

# Activity Participation Guide

for Residents at all Levels  
of Dementia

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## Introduction

**Every resident at your facility should have the ability to participate in stimulating activities on a daily basis. Use this list of activities appropriate to each resident's best ability to function based on a simple color code to encourage them to do so.**

This free guide, courtesy of the Therapy Management Corporation, a *Dementia Capable Care Society* Leader, will help you:

- Assess a resident's cognitive abilities level and determine the appropriate color code: red for late/end stage, yellow for middle stage, and green for early stage.
- Provide caregivers with a list of suggested activities suited to the resident sorted by ability level/color code.
- Learn the stage-specific communication approaches that will facilitate the maximum participation and enjoyment of the suggested activities.

### **Expressive communication**

involves expressing one's needs and thoughts through speech, body language, facial expressions, etc.

### **Receptive communication**

involves understanding the communications of others, through their speech, body language, facial expressions, etc.

## Remember that every person should have the opportunity to participate in stimulating activities on a daily basis. (Attendance does NOT equal participation.)

Sample activities are designated by color to indicate the appropriate level:

Red Light Activities (Late/End Stage)	
<b>Description of Abilities</b> <ul style="list-style-type: none"> <li>• Requires 1:1 assistance for resident participation</li> <li>• Will take two to three times longer to process/respond to stimuli</li> <li>• Responsive to sensory stimulation of all five senses</li> <li>• Goal is for comfort, alertness, and interaction for improved quality of life, improved social interaction, and increase in PO intake</li> <li>• Balance dysfunction, focus on postural stability</li> <li>• May be capable of simple auditory comprehension</li> <li>• Needs hands-on movements to follow simple directions</li> <li>• Does not know what to do with objects</li> <li>• May sit, stand, or walk</li> <li>• May be able to maintain postures with need for stability, but will need increased support in end stage</li> <li>• May use one-word replies or grunts/vocalizations</li> <li>• Will put found items in mouth (food/non-food), can self-feed with finger foods at times</li> <li>• Will only attend to items directly in front of them</li> <li>• Will become agitated if hurried, or when asked to do something too difficult</li> </ul>	
<b>ADL and Communication Approaches for Red Light Activities</b> <ul style="list-style-type: none"> <li>• Allow resident to assist as much as possible during ADLs to avoid agitation</li> <li>• Wait for a response (may be a 10–20 second delay)</li> <li>• Facilitate Gross-Body movements</li> <li>• Allow to self-feed with finger foods, when able</li> <li>• Eliminate distractions, both internal and external</li> <li>• Provide verbal and tactile cues for simple directions (i.e. “lift your arm” for assistance with bathing/dressing)</li> <li>• Present items directly in front of the patient, within 12 inches</li> <li>• Provide frequent cueing to maintain attention to meals/tasks/activities</li> </ul>	
<b>Examples of Red Light Activities:</b> An activity box or cart is very helpful in activity areas, as well as for room visits. <ul style="list-style-type: none"> <li>• Seeing Activities: gaze at familiar faces, lights, colors</li> <li>• Hearing Activities: calming or alerting music, bells, chimes, tambourines, rain sticks, sound machines</li> <li>• Tasting Activities: sweet/sour spray, lemon swabs, Toothettes in mouthwash, etc.</li> <li>• Smelling Activities: garlic, lemon, apple, cinnamon, peppermint, essential oils</li> <li>• Movement Activities: rocking chair, chair dancing, Passive/Active Assist ROM</li> <li>• Vocalizations and head/neck movement to maintain swallowing and reduce aspiration risk (End Stage)</li> <li>• Feeling/Touch Activities: light touch or deep pressure, variety of textures, pet therapy/stuffed animals</li> <li>• Massage with scented lotions, especially if the scent is familiar</li> <li>• Simple naming/reminiscing (if able)</li> <li>• Spending time outside</li> <li>• Movement/AAROM to minimize contractures and potential for skin breakdown (End Stage)</li> <li>• Sensory stimulation to elicit eye contact and tracking of objects (End Stage)</li> </ul>	

## Yellow Light Activities (Middle Stage)

### Description of Abilities

- Needs constant cues to complete activities
- May require redirection throughout meals to complete with adequate intake
- Can read short, simple text
- Constantly doing things with their hands, manipulates objects
- Poor safety/insight into disabilities
- May be able to self-feed with finger foods
- Approximately one-minute attention span
- Able to complete steps of simple, familiar tasks, but may need cueing to move on to the next step if more complex
- Sees 12–14 inches, directly in front of them, with tunnel vision
- Likely able to walk, though gait is unsteady

### ADL and Communication Approaches for Yellow Light Activities

- Requires occasional verbal cues to self-feed in dining room to avoid decreased intake and weight loss
- Provide a safe environment
- Allow resident as much independence as possible during the task, then check for thoroughness/completion
- Use visual, verbal, and tactile cues during tasks: "Raise your arms. Put your arm in your sleeve." while visually simulating the activity
- Will likely need assistance to initiate tasks, but can generally complete the task with cueing to start, stop, continue
- Keep directions simple and sequences short
- Cue one step at a time
- Place objects within 14–18 inches
- Provide hands-on activities

### Examples of Yellow Light Activities: To be kept at nurses' stations, and/or can be used as group/1:1 activities

- Balloon batting
- Ball toss
- Wind/unwind yarn
- Parachute ROM
- Midline busy box tasks
- Rummage purse/drawer
- Simple crafts/coloring
- Wandering with a purpose, walking outside in garden, visiting committee
- Naming functional objects: "What is this? What do you do with it?"
- Calming or alerting music
- Sing-alongs
- Doing things with hands, putting things together/taking things apart
- Dusting/wiping tables
- Reminiscing (looking at photo albums, talking about family)

## Green Light Activities (Early Stage)

### Description of Abilities

- Attends to task, but only what is plainly seen
- Participates in social activities
- Thrives with structure and schedules
- Can follow 2–3 step directions
- Can read instructions, though may not follow them accurately
- Able to complete familiar activities, but likely not with quality
- Can learn new things with repetition
- Aware of own possessions
- May have difficulty with change
- Poor judgment/safety-awareness
- Can recognize errors, but needs assistance with problem-solving
- Able to socialize, but is socially egocentric

### ADL and Communication Approaches for Green Light Activities

- Set out all supplies needed for the tasks
- Limit required new learning
- Tap into procedural memory with lists, memory books, etc.
- Be consistent with routine and schedule
- Offer interesting activities
- Avoid open-ended questions, provide choices with boundaries, choice of two — or yes/no
- Allow resident to do as much as they can independently, then check for completeness
- Provide supervision in new activities
- Gain and maintain attention prior to speaking
- Do not interrupt when they are attempting to tell you something

**Examples of Green Light Activities:** To be kept at nurses' stations, and/or can be used as group/1:1 activities

- Bingo, Pokeno
- Current events, reminiscing groups
- Simple card games
- Coffee/ice cream socials
- Helping others: delivering mail, passing out snacks, bibs at meals, etc.
- Music and interactive activities, such as sing-alongs
- Community outings
- Gardening tasks
- Simple crafts/coloring
- Sorting/matching activities (cards, socks)
- Stringing beads or simple lacing
- Walking/riding outside
- Book club/Bible study (Higher Level)
- Cooking classes/activities
- Act as “activity assistant” for setup
- Folding clothes/towels
- Simple housework-type activities, such as dusting



**Thank you! We hope you found this information helpful.**

Please feel free to share this resource with a friend or colleague.

**Have questions? We're here for you!**

Give us a call at **800.558.8976** or email

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#### **About Dementia Care Specialists (DCS)**

CPI: Dementia Care Specialists, provides abilities-based, person-centered consultation and training for all dementia care professionals. We educate, empower, and enrich the lives of these professionals and those in their care living with dementia.

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