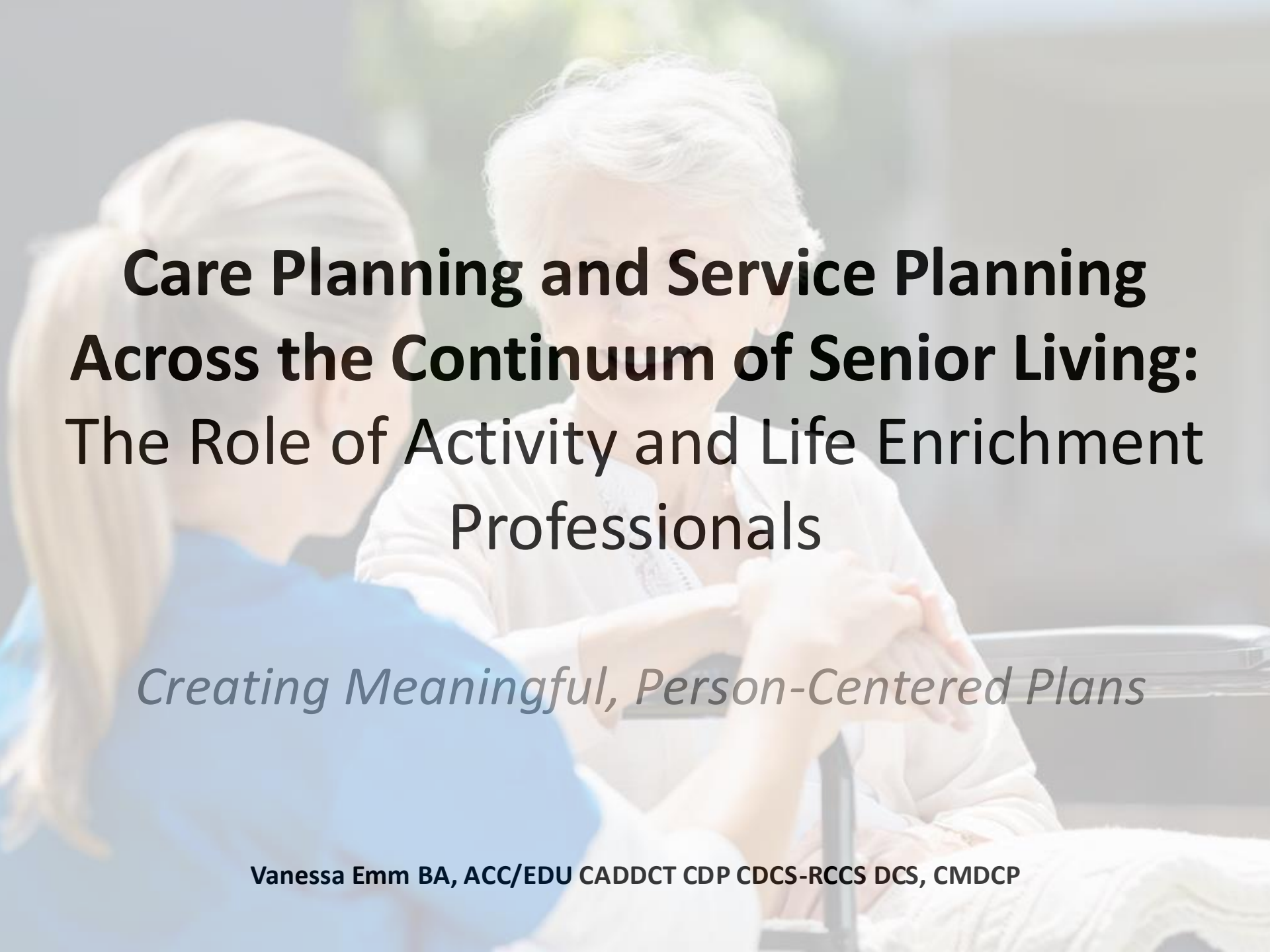

Care Planning and Service Planning Across the Continuum of Senior Living: The Role of Activity and Life Enrichment Professionals

Creating Meaningful, Person-Centered Plans

Vanessa Emm BA, ACC/EDU CADDCT CDP CDCS-RCCS DCS, CMDCP

Beyond the Diagnosis

Think about one resident that you absolutely love working with.

Now answer:

- What makes them smile?
- What give them purpose?
- What are they known for?
- What would their family say is their greatest strength?

We don't plan around diagnoses – we plan around people.



Care Planning

Required in:
- Skilled Nursing
- Long-Term Care

Focuses on:
- Identified needs
- Goals
- Interventions
- Outcomes
- Interdisciplinary approach



Driven by:
Assessment + MDS + Resident Voice

Service Planning

Used in:

- Assisted Living
- Independent Living
- Memory Care

Focuses on:

- Resident Lifestyle
- Resident Choices
- Supportive
- Risk Reduction
- Daily Routines
- Personal Preferences
- More Flexible
- Highly Individualized



The Professionals Role

You are responsible for identifying:

- Interests
- Preferences
- Life history
- Social needs
- Emotional needs
- Spiritual needs
- Cognitive strengths
- Remaining abilities
- Barriers
- Motivators



You're not simply planning activities.
You're planning experiences.

Focus Area



Before writing a goal or intervention, ask:

"What is the resident really telling us they need?"

The focus area identifies the resident's **underlying need, strength, preference, challenge, or opportunity** that will guide the care or service plan.



Gather the Story

Assessment Tool

Traditional questions:

- ✓ Do you like Bingo?
- ✓ Do you like to read?
- ✓ Do you like Arts & Crafts?

Better questions:

- ✓ Tell me about your happiest job.
- ✓ What did Sundays look like?
- ✓ What are you proud of?
- ✓ What makes a bad day?
- ✓ Who are "your people"?
- ✓ What would you still love to learn?

Instead of…..

- ✓ Favorite color
- ✓ Favorite food
- ✓ Favorite music
- ✓ Favorite activity

Finish These Sentences

- ✓ "I feel successful when..."
- ✓ "I lose track of time when..."
- ✓ "I wish people knew..."
- ✓ "I miss..."
- ✓ "I still hope to..."

Focus Area Examples

Focus Area: Social Connection

Assessment Findings

Eats alone

Recently widowed

Doesn't initiate conversation

Misses church friends

Needs Identified

- ✓ Belonging
- ✓ Friendship
- ✓ Emotional support

Focus Area: Identity

Assessment Findings

Former nurse

Frequently talks about caring for others

Corrects staff

Needs Identified

- ✓ Recognition
- ✓ Purpose
- ✓ Leadership

Focus Area Examples

Focus Area: Purpose

Assessment Findings

Says *"I'm useless now."*

Needs Identified

- ✓ Contribution
- ✓ Responsibility
- ✓ Feeling needed

Focus Area: Choice & Control

Assessment Findings

Says *"Everyone tells me what to do."*

Needs Identified

- ✓ Independence
- ✓ Decision-making
- ✓ Self-direction

Focus Area Examples

Focus Area: Emotional Wellness

Assessment Findings

Cries after family leaves

Needs Identified

- ✓ Comfort
- ✓ Coping
- ✓ Connection

Focus Area: Sensory Needs

Assessment Findings

Paces every afternoon

Needs Identified

- ✓ Calming sensory input
- ✓ Movement
- ✓ Routine

Focus Area Examples

Focus Area: Cognitive Support

Assessment Findings

Frustrated with complex activities

Needs Identified

- ✓ Success
- ✓ Simplified Choices
- ✓ Cueing

Focus Area: Cultural Identity

Assessment Findings

Speaks often about family traditions and heritage

Needs Identified

- ✓ Familiarity
- ✓ Celebration
- ✓ Connection to lifelong values

Focus Areas That Address Multiple Resident Needs

Focus Area	Examples
Purpose	Helping others, volunteering, mentoring
Identity	Former roles, hobbies, occupations
Relationships	Family, friendships, companionship
Choice	Decision-making, preferences, routines
Emotional Wellness	Grief, anxiety, confidence, resilience
Physical Wellness	Strength, endurance, mobility
Cognitive Wellness	Memory, attention, learning, problem-solving
Sensory Wellness	Touch, sound, smell, movement, visual stimulation
Spiritual Wellness	Faith, hope, meaning, traditions
Community Connection	Belonging, contribution, civic engagement
Lifelong Learning	Curiosity, creativity, personal growth

Planning Tool: Strengths-Based Planning



"Despite _____, the (name) is still able to _____."

Examples:

- ✓ Despite arthritis, the resident is still able to teach knitting.
- ✓ Despite dementia, the resident still recognizes gospel music.
- ✓ Despite vision loss, the resident enjoys storytelling.
- ✓ Despite Parkinson's disease, the resident enjoys directing conversations.
- ✓ Despite COPD, the resident enjoys short outdoor visits.
- ✓ This helps teams focus on abilities rather than limitations.

Writing Better Goals

What's missing?

- ✓ How often?
- ✓ Why?
- ✓ Measurable?
- ✓ What outcome?

Resident will...

- ✓ **(Action)** using...
- ✓ **(Strength)** to improve…
- ✓ **(Outcome)**

Resident will independently choose one preferred afternoon engagement opportunity using visual choice cards to increase decision-making and preserve autonomy.

Good Goal

Resident will participate in one preferred small-group or individualized engagement opportunity three times weekly to promote social connection and reduce isolation.

Even Better Goal

Resident will engage in meaningful gardening-related experiences twice weekly using adaptive tools to support lifelong interests, increase positive mood, and encourage purposeful participation.

One Intervention—Multiple Needs

Need	How It Is Addressed
Purpose	Shares professional expertise
Cognition	Recall, problem-solving, conversation
Socialization	Meaningful interaction with new people
Self-esteem	Reinforces identity as a mentor
Emotional Well-being	Reduces feelings of loss and loneliness
Community Connection	Builds intergenerational relationships

One activity. Eight outcomes.

Baking

Needs Addressed

- ✓ **Fine Motor Skills** – Measuring, stirring, rolling dough, decorating cookies
- ✓ **Memory** – Recalling family recipes, holiday traditions, favorite baking memories
- ✓ **Appetite** – Smelling fresh baked goods stimulates appetite and may encourage eating
- ✓ **Socialization** – Working as a team, sharing stories, laughing together
- ✓ **Sensory Stimulation** – Feeling dough, smelling cinnamon or vanilla, tasting ingredients, hearing timers and mixers
- ✓ **Purpose** – Creating something meaningful for others rather than simply baking for themselves
- ✓ **Cultural Identity** – Sharing family recipes or traditional foods from different cultures
- ✓ **Leadership** – Former bakers or cooks mentor others, assign tasks, or demonstrate techniques

Gardening

Needs Addressed

- ✓ **Fine Motor Skills** – Planting seeds, pruning, watering
- ✓ **Memory** – Discussing gardens they maintained throughout life
- ✓ **Appetite** – Growing herbs or vegetables increases interest in meals
- ✓ **Socialization** – Working together outdoors
- ✓ **Sensory Stimulation** – Smelling herbs, touching soil, seeing colorful flowers
- ✓ **Purpose** – Caring for living plants
- ✓ **Cultural Identity** – Growing vegetables common to residents' cultural backgrounds
- ✓ **Leadership** – Experienced gardeners teach newer participants

One activity. Eight outcomes.

Music

Needs Addressed

- ✓ **Fine Motor Skills** – Operating music equipment or organizing song cards
- ✓ **Memory** – Music often triggers autobiographical memories
- ✓ **Appetite** – Upbeat music before meals can improve dining participation
- ✓ **Socialization** – Group discussion about favorite artists and songs
- ✓ **Sensory Stimulation** – Auditory engagement and rhythm
- ✓ **Purpose** – Resident controls the experience
- ✓ **Cultural Identity** – Music reflects heritage and traditions
- ✓ **Leadership** – Resident serves as host or DJ

Art

Needs Addressed

- ✓ **Fine Motor Skills**
- ✓ **Memory** - Painting familiar places
- ✓ **Appetite -** Paint food-themed artwork for dining room
- ✓ **Socialization**
- ✓ **Sensory stimulation**
- ✓ **Purpose -** Beautifying the community
- ✓ **Cultural identity -** Paint cultural celebrations
- ✓ **Leadership** - Resident teaches watercolor techniques

One activity. Eight outcomes.

Bird Watching

Needs Addressed

- ✓ **Fine Motor Skills** – Filling feeders
- ✓ **Memory** – Remembering birds from childhood
- ✓ **Appetite** – Discussion of favorite outdoor picnics and meals
- ✓ **Socialization** – Bird discussions
- ✓ **Sensory Stimulation** – Sounds, sights, fresh air
- ✓ **Purpose** – Caring for wildlife
- ✓ **Cultural Identity** – Birds important in family traditions
- ✓ **Leadership** – Resident leads bird identification

Crafts/Hobbies

Needs Addressed

- ✓ **Fine Motor Skills**
- ✓ **Memory** - Sharing sewing stories
- ✓ **Appetite** - Social coffee break during sewing
- ✓ **Socialization**
- ✓ **Sensory stimulation** - Textures and fabrics
- ✓ **Purpose** - Making useful items
- ✓ **Cultural identity** - Traditional quilt patterns
- ✓ **Leadership** - Resident teaches sewing skills

One activity. Eight outcomes.

Reading

Needs Addressed

- ✓ **Fine Motor Skills** – Turning pages, highlighting passages
- ✓ **Memory** – Sharing personal stories connected to the reading
- ✓ **Appetite** – Discussion over coffee and snacks
- ✓ **Socialization** – Book conversations
- ✓ **Sensory Stimulation** – Reading aloud, listening, handling books
- ✓ **Purpose** – Leading discussions
- ✓ **Cultural Identity** – Reading literature from one's heritage
- ✓ **Leadership** – Resident discussion facilitator

Woodworking

Needs Addressed

- ✓ **Fine Motor Skills**
- ✓ **Memory** - Past occupations
- ✓ **Appetite** - Projects for dining room decorations
- ✓ **Socialization**
- ✓ **Sensory Stimulation** - Textures, smells of wood
- ✓ **Purpose** - Building for others
- ✓ **Cultural Identity** - Traditional craftsmanship
- ✓ **Leadership** - Former carpenter teaches techniques

Ask "What Is the Outcome We Want?"

Before writing interventions, define success.
Instead of:
"Attend activities."

Ask:
What do we hope participation accomplishes?



Maybe...
- ✓ Improved mood
- ✓ More friendships
- ✓ Increased appetite
- ✓ Reduced loneliness
- ✓ Greater confidence
- ✓ Less wandering
- ✓ Better sleep
- ✓ Increased mobility
- ✓ Preserved independence

The outcome should guide the intervention—not the other way around.

Ask “What Else?”

"Besides having fun, what resident needs does this activity intentionally meet?”

This shifts thinking from **activity-focused** to **outcome-focused** programming.

Intervention: Baking cookies

Instead of saying:
"We baked cookies.”

Apply Met Needs:

- ✓ We promoted hand strength through mixing and decorating.
- ✓ We stimulated memory by discussing family recipes.
- ✓ We enhanced appetite through the aroma of baking.
- ✓ We fostered social connection through teamwork.
- ✓ We provided sensory stimulation through touch, smell, taste, and sound.
- ✓ We reinforced cultural identity by preparing traditional family recipes.
- ✓ We created purpose by donating cookies to others.
- ✓ We encouraged leadership by having experienced bakers mentor their peers.

One intervention. Multiple outcomes. This is the essence of person-centered care planning and demonstrates the true value of life enrichment in supporting residents' overall well-being.



THE 5 WHY'S

Look Beyond the Behavior. Find the Need.

A TOOL FOR ACTIVITY PROFESSIONALS

SCENARIO:

Resident is refusing to attend activities.

DIG DEEPER

Don't stop at the first answer. There's usually a deeper need behind the behavior.

1 1ST WHY

Why is the resident refusing activities?

Because they don't want to go.

2 2ND WHY

Why don't they want to go?

Because it's too noisy and overwhelming.

3 3RD WHY

Why is the noise overwhelming?

Because they have trouble hearing and understanding.

4 4TH WHY

Why do they have trouble hearing and understanding?

Because their hearing aids aren't working well.

5 5TH WHY

Why aren't their hearing aids working well?

Because they haven't been checked or cleaned recently.

TRUE NEED IDENTIFIED

The resident needs better hearing support and a less overwhelming activity environment.

FOCUS AREAS

- Communication
- Sensory Comfort
- Inclusion
- Engagement

WHAT CAN WE DO?

- Check and clean hearing aids
- Offer smaller group or one-on-one activities
- Create a quieter activity option
- Involve the resident in planning activities
- Build confidence with early success
- Provide clear communication and visual supports

ASK WHY. FIND THE NEED. MEET THE PERSON. CREATE MEANINGFUL ENGAGEMENT.

From Focus Area to Goal and Intervention

Assessment Findings

- ✓ Former teacher
- ✓ Withdrawn after moving into the community
- ✓ Corrects other residents during discussions
- ✓ Misses working with children



Focus Area
Purpose and Identity

Goal
Resident will participate in meaningful leadership opportunities twice weekly to maintain a sense of purpose and promote positive social engagement.

Interventions

- ✓ Invite resident to read stories during intergenerational visits.
- ✓ Ask resident to welcome new residents and orient them to the community.
- ✓ Encourage resident to lead trivia or word games based on their interests.
- ✓ Offer opportunities to organize books or educational materials.
- ✓ Recognize contributions during resident council or community meetings.

Expected Outcomes

- ✓ Increased social interaction.
- ✓ Improved mood and self-esteem.
- ✓ Reduced expressions of loneliness.
- ✓ Preserved sense of identity.
- ✓ Enhanced quality of life.

PLANNING TOOL: THE "RESIDENT SUCCESS PROFILE"

Know the Person. Plan with Purpose. Create Success.



A person-centered snapshot that guides meaningful engagement and better outcomes.

WHY IT MATTERS

- Helps us see the person beyond the diagnosis
- Guides personalized activity and service planning
- Supports consistency across all shifts and team members
- Builds connection, purpose, and joy

HOW TO USE THIS TOOL

Gather Information
Talk with the resident, family, and team. Observe and listen.

Complete Together
Fill out each section with what you learn about the resident.

Plan with Purpose
Use insights to create meaningful activities and interventions.

Review & Update
Revisit regularly—people and preferences change over time.

THE KEYS TO SUCCESS



When we see the person, we help them thrive.

RESIDENT SUCCESS PROFILE

ABOUT ME	Name: _____ Preferred Name: _____ I like to be called: _____
WHAT MATTERS TO ME	What is most important to me: _____ What gives my life meaning: _____
MY STRENGTHS & ABILITIES	What I'm good at / proud of: _____ How I can contribute: _____
WHAT I LOVE	Activities I enjoy: _____ Hobbies / Interests: _____
WHAT CONNECTS ME	People who are important to me: _____ How I like to spend time with others: _____
WHAT I NEED TO SUCCEED	What helps me feel calm and comfortable: _____ What may be challenging for me: _____
TIPS FOR SUCCESS	Helpful tips for engaging me: _____

"People don't care how much you know, until they know how much you care.

Beyond the “Plan”

Living Documents

A common misconception is that care plans are only updated at quarterly meetings or annual reviews.

- ✓ Has anything changed?
- ✓ Is the intervention still working?
- ✓ Has the resident developed a new interest?
- ✓ Has their condition changed?
- ✓ Have we learned something new from the family?

Person-centered care evolves as the person evolves.

Quality Documentation

Instead of:

Resident attended activity.

Document:

- ✓ Did they choose to participate?
- ✓ How long were they engaged?
- ✓ Did they smile or laugh?
- ✓ Did they interact with peers?
- ✓ Did they complete the activity independently?
- ✓ What support was needed?
- ✓ Did the intervention achieve its intended outcome?

Documentation should demonstrate response and progress, not just attendance.



QUESTIONS?