Minnesota State-Wide Association of Activity Professionals One-to-One Programming Alisa Tagg, MS ACC/EDU CADDCT CDP CDCS DCS

According to Federal Regulations Tag 679 "One-to-One Programming" refers to programming provided to residents who will not, or cannot, effectively plan their own activity pursuits, or residents needing specialized or extended programs to enhance their overall daily routine and activity pursuits needs.

What does this mean?

Every human being strives for a quality of life. One to One Programming should be purposeful, meaningful, engaging, and resident centered.

Visits generally last between 10-20 minutes. Visits are based on the comprehensive assessment and individual needs and should be provided at least 3 times a week. The person providing the visit should never be empty-handed. Opportunities for socialization occur along with encouragement and emotional support.

Suggested Engagement Interventions:

- Sensory Baskets: filled with items that enhance the sensory system such as aroma therapy, lotion massage, items from the kitchen, fabrics to touch, music to hear, foods to taste (based on medical condition)
- Inspirational Input: reading of the daily word, scriptures, and gospel music.
- Trivia, Poetry, Spelling
- Reading a book together
- Table games: dominoes, scrabble, puzzles, cards
- Chit-Chat: opportunity to shoot the breeze or discuss current events.
- Beach Ball Toss: offers opportunity for physical response and range of motion.
- Memories and More: Life review, reminiscing about the past
- Newspaper or Magazine Review: highlights from local news
- Educational: learn something new
- Movies: DVD player with headphones
- Pet Parade: variety of animals to visit including dogs, cats, birds, rabbits, snakes.
- Validation: opportunity for resident to express self.
- Music: having entertainer perform in room, or CD player with headphones

Documentation is essential and should include:

- 1. Name of Staff/Volunteer who provided the visit.
- 2. Date of session
- 3. Length of session
- 4. What interventions were used in relation to the care plan.
- 5. Outcome: what was the response of the resident in detail. (Not just active or passive.)

Remember: A one to one visit is resident-centered, purposeful, and meaningful.