

## Appendix M

### Activities Interview

Note: This interview was done with the director of activities or his/her designee. It was conducted in the activities area where records of events and participation are available. Sometimes multiple activities personnel were interviewed. The interview has been reformatted to eliminate extra space for comment

Name of facility: \_\_\_\_\_

Name and position of person(s) interviewed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of interview: \_\_\_\_\_

Name of interviewer: \_\_\_\_\_

### Activities Interview

1. Are activities personnel organized into a department?  
\_\_\_ yes  
\_\_\_ no
2. How many persons and FTEs are in activities department?  
\_\_\_\_\_      \_\_\_\_\_  
number of people      number of FTEs
3. Are activities personnel assigned to specific units?  
\_\_\_ yes  
\_\_\_ no
4. a. How many of the activities personnel have the following training.  
# FTEs with BA in activities/recreation/therapeutic rec. \_\_\_\_\_  
# FTEs with MA in activities/recreation/therapeutic rec. \_\_\_\_\_  
# FTEs with occupational therapy degree. \_\_\_\_\_  
# FTEs with music therapy degree. \_\_\_\_\_  
# FTEs with art therapy degree. \_\_\_\_\_  
# FTEs with dance therapy degree. \_\_\_\_\_  
# with other professional training. SPECIFY \_\_\_\_\_

Note: It is possible that some activities personnel hold double training—e.g. in activities & music therapy, activities and OT. If so, total can add up to more than total # of FTEs in 2. Indicate if any person has dual training.

- b. How many activities personnel are certified recreational therapists? \_\_\_\_\_
- c. How many, if any, FTEs are designated activity aide personnel? \_\_\_\_\_  
If activity aides are employed, describe their function.
5. Which of the following general functions are managed by the activities program?

- group social activities
- one-on-one activities
- resident council
- family council
- religious programming
- birthday functions
- memorial services
- other: SPECIFY

6. a. Are activities personnel on duty:

yes no

a. on weekday evenings, after supper

b. on Saturdays

c. on Sundays

b. If yes to weekend work, was any activities person on duty during the past weekend?

yes

no

c. The weekend before that?

yes

no

7. How are residents assisted to get to activities?

yes no

a. CNAs & other staff expected to help residents get to activities.

b. Special activities aides help residents get to activities.

c. Responsibility of activities staff to get residents to their activities.

8. a. Does the facility own one or more vans?

yes

no

b. Who drives the facility van(s)? (All that apply)

designated drivers

activities personnel

other personnel

c. In the past 6 months, has a bus or special vehicle been rented to transport residents?

yes

no

9. What is the largest number of people who went on any single outing in the last 6 months?

\_\_\_\_\_ largest number going on an outing

10. What is the smallest number of people who went on any single outing in the last 6 months?

\_\_\_\_\_ smallest number of people going on outing

11. May the facility van be booked for individual residents to attend social events/clubs/etc?

\_\_\_ yes

\_\_\_ no

IF YES, has any such booking occurred in the last 6 months.

\_\_\_ yes DESCRIBE

\_\_\_ no

12. How many people can be accommodated on any outing requiring transportation?

\_\_\_\_\_ maximum people possible to accommodated

13. Are any volunteers routinely assigned to the activities program?

\_\_\_ yes

IF YES, how many in last month. \_\_\_\_\_

\_\_\_ no

14. How many residents receive one-on-one activity plans?

\_\_\_\_\_ Number of residents getting one-on-one

15. Does the facility have any particular approach to activity for people who are bedbound?

\_\_\_ yes DESCRIBE

\_\_\_ no

16. Does the facility have any particular approach to activity for people who are blind or deaf?

\_\_\_ yes DESCRIBE

\_\_\_ no

17. Which of the following formal activities are offered in the facility? How often and how many residents typically attend?

Type of activity	Yes, offered	# times offered last month	Average number attending
Exercise			
Discussion groups			
Arts & crafts			
Gardening			
Movies			
Parties/socials			
Bible study			
Music programs/singing			
Pet therapy			
Dance therapy			
Art therapy			
Massage			
Outings to shopping			
Outings to events–ballgames, concerts etc			
Outings for sightseeing– drives			

18. a. Does the activity program keep a record of how many residents receive almost no visitors (e.g. none in last 3 months).

yes

IF YES, how many residents had no visitors in last 3 months.

no

b. Does the activity program have a mechanism to help residents without visitors form relationships.

yes IF YES, DESCRIBE

no

19. Does the activity program keep a record of residents who never or very rarely attend organized activities?

yes  
IF YES, how many residents never attend organized activities? \_\_\_\_\_  
how many of these do not attend through choice? \_\_\_\_\_  
 no record kept

20. Does the activity program have a mechanism to ensure that residents who prefer not to attend activities are as interested in life as feasible, are stimulated, not bored?  
 yes IF YES, DESCRIBE  
  
 no

21. Spiritual programming (GET INPUT FROM PASTORAL COUNSELING, IF NEEDED)

a. Which of the following organized religious programs take place at facility?

yes no  
  Protestant service on Sunday  
  Catholic service on Sunday  
  non-denominational or alternating Christian service on Sunday  
  Protestant service on weekdays  
IF CHECKED, HOW MANY TIMES \_\_\_\_\_  
  Catholic communion on weekdays  
IF CHECKED, HOW MANY TIMES \_\_\_\_\_  
  Bible study  
IF CHECKED, HOW MANY TIMES PER WEEK \_\_\_\_\_  
  Jewish services  
IF NO, are there any Jewish residents  
 yes  
 no  
 don't know

b. How many clergy, or pastoral counselors are employed by the nursing home or (if not employed) have a regular visiting arrangement?

\_\_\_\_\_  
Number

c. Besides employees, how many clergypersons visit on a voluntary basis?

\_\_\_\_\_  
Number  
 Don't know.

d. Has the facility any provision to help residents attend churches/religious ceremonies outside the facility?

yes DESCRIBE  
 no

e. Does the facility do any of the following:

yes no

Have funerals at the facility.

Have individual memorial services at the facility

Have memorial services for groups of residents who have died recently.

Facilitate staff to attend funerals off campus.

Facilitate residents to attend funerals of other residents off campus

22. Do residents have an opportunity to volunteer assistance in facility?

yes

GIVE EXAMPLES FROM LAST 3 MONTHS

no

23. Is there any mechanism or effort to help residents continue with interests or community activities that are important to them?

yes

no

IF YES, can you think of any particular example of a resident who pursued an individual interest in the past two months?

yes DESCRIBE

no, nothing comes to mind.

24. How is the resident council organized?

none

facility-wide

on each unit

25. How often does the resident council(s) meet?

more than once a month

once a month

less than once a month

26. Do residents elect officers for resident council?

yes

no

27. a. Do residents have any formal way to have input into facility policies?

Yes No

Menus

Decorating

Activities

Selection of personnel

b. DESCRIBE ANY PARTICULAR EXAMPLES OF RESIDENT INPUT.

28. Have any programs been developed to encourage family involvement?

yes DESCRIBE

no

Have any programs been developed to encourage participation of children?

yes DESCRIBE

no

29. How much do activities personnel contribute to care planning?

in all or almost all cases.

sometimes

seldom

30. What are you most proud of/pleased about in the efforts of the activities program?