

## **PLAN OF CARE**

## The Gathering Coordinated by Avinity

- 1. Potential for anxiety related to Memory Loss due to changes in cognition and body functions
  - a. As evidenced by
    - i. Physiological restlessness, emotional nervousness and/or tension and/or cognitive inability to concentrate.
  - b. Plan and outcome:
    - i. Participant (particularly new participants) will demonstrate a decrease in physiological, emotional and/or cognitive manifestations of anxiety due to starting a new program over the course of 3 to 4 group respites as evidenced by a more relaxed body posture and increased engagement in the program
    - ii. Participant will demonstrate a decrease in new manifestations of anxiety as The Gathering leads and volunteers perceive their potential anxiety and work to resolve what staff can control
    - iii. Participant will verbalize relief of anxiety if individual is able to recognize his/her own anxiety
  - c. Professional interventions:
    - i. Assist participant to reduce present level of anxiety by:
      - 1. Providing reassurance and comfort, mentoring and training volunteers to do the same
      - 2. Stay with the person
        - a. 1:1 care is provided most of the time, with a minimum of 2:1 care on rare occasions.
      - 3. Don't make demands or request any decisions, mentoring and training volunteer to do the same
        - a. encouraging participation in reminiscing, with 1:1 volunteer knowing the Participant's Life Story to assist as appropriate for this individual
      - 4. Speak slowly and calmly, mentoring and training volunteer to do the same
      - 5. Give clear, concise explanations regarding activities
        - a. use step by step directions
      - 6. Attend to symptoms of anxiety
        - a. This often is eased by
          - i. caregiver staying 1st half day
          - ii. 1:1 volunteer
          - iii. If needed, participant may require additional ways to relieve fears to have program be successful
          - iv. Professional Gathering Staff such as Master of Social Work (MSW), Registered Nurse (RN) to work with caregiver to determine individual needs

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- b. Assist to identify causative and contributing factors
  - o Is the activity too difficult?
  - o Is the activity presented too quickly?
  - o Does the volunteer need to encourage more?
  - Does the volunteer need to assist where communication deficits exist?
    - Interpreting this participant's possible reaction to assistance:
      - Offering a word if difficulty communicating a word
      - assuming the word based on their gestures or content of the topic if offering a guess would create an increase in anxiety
  - Does the participant need reassurance about the caregiver arriving for pick up?
    - Utilize notes handwritten by caregiver stating pick up time
    - Calling caregiver for appropriate answer if validation, joining and distracting is not decreasing the anxiety
- ii. Leads or volunteers should call caregivers to assist in troubleshooting any difficulties with anxiety
  - 1. Cell phone numbers provided to all volunteers on the backs of participants' nametags
- 2. Social isolation related to memory loss changes
  - a. As evidenced by
    - i. Expressed feelings of loneliness from caregiver and/or participant due to life changes, i.e., not driving, not being with friends/family as they used to
  - b. Plan and outcome
    - i. Identify to the participant *The Gathering* opportunity as a way of increasing meaningful relationships and cognitive stimulation by
      - 1. Encouraging and even cheerleading the individual to begin by trying out this group respite, explaining the benefits to their brain and cognition
      - 2. Find ways for the participant to feel they have great value and can continue to share their wisdom with their peers at the group respite
        - a. Knowing their Life Story assists in
          - finding items a participant can share based on the daily theme
          - ii. Finding ways a participant can tell or hear their story, allowing for great pride and strong feelings of self-worth
  - c. Professional interventions
    - i. Provide 8 to 10 individuals with 5 hours of group respite twice per month (weekly where possible) utilizing 1:1 volunteer to participant ratio
      - 1. To allow friendships to form
        - a. Between participants, leads and volunteers
        - b. Between participants
        - c. Between caregivers, leads and volunteers
        - d. Between caregivers



- ii. Encourage participant to verbalize feelings, mentoring and training volunteers to do the same in regard to social isolation
- iii. Assist to reduce social isolation by encouraging and fostering strong friendships
  - 1. Ask and encourage families to fill out Recipe for a Life Story
    - a. At a minimum, since the families may not return the Life Story, on assessment evaluate for hobbies and interests to provide to volunteers
  - 2. Request volunteers read and know participants' Life Stories or hobbies and interests from assessments
  - 3. Assist in providing cognitive and social activities throughout the 5-hour respite
    - a. Volunteers plan and execute their plan based on a theme for each day
      - i. Avinity staff may help planning books and ideas
      - ii. Initial training of volunteers for 4 hours
      - iii. Initial additional training for Lead Volunteers for 4.5 hours
      - iv. Quarterly planning meetings may be scheduled to allow for group planning as well as Continuing Education for Memory Loss
      - v. All training and continuing education serves as basis for quality cognitive and social activities
    - b. The goal is to stimulate as many areas of the brain as possible utilizing
      - 1. fine and gross motor activities, such as crafts or exercise
      - ii. stimulating the senses of taste, touch, hearing, smelling and seeing
      - iii. encouraging an increase in circulating blood endorphin levels through fun and laughter
      - iv. reminiscent activities which for most is where individuals with memory loss have their strongest recollections
        - 1. for the early-stage participants, current events are also discussed
- iv. Provide caregiver support and education groups specific to Memory loss needs
  - 1. On site during a *Gathering* session
  - 2. Off site on various days and times of the week in their community
  - 3. To provide caregivers with a group of peers who are going through a similar journey, a group where a trained Leader can keep the group positive, educational, and supportive for all.





## COST SHARE / SLIDING FEE SCALE FOR GROUP RESPITE SERVICES

## The Gathering (Group Respite) - two 5-hour sessions per month

Single Person or Multiple Person Non-Spousal Household	Two-Person Spousal Household	Sliding fee scale (per session)
ANNUAL INCOME RANGE		
Under \$12,760	Under \$17,240	\$16
\$12,760 to \$19,320	\$17,240 to \$26,130	\$32
\$19,320 to \$25,760	\$26,130 to \$34,840	\$53
\$25,760 to \$38,640	\$34,840 to \$52,260	\$75
Over \$38,640	Over \$52,260	\$96

NOTE: The only time a fee is not incurred is when a session is canceled.

