



Resident Name: \_\_\_\_\_ Date: \_\_\_\_\_

Review Date: \_\_\_\_\_

Review Date: \_\_\_\_\_

Review Date: \_\_\_\_\_

### 1:1 Activity Care Plan

#### Focus

- Baseline – Resident is to carry out activities individually with the help of staff or on own

- Resident is dependent on staff to initiate activities due to cognitive impairment

#### Goal

Resident will have activity needs met daily

#### Approaches

- Provide house call visits throughout week; check how resident is doing
- During house calls, offer materials that are sanitized and label materials with name; leave in room
- 1:1 visit Frequency: \_\_\_\_\_
- 1:1 visits will consist of :

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### **Cognitively High-Functioning Residents:**

- Greet resident – introduce self
- Ask resident how they are doing – if resident is upset, listen and reassure (report to Social Services after visit)
- Topics: Music (singing), praying, hymn singing, Reminisce, trivia, directed conversation
- Offer in-room resources: puzzles, cards,
- Offer beverage. Talk about family
- If resident brings up virus concerns, discuss and reassure

#### **Cognitively Impaired Residents:**

- Greet resident – introduce self
- Optional - Have a box of items in resident room that are just for the resident
- Offer beverage – Lemonade, water, tea, coffee
- Individualized sensory/memory box – encourage to use
- Do a sing-along with resident
- Listen to music
- Say a prayer
- Reminisce