help prepare family members because residents may have changed throughout the course of being isolated during the COVID-19 pandemic.

- By that point, Memory Care residents will have likely adjusted to a quieter, calmer routine, which could be uprooted if family members rush in and attempt to resume relationships without making adjustments.
The Importance of Staff Engagement

- Staff engagement is currently more important than ever because, with the inability of family members to visit frequently, the main persons Memory Care residents will engage with are staff members. Staff can lead the charge of encouraging resident engagement. Staff name-tags need large font that residents can read, clear masks, and a photo on name-tags and badges so residents can see staff members’ faces.

Engaging with the Environment

- Staff should explain the coronavirus to Memory Care residents. The idea is that for residents with dementia, not knowing what’s going on in the world can be scarier than having the situation explained to them in a way they understand. Possibly provide them reading material explaining the coronavirus that can be kept in resident rooms.
COVID-19 TIPS FOR DEMENTIA PROVIDERS

Resources for Professionals

- Dementia Care Practice Recommendations
- COVID-19: Tips for Dementia Caregivers in Long-Term or Community-Based Settings
- Emergency Preparedness: Caring for persons living with dementia in long-term or community-based care settings

COVID-19 Resources for Families:  www.alz.org/covid19
Residents are staying in their rooms a lot more during this time. This presents an opportunity to take advantage of person-centered/individualized activities.

Activities like reading, word searches, puzzles, journaling, coloring and crafts are all great person-centered activities that can keep the mind stimulated.

Consider enhancing safe interaction with “Rolling Activities” such as hallway bingo, in which staff can go down the hall to call out bingo while residents check their bingo cards in their doorways.

Don’t forget to ask your residents what activities they prefer. An idea to engage your residents can include passing out “room service” cards for them to circle individual activities they are interested in.
ONLINE GAMES AND APPS

- Leverage the Internet and Technology to Expand Activity Options.
  - Scrabble-inspired app *Words with Friends 2*
  - Social connection platforms, such as *Stich*
  - The dementia-specific, interactive storybook app *Grey Matters*.

- Help residents connect with fellow residents or family who can’t currently visit.
  - Apps like Skype and Google Meet can also help residents connect with tech-savvy loved ones via video calls.
VIRTUAL TOURS & ACTIVITIES

- Some zoos and museums have created virtual tours that can be accessed remotely.
  - Check your local cultural hotspots online to see what they might have available on their websites and social platforms.
- Full virtual engagement systems are also available to facilitate meaningful experiences and connections. These systems are portable; can be disinfected from room to room; and can connect seniors with what interests them and creates personalized experiences.
- Consider livestreaming performances from major artists.
  - Billboard is keeping an ongoing list of artists who have or will be livestreaming performances during the COVID-19 pandemic. You can also find thousands of past concerts from the last 50 years on YouTube.
- Keep active inside: There are many low-impact workout videos tailored to seniors.
Taking Advantage of Outdoor Spaces

- Getting outdoors for periods of time can be just the “change of scenery” residents need.
- Set up an outdoor seating area where residents can have visitors while maintaining social distancing. Encourage visitors to call in advance to prevent crowding.
- Be mindful of the climate. If the weather is consistently hot, consider earlier morning outdoor visits.
- If your community has a garden and residents are able, you can encourage them to participate in gardening outside (weather permitting).
- Consider using your community’s outdoor spaces to host live entertainment, such as musical performances. One option is to reach out to a college music program for student performers.
- Spirituality is important to many residents. Consider having spiritual support persons of residents’ choosing come for outdoor visits.

- Communities can run movies or singalong videos with spiritual themes.

- Many places of worship are now livestreaming their services.

- Be mindful and respectful of the varying spiritual preferences of residents.
PERSON-CENTERED ENGAGEMENT

• COVID-19 HAS LED TO A NEED FOR CAREGIVERS TO GET MORE CREATIVE IN HOW THEY PROVIDE PERSON-CENTERED ENGAGEMENT.

• DETERMINE WHAT ACTIVITIES RESIDENTS CAN ENGAGE IN DURING COVID-19 WHILE STILL FOLLOWING CDC GUIDELINES.

• REVISE EXERCISE CARE PLANS FOR SENIORS.

WHAT DOES IT MEAN TO BE “ENGAGED” WHILE IN ISOLATION??
METHODS TO MODIFY ACTIVITIES:

- Schedule activities in a way to limit number of persons participating at any one time.
- Arrange entering and exiting a group activity or area so persons in care do not come within 6 feet of each other.
- Schedule activities with sufficient time between activities to allow for cleaning and disinfection of equipment, chairs, or other items used for the activity.
- Time activity so participants can exit the activity prior to the next participants arriving.
- Add signage and/or furniture placement that cues at least 6 feet of distance between participants entering and exiting, or add floor markings to indicate 6 feet separation.
EXAMPLES OF MODIFIED ACTIVITIES:

- Set up video streaming on the in-house TV station for persons in care to enjoy daily exercise classes, concerts, movies, lectures, and religious ceremonies.
- Set up games that can be played by phone or PA system, or from hallways, such as bingo and singalongs.
- Facilitate modified group activities, such as: book clubs, crafts, movies and bingo. Include 6 feet physical distancing and other infection control measures.
- Deliver disposable paper games, such as crossword puzzles or word searches, or art supplies to persons in care.
- Set up a space outdoors for socially distanced games, crafts, or group exercise.
- Use of technology to video chat family members, friends, or others in care.
LOW-TECH OPTIONS

Sometimes going low-tech is the fastest way to foster camaraderie.

Hallway Sing-a-longs:
Invite residents to sit or stand at their doorway while a caregiver leads them in song. This creative social distancing approach can work for other activities like bingo, too.

Other Low-Tech Options:
- Book clubs
- Arts and crafts hour
- Letter writing
- Outdoor exercise
- Music
- Storytelling
- Television show watching and discussion groups

MORE IDEAS: https://www.directsupply.com/blog/covid-19-tips-how-to-foster-resident-engagement/
Bring therapy to residents in their rooms with mobile systems, which can capture data of activities, exercises and assessments.

The therapist can prescribe a custom exercise routine based on the individual’s agility, endurance and strength capability.

The caregiver can then log into the system and pull up the prescribed exercises and help support the resident with verbal cues.

The motion sensor will capture each movement so the therapist can see what happened during the session.

Easily portable therapy items, such as exercise bands, dumbbells and cuff weights, are easy to take into resident rooms, and you can mitigate how often you need to disinfect by having a few extra sets on hand.
The tactile experience of getting creative or solving a puzzle on paper can be very calming and therapeutic.

Some residents may want to start with a blank page and colored pencils, while others may want a coloring page to get them started.

Others may enjoy the fun challenge of solving a crossword puzzle or word search.

Residents can hang finished artwork on windows to share joy with visitors who can’t come inside.
REMINDEERS

MASK GUIDANCE:
- Staff at all times (surgical/isolation)
- Residents encouraged when out of apartment (cloth)
- Essential visitors (surgical/isolation)
- Family visits - when allowed (cloth)

OUTSIDE VISITORS
- Scheduled in advance; limit visiting hours
- Meet in designated areas preferably outdoors
- 6 feet of space between and avoid physical contact
- Temp check and screening
- Perform hand hygiene before and after the visit
- Limit the duration – one hour or less
- Limit number of visitors (perhaps 4 max)

Outside visitors, performers, etc. restricted until authorized by visitor guidelines
ADDITIONAL RESOURCES

VIRTUAL TOURS:
https://naturalhistory2.si.edu/vt3/NMNH/
https://www.houstonzoo.org/explore/webcams/
https://www.montereybayaquarium.org/animals/live-cams

- CA Dept of Social Services (CDSS) Home Page:
  https://www.cdss.ca.gov/inforesources/community-care-licensing
  - Current information on COVID-19.
  - Current Adult and Senior Care Provider Informational Notices (PINs)
    - To sign-up, visit cclrd.ca.gov and click on “receive important updates.”

- CA Dept of Public Health (CDPH):
  https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx