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Therapeutic Activity Kits

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WHY: Older adults with dementia have feelings that are often difficult to express due to cognitive impairments in language, memory, and executive function. Communicating frustration, boredom, fear, loneliness, anxiety, or pain can be expressed as resistance to personal care, wandering, constant requests for assistance, and repetitive calling out. Apraxia, impaired recall, and the attendant anxiety that accompany cognitive loss often impact the patient's ability to cope with the stress of hospitalization. Caregiver impatience and rushing, being "quizzed" by clinicians and caregivers, unfamiliar surroundings, and an overstimulating environment may also provoke patient distress. Older adults often have periods of intense aloneness in the unfamiliar hospital environment, leading them to seek out companionship and purposeful activity. The use of an activity kit provides an opportunity for cognitive stimulation, and focused and intentional dialogue between caregiver and patient. It can also make the time spent alone, between caregiver and family visits, meaningful and less frightening.

BEST PRACTICES: The evidence suggests that non-pharmacologic methods are effective in improving mood, function and behavior in dementia. An activity kit that is a carefully selected collection of tactile, auditory, and visual items will provide solace, an opportunity for emotional expression, and relief from loneliness and boredom. Added benefits include enhanced cognitive integration, perceptual processing, and neuromuscular strength. The activity kit includes a wide range of items that are commonly used to provide diversion, such as games, audiotapes, and nontoxic art supplies. In addition, items such as pieces of textured fabric, cloth to fold, tools, and key and lock boards, are included for the person with more advanced dementia.

TARGET POPULATION: Hospitalized older adults with suspected or confirmed dementia whether or not they exhibit the behaviors described above, as well as patients with depression and/or limited family contact. Knowledge about the patient's usual behavior and function markedly enhances the ability to individualize care. Standardized screening for cognitive impairment, including dementia, delirium and depression, should be performed upon admission and periodically. (See *Try This*: Mini Cog; A Brief Evaluation of Executive Dysfunction; Confusion Assessment Method; Geriatric Depression Scale).

STRENGTHS AND LIMITATIONS: Assessment and appropriate selection of activities is critical to avoid a "quick fix" or overstimulation. The items should reflect/match the patient's preferences, cognitive capacity, and physical abilities. It is crucial to avoid items that infantilize, insult, or threaten the person's self-image. The items listed in this publication are suggestions. Families should be encouraged to individualize contents by providing audiotapes, photo albums, videotapes and activities that the patient enjoys. **All kit items should be provided for the patient to keep, eliminating the need for cleaning between patient use, and infection control concerns.**

ENHANCING USE OF THE KIT: Nursing staff needs to consult with family members and rehabilitation staff regarding the selection of contents, implementation, and evaluation of the activity kit.

MORE ON THE TOPIC:

Best practice information on care of older adults: www.ConsultGeriRN.org.

Glantz, C., & Richman, N. (2007). Occupation-based ability centered care for people with dementia. *OT Practice*, 10-16.

Greenwood, D., Loewenthal, D., & Rose, T. (2001). A relational approach to providing care for a person suffering from dementia.

Journal of Advanced Nursing, 36(4), 583-590.

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Youngstrom, M.J., Brayman, S.J., Anthony, P., Brinson, M., Brownrigg, S., Clark, G.F., Roley, S.S., Sellers, J., Van Slyke, N.L., Desmarais, S.M.,

Oldham, J., Radomski, M.V., & Hertfelder, S.D. (2002). Occupational therapy practice framework: Domain and process. *The American Journal of Occupational Therapy*, 56(6), 609-639.

RESOURCES FOR ACTIVITY MATERIALS:

Alimed: Medical and Ergonomic Products for Healthcare, Business, and Home. Retrieved February 12, 2007, from <http://alimed.com>.

Telephone number: 1-800-225-2610.

Economy Handicrafts. Retrieved April 9, 2007, from <http://www.economyhandicrafts.com/>. Telephone number: 1-800-216-1601.

Geriatric Resources Inc. Specializes in caregiving resources for those suffering with Alzheimer's Disease. Retrieved February 12, 2007, from <http://www.geriatric-resources.com>

Nasco Senior Activities Catalogue. Retrieved February 12, 2007, from <http://www.enasco.com/senioractivities>. Telephone number: 1-800-558-9595.

Sammons' Preston Rehab Equipment and Supplies. Retrieved April 9, 2007, from <http://www.sammonspreston.com/>. Telephone number: 1-800-323-5547.

S&S Worldwide / S&S Primalife. Retrieved April 9, 2007, from <http://www.ssw.com/>. Telephone number: 1-800-243-9232 or 1-800-288-9941.

Suggested Therapeutic Activity Kit Contents

Item	Activity	Performance Skills	Target Areas
Peg Board	Place pegs in resistive plastic board	Psychosocial Cognitive Motor Vision Sensory	Sense of purpose or relaxation Sequencing, spatial operations, categorization Coordination, crossing midline, ROM, pinch Color discrimination, depth perception, eye/hand coordination Proprioception, light touch
Art supplies (Colored pencils, watercolors, paper, clay)	Drawing, painting, sculpting	Psychosocial Cognitive Motor Vision Sensory	Enjoyment/stimulation, sense of purpose, self expression, or relaxation Attention span, spatial operations Fine motor movement Color discrimination, depth perception, visual perceptual skills Light touch
Wash Cloths	Fold towels/Stacking towels	Psychosocial Cognitive Motor Vision Sensory	Stimulation, sense of purpose or relaxation Sequencing, problem solving, attention span ROM, coordination, bilateral integration, pinch Depth perception Light touch
Fit-a-space puzzle	Assemble & take apart various puzzle pieces/shapes Lace shapes together	Psychosocial Cognitive Motor Vision Sensory	Enjoyment/stimulation, sense of purpose or relaxation Object recognition, attention span, spatial operations Coordination, bilateral integration, visual/motor integration Form constancy, position in space, figure ground Proprioception, light touch
Cones	Stacking cones	Psychosocial Cognitive Motor Vision Sensory	Enjoyment/stimulation, sense of purpose or relaxation Sequencing, attention span, problem solving Grip, ROM Color discrimination Light touch
PVC Piping (Pipe Tree)	Assemble piping in patterns/shapes	Psychosocial Cognitive Motor Vision Sensory	Enjoyment/stimulation, sense of purpose or relaxation Problem solving, motor planning, sustained attention Pinch, grip, coordination, ROM, bilateral integration Eye/hand coordination, visual perceptual skills Proprioception, light touch
Finger Fidgets	Exercise fingers with ball	Psychosocial Cognitive Motor Vision Sensory	Enjoyment/stimulation, sense of purpose or relaxation Attention span Pinch, coordination, bilateral integration Color stimulation Proprioception, light touch
Playing Cards	Play games, sorting, shuffling	Psychosocial Cognitive Motor Vision Sensory	Enjoyment/stimulation Sequencing, memory, picture recognition, attention span, categorization Coordination, bilateral integration, ROM visual motor Figure ground, depth perception, visual memory Light proprioception, touch
CD	Listen to music	Cognitive Psycho-Social Sensory	Arousal/Relaxation Enjoyment/stimulation or relaxation Auditory
Videos	Watch movie	Cognitive Psycho-Social Vision Sensory	Arousal, attention span, orientation, memory Enjoyment/stimulation or relaxation, age appropriate Visual attention Visual, auditory

NOTE: Skills required for each task vary and it is up to the professional to determine which activity is appropriate/ most therapeutic for the patient
 Psychosocial= emotional well-being
 Cognitive = cognitive integration
 Vision = perceptual processing
 Motor = motor/neuromusculoskeletal skills
 Sensory – sensory stimulation



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