



Short-stay resident activities

Activities are a vital part of resident care in any SNF. CNAs play a large role in providing recreational opportunities based on the unique needs and preferred interests of each resident, whether the individual is a long-term or short-stay resident.

The activities desired by short-stay individuals, who are often younger than most residents, are sometimes different than what is typically available. Although this can create a challenge in terms of accommodation, it should be viewed as an opportunity to improve the overall activities program and thus provide better care for all residents.

This issue addresses the benefits of **activities**, specifically those geared toward short-stay residents. It explains the associated **F-tags** and offers a checklist for regulation compliance. In addition, this issue includes activity examples for **short-stay residents** and details the responsibilities of **SNF activity directors**.

Have a good day of training, and stay tuned for next month's issue of **CNA Training Advisor**, which will cover documentation.

Meeting individual interests

Many short-stay residents welcome core, group activities. Still, it's important to offer additional options. Activities that meet an individual's preferences should be made available. By getting to know residents and asking about their particular interests, CNAs can provide unique recreational opportunities that maximize care.

PROGRAM PREP

Program time

Approximately 30 minutes

Learning objectives

Participants in this activity will learn how to:

- Develop and carry out activities for short-stay residents
- Gear activities toward a resident's preferences
- Recognize activity regulation and compliance
- Improve overall activities programs

Preparation

- Review the material on pp. 2–4
- Duplicate the **CNA Professor** insert for participants
- Gather equipment for participants (e.g., an attendance sheet, pencils, etc.)

Method

1. Place a copy of **CNA Professor** and a pencil at each participant's seat
2. Conduct the questionnaire as a pretest or, if participants' reading skills are limited, as an oral posttest
3. Present the program material
4. Review the questionnaire
5. Discuss the answers

Tips and tools for CNA training

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SHORT-STAY RESIDENT ACTIVITIES

Activities in a long-term care setting are any endeavors, other than routine activities of daily living, intended to enhance the participating residents' sense of well-being and promote their physical, cognitive/intellectual, spiritual, social, and emotional health. These include but are not limited to activities that support:

- Self-esteem
- Pleasure
- Comfort
- Education
- Creativity
- Success
- Independence

Two federal tags (i.e., F-tags) are specific to activities. The Centers for Medicare & Medicaid Services (CMS) wrote these F-tags in 1989 and implemented them in 1990 to teach long-term care facilities the importance of quality activities to residents' well-being. They are F248, a key outcome tag within the Quality of Life section of the regulations, and F249, which concerns the presence within the facility of an activities director who is qualified to serve in that role. Although the codes have not changed, the Interpretive Guidelines have

changed, and became effective June 1, 2006. This means surveyors are looking at activities in a new light, using the new investigative protocol during the survey process. The Omnibus Reconciliation Act of 1987 (OBRA '87) is used as a basis to support culture change in long-term care as well as to support the investigative guidelines requiring an interdisciplinary approach toward meeting the leisure and psychosocial needs of those we serve in long-term care.

F248 states, "The facility must provide for an ongoing program of activities designed to meet, in accordance with the comprehensive assessment, the interests and the physical, mental, and psychosocial well-being of each resident."

This regulatory language specifically includes the term "the facility" to indicate that the provision of activities is not the duty of the activities department, but rather it is the duty of the facility as a whole.

It is impossible for a few people in an activities department to provide individualized activities for the facility's entire population; therefore, the writers of the regulation chose to make it the responsibility of the facility as a whole to fulfill this important mandate of the OBRA '87 law.

The intent is for the facility to identify each resident's interests and needs; toward that end, the facility should involve each resident in

Activities director responsibilities

The activities director is responsible for the activities program, its compliance with the regulatory mandates in F248, and its implementation by the staff members and volunteers who are conducting aspects of the program. The director's responsibilities also include:

- Directing the development, implementation, supervision, and ongoing evaluation of the activities program
- Completing or delegating the completion of the activities component of the comprehensive assessment
- Contributing to, directing, or delegating the contribution to the goals of the comprehensive care plan

The ongoing evaluation of the activities program requires that the activities director:

- Determine whether the program as a whole includes offerings that meet resident preferences and needs
- Determine whether changes are needed, such as new seasonal programs for certain times of the year
- Assess whether the program includes activities for different interests and needs (e.g., for residents who are unable to participate in group offerings or for residents who want activities in the evenings and on weekends)

The director is responsible for the activities component of each resident's assessment, regardless of whether the individual is a short-stay resident or will be in the facility long term. The director needs to contribute to the activities component of the comprehensive care plan information regarding which individualized activities the resident will participate in and what the resident will need to participate. The interdisciplinary team should ensure that the resident receives any necessary transportation and adaptation to allow participation. It is the facility's responsibility to ensure that the resident's care plan is implemented.

To efficiently guide the program, the director should schedule activities to meet resident needs. This involves more than merely producing a monthly calendar; it includes ensuring that activity interventions for all residents can occur (e.g., activities have assigned space, essential supplies, and someone to lead or facilitate them).

Monitoring resident responses may be done in part by those staff members who are conducting the activity. The director must remain informed of resident responses to activities to effectively determine whether changes are needed in any of the activity offerings.

The director is also responsible for reviewing the gathered information regarding needed changes and making those changes to the activity program offerings.

SHORT-STAY RESIDENT ACTIVITIES

an ongoing program of activities that is designed to appeal to his or her interests and to enhance the resident’s highest practicable level of physical, mental, and psychosocial well-being.

A facility is in compliance with F248 if it:

- Recognizes and assesses residents for preferences, choices, specific conditions, causes and/or problems, needs, and behaviors
- Defines and implements activities in accordance with resident needs and goals
- Monitors and evaluates each resident’s response to activity interventions
- Revises its approaches toward activities, as appropriate
- Determines compliance separately for each resident sampled
- Individualizes activity interventions to each resident’s needs and preferences
- Provides necessary adaptations to facilitate residents’ participation

Short-stay residents are unique

As a result of the “aging in place” and “least restrictive environment” trends, long-term care facilities are seeing more admissions for short-term rehab stay residents versus long-term care residents. The aforementioned trends relate to keeping people in their homes for as long as possible and discharging residents from long-term care facilities to an environment that not only meets their needs/level of care but that is least restrictive (and generally less costly). Often, a facility’s younger residents are also short-stay residents.

Both younger and short-stay residents can present unique challenges to the activities professional, as they generally have a different set of needs, preferences, and leisure interests. The mandate of CMS to provide an ongoing program of activities designed to meet the interests and the physical, mental, and psychosocial well-being of each resident dictates that facilities accommodate the leisure pursuits of short-term residents.

Therein lies the challenge. Short-stay residents are often not older individuals who can necessarily fit into your established program based on the long-term residents’ needs, preferences, and leisure interests. Therefore, to accommodate the specific needs of short-stay and younger residents, you must start by conducting a comprehensive assessment and care plan. You must then offer different activities based on these residents’ needs and preferences.

Younger residents usually have very different preferences related to their activity pursuits compared to those of long-term residents since they come from a different generation. For example, many prefer independent in-room activities. They do not see themselves as joining in groups with the older residents. They tend to expect service, privacy, independence, and choice, and they expect that things will be done their way. They want to age in place and not reside in long-term living situations outside a rehab stay.

The activity angle

The main focus or goal of most short-term rehab stay residents is rehabilitation to the point where they regain their independence and can return to their former living situation, or at least be in a facility that is more homelike and less restrictive to them.

Activities professionals must recognize these residents’ goals and preferences and develop an individualized activity plan of care that is specific to each resident, as they do for all residents. This may mean bringing the activity to them, providing activities and supplies in their room that they can pursue in their own time, and helping them to structure their day. If they are able to independently pursue their own activities, this should be noted in their assessment.

If a resident has a preference for independent activities and/or in-room activities, staff members should note whether there is anything they need to do repeatedly to help the resident obtain the necessary supplies. They also must make sure each resident is informed about activities

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SHORT-STAY RESIDENT ACTIVITIES

in the facility and should periodically ask residents whether there is an activity they wish to attend.

In addition, staff members should determine whether a resident's present pattern of leisure pursuits is a lifelong pattern and whether the resident is content with his or her choice. Remember, residents are not required to attend activities. However, some residents may change their minds as they become familiar with the facility and with other residents (i.e., they make friends) and as they establish a rapport with staff members. It's all about meeting the individual's preferences and desires.

Another consideration for activities professionals is that these residents are most often involved extensively in therapy. In fact, they are often in therapy for much of the morning and afternoon; hence, they are often tired and need to rest in between therapy sessions. As such, they tend to pursue leisure interests in the evenings or when they are not involved in therapy or are resting.

Activities professionals should work with the therapy department to help residents reach their therapy goals when possible. This means providing activities that complement therapies and that help them regain their strength, endurance, and independence so they can be discharged to their previous living situation or to a less restrictive environment. Offering various forms of exercise is an example. Younger residents may enjoy tai chi, yoga, Pilates, or martial arts.

Other activities to offer short-stay residents include:

- Computer and Internet access
- Daily crosswords
- Word searches
- Trivia games (have these on hand in the therapy department or in a place where residents can pick them up in their daily travels)
- An in-room weekend trivia game

- A daily trivia board situated where residents can see it while on their way to and from therapy
- Having them assist with facility mailings (this helps with occupational therapy goals)
- Social gatherings
- A welcoming or guardian program

A facility can also provide a travel cart for in-room activities equipped with a TV and VCR/DVD player and tapes/DVDs, a video game console, handheld games, card and board games, a CD player and a variety of CDs, and so on. It is appropriate to encourage family members to bring in any leisure supplies that are specific to their loved one to allow residents to structure their day as they would at home.

It's important to offer short-stay residents choices, but it is equally essential to provide activities that meet residents' specific needs so as to personalize and maximize care. ■

Start a walking club

A walking club provides an opportunity for socialization, enhances therapy goals, and promotes a healthy lifestyle. For individuals who can walk independently and have the cognitive capacity to follow a predetermined route, your facility can do the following:

- Establish and mark a walking club route. Mark the route with interesting signs, shapes of shoes, or whatever system works for your facility and residents.
- Have the therapy department help you measure distances so residents can track their distance.
- Use a form for residents to track their individual progress.
- Encourage residents to buddy up with a peer for socialization and support.

Offer a monthly, daily, or weekly contest of who puts in the most miles, or whatever measurement you decide to use. Give out a healthy prize (e.g., granola bars or fruit) and post the winner's name in a prominent place. This gives recognition and incentive to all participants to try to win the next time.

Questions? Comments? Ideas?

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SHORT-STAY RESIDENT ACTIVITIES

Mark the correct response.

Name: _____

Date: _____

1. Activities are intended to promote participating residents' _____.
 - a. social health
 - b. spiritual health
 - c. intellectual health
 - d. all of the above
2. F248 requires facilities to provide an ongoing program of activities.
 - a. True
 - b. False
3. The only thing a facility must do to comply with F248 is revise its ongoing program at least once every six months.
 - a. True
 - b. False
4. Often, a facility's younger residents are also short-stay residents.
 - a. True
 - b. False
5. The best way to accommodate the specific needs of short-stay residents is by _____.
 - a. offering as many activities as possible; they're bound to like at least one
 - b. asking them to write a brief report that includes their favorite hobbies
 - c. conducting a comprehensive assessment and care plan
 - d. none of the above
6. The goal of most short-term rehab stay residents is rehabilitation to the point where they _____.
 - a. are free to take part in physical activities
 - b. regain their independence
 - c. are able to return to their former living situation
 - d. both b & c
7. Residents are required to attend activities.
 - a. True
 - b. False
8. Residents who are able to independently pursue their own activities _____.
 - a. should not be allowed to do so
 - b. do not require the attention of CNAs
 - c. should have a note stating such in their assessment
 - d. none of the above
9. Internet access is an unacceptable form of activity for short-stay residents.
 - a. True
 - b. False
10. For in-room activities, a facility can provide a travel cart equipped with a _____.
 - a. TV
 - b. VCR/DVD
 - c. video game console
 - d. all of the above