

THERAPEUTIC ACTIVATION PROGRAM FOR SENIORS



June 2024

A Handbook for Therapeutic Activation Program for Seniors (TAPS) Coordinators



United Way
British Columbia

Working with communities in
BC's North, Interior, Lower Mainland,
Central & Northern Vancouver Island

.....
United Way British Columbia acknowledges the homelands of the
Indigenous Peoples of this place we now call British Columbia, and
honours the many territorial keepers of the Lands on which we work.
.....



WELCOME/INTRODUCTORY MESSAGE FROM THE UNITED WAY

Welcome to United Way British Columbia's Therapeutic Activation Program for Seniors (TAPS) Handbook.

At United Way BC, we are dedicated to fostering healthy, caring, and inclusive communities by strengthening vital connections that support those in need. Within our Healthy Aging department, we are committed to empowering seniors and Elders to age independently at home while remaining active, connected, and engaged in their local communities.

TAPS brings together older adults, specifically those facing adverse challenges, for tailored group activities that engage the body, mind, and spirit. The goal of this program is to elevate the quality of life, foster independence, and promote overall well-being among seniors. This handbook has been specifically crafted for TAPS Coordinators who are pivotal in executing these invaluable programs. This handbook serves as a comprehensive overview of program elements and functions as a foundational guide for both the Coordinators and the organizations involved in delivering TAPS Programming within their communities.

Funder Acknowledgement

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Our Vision

A healthy, caring, inclusive community.

Our Mission

We strengthen vital connections that support people in need in our local communities.

Healthy Aging Programs

Healthy Aging Programs are designed to help British Columbians remain active, connected and engaged in their existing communities. Based on these simple essentials, Healthy Aging develops and supports a range of programs and activities that support seniors including the Family & Friend Caregiver Support (FFCS) Programs.

ABOUT THIS HANDBOOK

This handbook was created by Valley Community Services in Creston BC, as a reference guide for the Therapeutic Activation Program for Seniors (TAPS). TAPS Coordinators and the organizations that deliver TAPS programming in their communities can use this handbook as a guide for valuable information on core elements and other key aspects of the TAPS program.

This handbook has been revised to reflect provincial learnings of UWBC's Healthy Aging TAPS programs. Insights and revisions were inspired by the many wonderful TAPS program staff throughout the Province of BC, who worked collaboratively through the TAPS Community of Practice meetings, including: Autumn Services Centre, Burnaby Neighbourhood House, Desert Sun Counseling and Resource Centre Society, DIVERSEcity Community Resources Society, Esk'etemc Health Centre, Gordon Neighbourhood House, Hornby & Denman Community Health Care Society, Inclusion Powell River Society, Japanese Community Volunteers Association (Tonari Gumi), Kaslo Community Services Society, Kiwassa Neighbourhood Services Association, Lionsview Seniors' Planning Society North & West Vancouver, Nanaimo Family Life Association, Valley Community Services Society, Wavefront Centre for Communication Accessibility, and Whitevalley Community Resource Centre.

We want to extend a special thank you to Bridget Currie who created the Creston TAPS program thirty years ago and supported individual programs delivering TAPS. We also want to extend an appreciation to Marcy Cohen, Co-Chair of the Community-Based Seniors' Services Leadership Council, for her remarkable efforts and many contributions to this handbook. Additionally, a thank you goes to Bobbi Symes and Wingsi Kan for their stalwart support in the development of the TAPS Community of Practice. Lastly, we want to thank you for taking the time to review this handbook and for the support you provide to older adults living in your community.

INTRODUCTION AND OVERVIEW OF TAPS



The TAPS program aims to create a caring and diverse community for older adults who are no longer able to build community independently. Using recreation and leisure activities, TAPS supports older adults with a wide range of mobility, cognitive and emotional challenges, and abilities to come together to socialize, learn, support, and share with each other. This helps them connect them more deeply to their own histories and identities, as well as to each other.

The TAPS model is a holistic, strengths-based, collaborative and person-centered approach to program delivery. This approach ensures that the dignity and experiences of those who participate are preserved and celebrated. Staff provide a warm, supportive environment for participants, staff, volunteers, and practicum students.

As a result, the program has proven effective in helping a very vulnerable population of older adults to maintain or improve their overall well-being, reduce their social isolation, and enhance their emotional, physical, and mental health. At its best, the program provides this population of older adults with the inspiration and motivation to live a more meaningful and full life.



Mrs. J stated how alone she felt after her husband passed away, having no family close and friends also challenged by age related changes, *"I found TAPS, now I have a group of friends who understand how I feel. We meet at TAPS two days a week; we support each other and enjoy each other's company." "I look forward to my days at TAPS".*



THERAPEUTIC RECREATIONAL MODEL

The idea of Therapeutic Recreation is to take the real life experiences and activities of a participant and adapt them to accommodate the physical and cognitive challenges that are part of the aging process. The adapted activities are then used to improve, strengthen, or maintain skills.

To achieve this, TAPS staff learn as much as they can about each new TAPS participant when they enter the program, (see [Intake 1](#) and [Interview Guide](#)) and throughout their participation in TAPS.

TAPS staff design activities that connect to the participants' past life experiences and work hard to create an inclusive, diverse range of activities that ensure everyone is seen and valued for who they are.



A visually impaired senior needed to find a safe environment to make social connections and develop a sense of belonging. Their love and knowledge of music was encouraged by the coordinator and the senior quickly took on the role of providing thoughtful music to play during meals, exercise, and craft times. Participants appreciated the variety of music which helped the visually impaired participant to feel a sense of purpose and belonging.

This deep and meaningful connection is only possible if the seniors, who are the program participants, are engaged in collaborative decision-making regarding how activities are designed and delivered (see [Collaboration with Participants](#)). This collaboration needs to

occur at program admission, (see [Intake 1](#) and [Interview Guide](#)) throughout the course of the seniors' participation, and anytime circumstances or needs change.

TAPS activities can range from singing groups, art, drama, book clubs, swimming, Tai Chi, health education, and various other staff/volunteer-led projects. The activities at TAPS are flexible in nature, and change based on the participants' interests and needs. Programming is often created to meet an identified participant need. Small grant funding can be sought to support this need (see [Funding Resources](#)).

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PROGRAM/SERVICE DESCRIPTION



The TAPS program supports isolated seniors who face challenges accessing programs and services on their own. The program enables seniors to access activities, nutritious meals, social support, and to make connections to other community services. The intent is for the program to operate five days a week. For some participants, the program may be their only weekly activity and most attend the program two to three days a week.

TAPS also gives the caregiver much-needed extra respite and supports them in their caregiving journey. When making programming and scheduling decisions, TAPS staff consider the needs of both the participant and their caregiver during the intake process and throughout their participation in the program.

In addition, because TAPS is a community-based service delivered outside of the health system, the respite provided by TAPS is in addition to any support they may be receiving through the health authority. It is not unusual for a participant to attend a health authority program two days a week and then attend TAPS for the remaining three days a week.

TAPS FACILITY



The TAPS program can be provided at one location or it can be facilitated in a variety of community locations, such as local churches, community spaces or commercial spaces. Ideally the program location(s) should be close to seniors' housing. Participants voluntarily enter the program and generally attend programming until they are no longer a fit physically or mentally.

The physical space for a TAPS program should be accessible for those with mobility and cognitive limitations, allowing for easy drop-offs and pick-ups at the entrance. Community spaces in churches, libraries, and recreation centers often have easy access and parking. The facility should ideally be on the ground level with plenty of room to accommodate walkers and electric wheelchair parking. Ideally, there should be a bathroom with private storage. Churches are ideal community space partners as they usually have a commercial kitchen and often a ladies' auxiliary, who can provide a low-cost meal.

The TAPS space benefits greatly when there is, at a minimum a small kitchenette within the space to provide coffee and tea, and the ability to provide small meals when needed.

PARTNERSHIPS WITH OTHER COMMUNITY ORGANIZATIONS



TAPS programs are more successful when they have strong and meaningful connections and partnerships with a wide range of community service groups and organizations.

These organizations may include:

- Lions Clubs and Rotary Clubs
- Faith-based congregations
- Food banks
- Chambers of commerce
- Museums, art galleries and art organizations
- Community choirs or dance groups
- Libraries
- Community or municipal recreation centers



A TAPS program rents space at their local community library which has a kitchenette to prepare drinks and snacks. The program uses the space for a full day of activities, with food delivered partway through the day. Using community space encourages participants out in the community. The library is a welcoming space with many opportunities and is therefore a good partner for a TAPS program.

These organizations are often looking for opportunities to support programs like TAPS where their organizations and/or members can make a positive difference in the lives of others. Building relationships and partnerships with community organizations over time helps with grants, volunteers, referrals, and fundraising.

TAPS participants have often been volunteers for community groups in the past. Rekindling these connections gives the participants and the TAPS program opportunities to connect. Inviting potential partner groups to come to the program, meet the participants, and enjoy a meal gives the community an opportunity to see where they could support the program and how it would meet the mandate of their organization.

A former president of a local community group became a TAPS participant after a series of falls and hospitalizations left him and his wife isolated at home and unable to drive. The TAPS participant reached out to his club and asked for support in providing a space for TAPS to spend an afternoon. TAPS was offered an easily accessible community basement free of charge, along with a variety of game equipment. The participant was able to connect with old friends when members dropped by to visit TAPS. The ladies auxiliary began providing drinks and snacks for the TAPS group.

CORE PROGRAM ELEMENTS



From January 2023 to March 2024, United Way BC's funded programs worked with program evaluators to build consensus on core program elements that should be included in all TAPS programs. These program elements will be reviewed every few years. They include:

1. One-to-one check-ins for those coming to in-person programming or who are temporarily home bound.
2. Socialization, physical activities, educational programming, and opportunities for peer camaraderie.
3. Transportation to and from the in-person programs.
4. Provision of hot meals for in-person programming three to five days a week.
5. Health system navigation as needed.

1. ONE-TO-ONE CHECK-INS

One-to-one check-ins can be provided in two ways: through a phone call on the days that the participant attends the program, or more frequently if requested by the participant. One-to-one check-ins can also be done through home visits if a participant is temporarily away from the program.

One-to-one check-ins on the phone

The phone call check-ins establish whether the TAPS participant is attending the program that day. Transportation and dietary needs are discussed. During the phone call, the health and well-being of the participant are checked and any challenges the participant may be facing are discussed and supported. Some participants request more frequent well-being checks when going through a challenging time, or they may depend on the phone call as it is the only contact they may have with others during their day.

Mrs. P lived entirely alone with no family or community connections. Her biggest fear was falling in her home and not being found for several days. She requested that TAPS call her everyday to make sure she was okay. She would wait for the call before starting her day or going out. The one-to-one check-in helped give her the support and confidence she needed to live alone.

One-to-one check-ins when homebound

A goal of the TAPS program is to connect seniors with each other in a supported environment. Home visits are very helpful during the initial intake phase (see [Intake 1](#) and [Interview Guide](#)) as some seniors need time to develop a trusted relationship with the TAPS program. Some seniors may need several home visits and phone calls before they are comfortable attending. Approximately three months is a reasonable time to bring someone into the program, after which the coordinator may work with the participant to find support that would be a better fit (see [Resources](#)).

It is also recognized that as seniors age, barriers may arise that leave TAPS seniors unable to attend for a short time. Each situation is individual, and occasional home visits could be beneficial during this time. Three months is a helpful approximate timeline, after which, a new assessment should be completed to see if the participant requires a referral to an alternative program that is better suited to their needs.

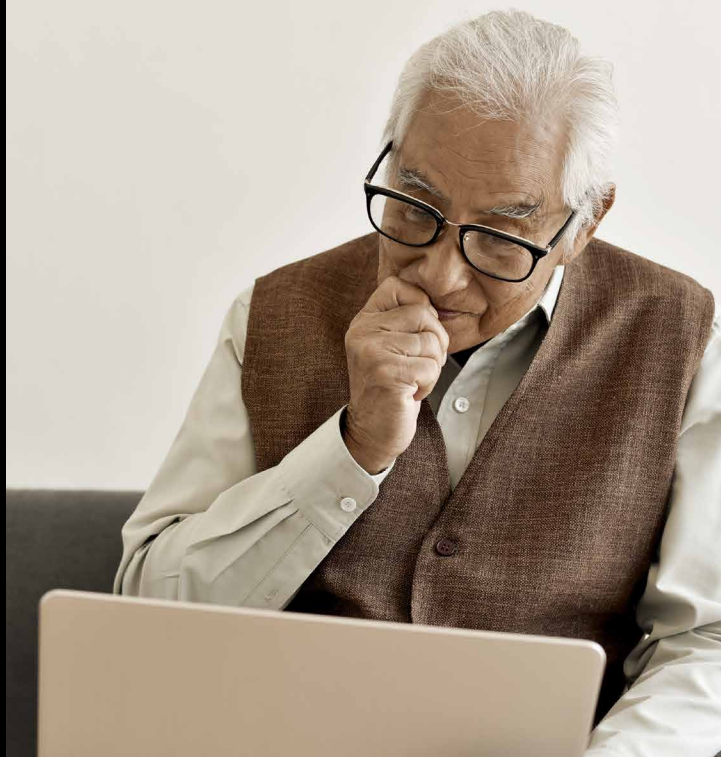
The therapeutic model can be applied to phone calls when a participant is homebound. If a participant has a certain hobby or skill, this could be used as an opportunity to encourage engagement.

Tips for one-to-one check-ins.



- One-to-one phone check-ins can be brief as you will likely be seeing the participant later in the day.
- Listen for changes in mood or physical well-being that may necessitate a longer call later in the day.
- Focus on the interests of the participant and how those interests would relate to the program.
- Develop an idea of what activities match the participant's interests and skills. Talk about the TAPS day that is the best fit and what they can expect on that day.
- If the participant is going to be away from the program for a while, train a volunteer to call them and report back to you any changes.

Mr. W was an avid Bingo player, but due to overwhelming anxiety, he was unable to attend the TAPS program. Over time, a relationship was established with the participant, and he would join the Bingo game via a weekly conference call. The participant also offered to design the weekly game cards, which staff picked up. Mr. W felt a sense of purpose and a connection to TAPS.



2. SOCIALIZATION, PHYSICAL ACTIVITY, AND EDUCATIONAL PROGRAMMING

TAPS uses the therapeutic model to provide daily activity (see [Therapeutic Recreation Model](#)). The activities are tailored to reflect the interests of the attendees. Each day, staff strive to provide a complete program that includes opportunities for socialization, physical activity, and educational programming.

Socialization

TAPS strongly focuses on developing social connections between participants and volunteers. Socialization begins when the participant is picked up from their home and continues to be encouraged until the end of the TAPS day. Staff and volunteers play a large role in decreasing barriers to enable participants to connect with each other. They assist with communication and support the needs of the participants.

Every activity at TAPS is designed to encourage socialization. The meal is one of the most important ways to offer opportunities for participants to socialize and connect. Gathering around a meal is a norm in most cultures. Staff and volunteers support participants by joining them for the meal. They focus on keeping conversation lively and making sure everyone has an opportunity to participate.

TAPS offers opportunities for participants to connect in small groups, such as a card game for four or a group of eight participants working on an art project together. TAPS also offers large group activities like fitness classes or singing.

TAPS also recognizes that some people prefer to socialize and connect in a quieter environment. Programming is designed to reflect these preferences, such as a small walking group of three participants, with a staff member and a volunteer. Developing a sense of purpose and belonging are important goals of TAPS, and these are accomplished through a flexible, person-centered environment.

A small men's group meets early on Monday mornings along with a volunteer. Their job is to comb through old community papers looking for interesting events for a 'today in history' social media page for the local museum. They reminisce, create a sense of purpose, and connect with the community.

Tips for Socialization

- Get to know your participants (see [Interview Guide](#)). Know their interests and preferences when it comes to socializing.
- Match like-minded people together.
- Use an FM system (see [Resources](#)) to assist those with hearing loss.
- Train volunteers to support individual participants to ease socialization.
- Support the idea that people gravitate towards those they most relate to, while ensuring that no one is ever excluded.

Musical Activity

Adding music to a TAPS program can be one of the most important activities for almost all participants. Music decreases anxiety and promotes well-being and calmness. Music can deeply and meaningfully connect with participants who have dementia or memory changes. Participating in musical activities is exercise. Singing can give relief to participants who have aphasia.

Tips for Musical Activity

- Seek out staff or volunteers who are musical to assist in running an activity.
- Make music active rather than passive.
- Use a sing-along video with large print books.
- Invite groups to play, but ask if they could perform popular songs that participants know.
- Have a dance group.
- Start with a small group and build over time.

Reminiscing

Reminiscing is a valuable activity at TAPS. Reminiscing gives participants opportunities for self-reflection, self-acceptance, and self-forgiveness. Sharing stories with others helps seniors feel heard and accepted.

A TAPS program offers its participants “My Life so Far”, where the participant is matched with an interviewer and scribe who assist the senior in writing their life story. The participant receives a scrapbook and digital copy to share with family and friends.

Tips for Reminiscing

- Small groups are best so everyone can be heard.
- Keep a theme, for example, school days.
- Add different participants to stimulate conversation.
- Use props like show and tell or old photographs.
- Invite museums to present on a topic.
- Use conversation cards.

Physical Activity

TAPS offers opportunities to encourage seniors to be active. Maintaining physical strength and agility helps prevent falls. Staff, volunteers, and participants all act as role models to encourage all participants to move. Physical activity could be as simple as a series of stretches before a meal. Physical activity programming could include walking groups, swimming groups, staff-led exercise programming, or large motor games (bowling, shuffleboard, dancing). Yoga and Tai Chi are very popular when done seated.

Tips for Physical Activity

- Use YouTube and DVDs for fitness programs.
- Use short semesters to give variety.
- Use peers to encourage participants that maybe a bit reluctant.
- Keep the calendar consistent so participants know what to expect each day.
- Keep everything lighthearted and fun.
- Use volunteers as role models. Let them know who you want to encourage to participate and ask them to reach out and encourage them.

Educational Programming

Educational programming can fall into two categories: games that stimulate cognitive function and educational workshops that increase knowledge on a certain topic.

Cognitive games engage participants and encourage deeper thinking on diverse topics. They can be played in small, medium, and large groups (see [Resources](#)).

Educational workshops can cover a wide range of topics, from health to history. Some topics can be repeated yearly as they are always relevant to the ongoing health and quality of life for participants (see [Resources](#)). Several TAPS programs have monthly visits and education from the paramedicine program, where emergency responders run health clinics, offer workshops, and meet privately with TAPS participants as needed.

Tips for Educational Programming

- Cognitive games are a great way to add a quick activity in a TAPS day; have a whiteboard always handy for a quick game.
- Make sure everyone gets an opportunity to play.
- Know the crowd, you want the game to be challenging.
- Have a good microphone and sound system.
- Make sure your guest speaker knows who your participants are and presents accordingly.
- Staff and volunteers may have their own interesting topics to present.
- Do a survey to see what kind of topics interest the group.
- Have a series of speakers lined up so participants know who is coming.

3. TAPS TRANSPORTATION

Transportation is a core element of a TAPS program, as seniors without access to consistent, flexible transportation are unable to attend the program. As seniors' health declines due to the aging process, having access to transportation that is reliable and consistent helps maintain their health and decreases isolation. TAPS programming begins when a person is picked up. For a new participant, having the same person to pick them up and drop them off at the end of the day is the first opportunity to build relationships

and trust. This is particularly important for those participants with mild to moderate dementia. Participants are usually picked up according to neighborhoods which helps connect them to those that live close to them. If TAPS programming is provided close to senior-dense housing (see [TAPS Facility](#)), this decreases the demand for transportation. Providing a range of flexible transportation options is key.

Tips for Transportation

- Location of the program can decrease transportation needs by bringing the program to the seniors (see [TAPS Facility](#)).
- Having TAPS programs offered in different locations on different days decreases the need and cost of transportation.
- Staff job descriptions should include a driving element.
- Staff have the ability to use their own vehicles.
- Volunteers can pick up a participant on their way to the program.
- TAPS program locations should ideally have ample parking.
- BC Handidart can be used by participants when available.
- Small shared agency vehicle (see [Fundraising](#)).
- Participants could contribute to the cost of transportation with a daily fee. (Exceptions for low-income; fees should not be a barrier to participation.)

4. TAPS MEALS

TAPS meals provide food security, improves the nutrition of participants, and is the key to connecting isolated participants to each other, volunteers, staff, and the wider community. Partaking in a group meal provides a sense of belonging, comfort (someone has prepared this meal for me), safety (my needs are being met), and gives an opportunity to give and receive care from peers.

The dining area benefits from small group settings rather than long tables for ease of communication. A good model is to have 4 to 6 participants and volunteers at round tables. It is understood that participants gravitate towards like-minded people are encouraged to sit together.

Tips for Providing Meals

- A fee for a meal is generally understood by seniors. Fees should never become a barrier to participation.
- A donation jar for the meal can be used.
- Local community groups can sponsor a participant for a meal, sponsor a monthly meal, or agree to prep food for TAPS programming on a weekly or daily basis (e.g. a Ladies' Auxiliary in a faith-based organization or service club).
- A relationship with local food bank and other food programs could be developed.
- Local restaurants provide the entree, and volunteers/staff the remainder.
- Community groups often have teams that prepare meals as fundraisers.
- Local delicatessens or cafes could be contracted to provide stews and soups, while volunteers prepare the rest of the meal.
- Program activity staff should have the ability to provide a simple nutritious meal on a temporary basis when kitchen staff are ill or not available. An example would be a slow cooker soup with sandwiches, a salad plate, and fruit for dessert.
- Attempt to accommodate dietary needs over dietary preferences. If a participant has special requests that are difficult to provide, suggest they bring food from home to supplement the meal to accommodate their personal needs.

5. HEALTH SYSTEM NAVIGATION

Health system navigation within the TAPS program supports the day-to-day health of the participants. The TAPS role is to notice individual health changes, bring them to the attention of the participant, and then support them with a plan on how to get support if needed. TAPS participants are often isolated, and many often have multiple health challenges. TAPS can play a role in connecting participants to the health system and educational resources.

Tips for Health System Navigation

- Get to know who provides support to the participant (e.g. family, friends or Better at Home staff, etc.).
- Check for any change in a participant's health status when they arrive at TAPS, or during the daily call out, and encourage them to contact their support system (e.g. by offering a quiet space, providing a phone number, etc.).

- Connect the participant to programs that can help them to access health care (e.g. Better at Home, their family physician, etc.).
- Provide occasional transportation to assist with accessing health care when needed.
- Check in with the participant at the end of the day to see how they are managing with their change in health.
- Connect with a paramedicine program or home nursing to run a monthly wellness clinic for TAPS participants.

OLDER ADULTS WHO BENEFIT MOST FROM THE TAPS PROGRAM



From January 2023 to March 2024, United Way BC's funded programs worked with program evaluators to build consensus on the characteristics of older adults who would benefit most from the program.

1. Socially isolated or have limited support, this may include those experiencing loss of a spouse, social group, or driver's license.
2. Emotional barriers/risk for mental health challenges.
3. Physical limitations that make social connections and food preparation challenging.
4. Mild to moderate dementia.
5. Underserved groups of seniors in the community (e.g. newcomers, refugees, Indigenous, rural and remote, LGBTQ2+ etc.)

TAPS aims to create a diverse, caring community of participants and volunteers, ensuring that each day includes a variety of participants who would benefit most from the program. Approximately one-third of these participants should have significant needs, requiring staff to be constantly aware of their location and ensuring their needs are met. For example, a participant with limited vision and physically frailty, may need support when moving around the room (see [How to Support a Participant with Mobility Challenges](#)), or a participant with mild to moderate dementia (see [Dementia Support](#)).

The remaining two-thirds of participants on any given day are regular participants and participants who can also assist and, in part, act as volunteers (sometimes called “tweenies” or “in between participant and volunteer”) who may have challenges building community connections. Some participants may come from marginalized groups within the community. These participants typically need support and reminders to attend the program but, once there, can socialize independently with minimal support. For example a participant diagnosed with depression may need encouragement and transportation but once in attendance can be fully independent. Some participants need support to access the program, but once there, choose a more helping role, which is mutually beneficial.

TAPS is appropriate for participants who have been active and sociable in the past but now find attending community groups challenging and are at risk of losing all social connections. TAPS works well for participants who want to connect with their peers and are comfortable, or have been in the past, connecting in both small or large groups. Focusing on the nature and style of participant’s past social connections can help determine where they would be most comfortable within the program.

1. SOCIALLY ISOLATED OR LIMITED SUPPORT

A socially isolated senior is one who describes themselves as alone, disconnected from life, with reduced ability to participate and enjoy life as they have in the past. Seniors face many challenges as they age, affecting their ability to adapt to change. Declining energy, multiple losses, and declining resources can all lead to isolation.



Mrs. R had degenerative eye disease and was no longer able to volunteer in the kitchen of her church. She became completely isolated and felt worthless, losing focus and meaning in her life. A home support worker suggested she attend TAPS. Mrs. R felt she was not a good fit as she did not want to take a spot that someone else should have. The TAPS program asked her to volunteer to peel potatoes as part of a volunteer team who quietly supported her. She jumped at the chance to serve and attended TAPS regularly.

Seniors with limited support are those whose family, friends, and neighbours are unable to consistently support them. As seniors age, their support systems also age. For example, a ninety-year-old senior might have children in their seventies who have their own health challenges. Peers are also aging and developing barriers to socialization, which limits the amount of support available.

Ms. P's sister died suddenly., Ms. P lived alone, and with mild dementia, her sister was her only caregiver. Neighbours reported to Home Support that the lights were on in the house day and night and that Ms. P was wandering outside late at night. Ms. P's life had become disorganized, and she was lost. After starting to attend TAPS, Ms. P quickly become happier and full of purpose. Each morning, she was ready to assist the staff with grocery shopping and cooking. She became an important member of TAPS and was able to stay in her own home for many years. Ms. P would often tellvisitors, "I have to go to work today, TAPS needs me."

Tips for Social Isolation and Limited Support

- Get to know the participant and determine which day and group would be the best fit.
- Go slowly, ensuring you are reliable and consistent.
- Ask if they would like to bring a friend or caregiver the first time.
- Offer short stays, a meal, or just coffee.
- Have an easy way to transport them home if they begin to feel overwhelmed.
- Train a volunteer to be their buddy every time they come.
- Learn what they need to do to prepare for an outing. There might be something you can help with.

2. EMOTIONAL AND METAL HEALTH CHALLENGES

Social isolation is a risk factor for developing poor mental health and depression. TAPS strives to support seniors with emotional barriers by offering them safe, consistent, and positive interactions. Developing a relationship of trust is paramount for these participants, carefully and with careful encouragement over time, participation can be increased. Volunteers play an important role in the support of these participants.

It is important to note that TAPS is not able to support those those with severe mental illnesses.

Mrs. T, an artistic younger senior, had endured years of verbal abuse and developed long-lasting depression. The only support she received was a once-monthly adult mental health support. She was referred to TAPS, and over three months with bi-weekly phone calls and several home visits she was persuaded to join TAPS for a meal. Staff chose the art day and Mrs. T eventually stayed for the entire afternoon enjoying the smaller, quieter environment of the art group. Mrs. T continued to attend TAPS once a week for lunch and art.



3. PHYSICAL LIMITATIONS

Seniors often have physical challenges as they age, such as issues with balance, strength, mobility, and low energy, which can limit their ability to travel and access buildings to connect with others (see [How to Support Seniors with Mobility Challenges](#)). Loss of hearing and vision (see [Resources](#)) can also play a role in seniors feeling uncomfortable participating in their traditional social groups.

4. MILD TO MODERATE DEMENTIA

Memory changes and diagnosis of dementia can cause significant barriers to accessing community and socializing. TAPS offers a safe, accepting space where staff, volunteers, and participants are aware and understand how to best support people with memory challenges. Isolation can exacerbate dementia as a person spends too much time on their own, within their own thoughts.

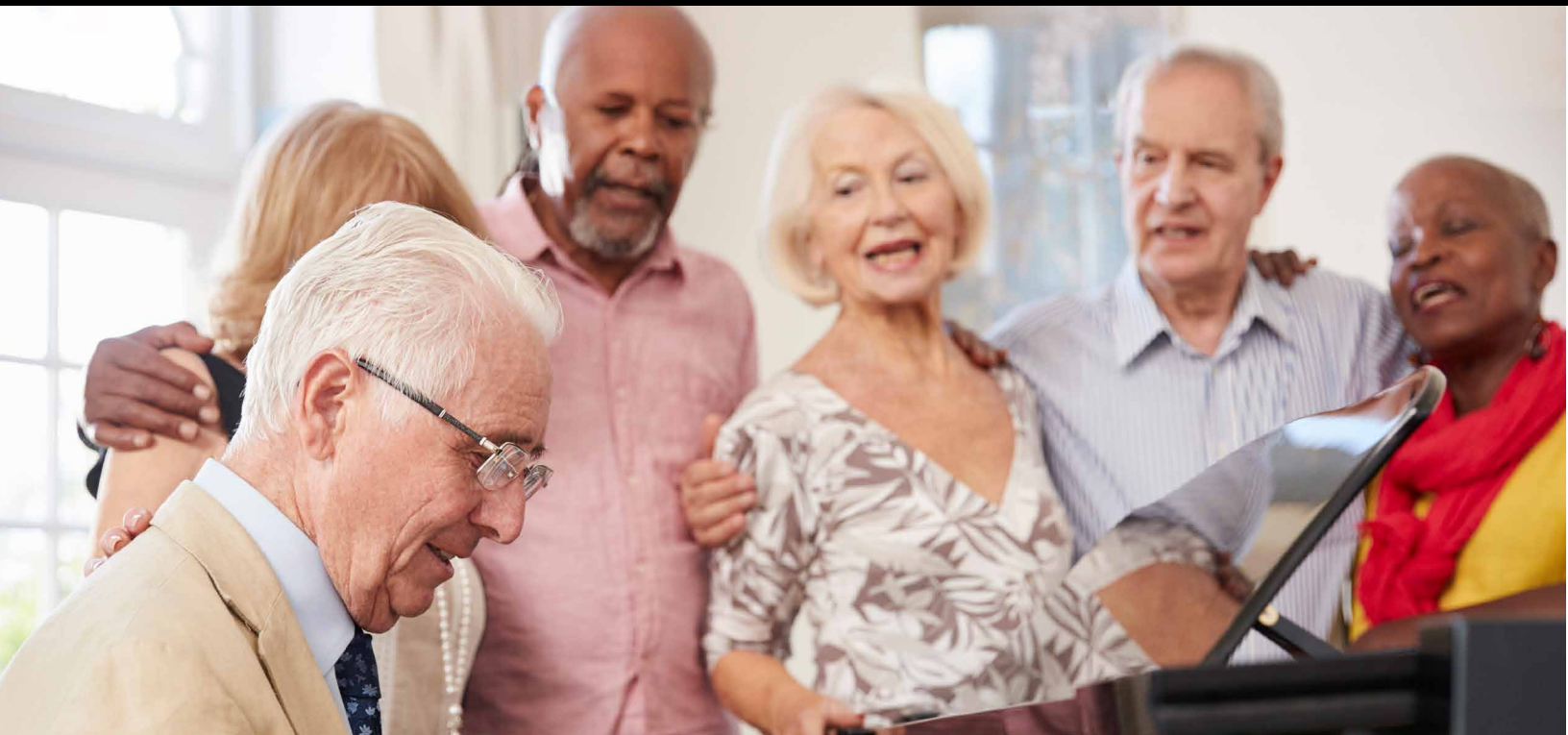
The diverse community at TAPS allows all participants to use their strengths to support and care for others. On any given day, the population of participants supports people with dementia alongside staff and volunteers.

Mrs. N, a career woman with early onset dementia, spent her days looking after her home and waiting for her husband to return from work. As her dementia progressed, she spent more of her day waiting, which led to wandering and frustration. She joined TAPS, which was a difficult transition as she felt very young and could not relate to the other participants. She participated in the very active days, enjoying swimming and walking groups. Slowly, she developed a close relationship with a very elderly participant with whom she shared a cultural heritage. She took on the role of serving her coffee and catering to her needs. In turn, the elderly participant would cue her to sit beside her when she looked lost and engage her in their shared language. When her husband would ask what she did that day at TAPS, she would say, "I have no idea, but it sure was fun".

Each person with dementia is unique. TAPS staff work hard over time to build trusting relationships with each participant, which often enables participants with dementia to attend the program for a longer period, and remain at home longer. As dementia progresses, TAPS maintains close communication with caregivers as risk of elopement and/or challenges with personal care increase (see [Dementia Support](#)). During this time, caregivers often attend with their participant to ensure safety as they transition to a different community program.

TAPS participants, volunteers, and staff all benefit from ongoing education and training (see [Resources](#)) to increase awareness and understanding of the needs of participants with dementia.

TAPS staff regularly attended a monthly community luncheon. Mrs. H was a volunteer, and her husband who had dementia would sit on a chair in the lobby and greet all the diners as they came in. Mrs. H approached TAPS to see if her husband would be eligible to join. Mr. H was nervous to leave his wife, so both began to attend. Mr. H quickly found his singing voice and became an integral male voice in the twice-weekly music program. The singing proved calming and engaging for him. With support from staff and volunteers, Mr. H eventually felt comfortable staying for lunch alone, providing Mrs. H. much-needed respite. As Mr. H's dementia progressed and safety became a concern, Mrs. H returned to the program. Reflecting on the experience, she remarked, "After an hour of singing, his mood is so relaxed and happy, and I am too."



5. UNDERSERVED MEMBERS OF THE COMMUNITY

Marginalised groups are those that experience discrimination and are undervalued within both the local community and broader Canadian society. These include immigrant and ethnocultural minorities, Indigenous elders, 2SLGBTQIA+ seniors, and those living with a disability. TAPS can serve as a welcoming and safe space for socializing and fostering a sense of belonging among these groups. Targeted outreach efforts are necessary to engage marginalized participants effectively. Building relationships with support groups, churches, and other community organizations can facilitate access to the program for marginalized individuals. In some cases, offering small group activities tailored to specific marginalized communities can be beneficial. For instance, a walking group for senior refugees to connect with nature could be organized before joining the larger TAPS group for a meal and other activities.

ESSENTIAL PROCESSES, CRITERIA, AND INFORMATION FOR ENSURING SUCCESS

Entry Criteria

To be eligible for the program, seniors must be experiencing challenges in their lives that place them at risk of isolation. Challenges can include physical or mental health issues, mobility challenges (using a walker or cane), loss of a driver's license, a recent move, or loss of a partner. All participants must be capable of managing their personal care independently and participate in group activities.

Transition Criteria

Transitioning from TAPS to other programs or supports is appropriate when a participant requires additional medical or personal care that a TAPS program cannot offer. This typically occurs when a person can no longer participate independently in activities offered or manage their personal care. At the discretion of TAPS staff, a participant who no longer meets the program requirements (such as experiencing incontinence, or progression of dementia) may still attend the program with the support of a caregiver.

Exit Criteria

Participants who are no longer able to participate are referred to more suitable support from community and health services and/or family, when available. TAPS staff facilitate this transition by recommending possible care options to the participant and/or caregivers and encouraging/supporting discussion with their physician, home support provider, and/or managers. Participants can continue attending TAPS until they transition to their new support/care facility.

Exclusionary Criteria

During the initial assessment, seniors who depend on external support for mobility or personal care are not eligible to attend TAPS. Participants who are at risk of elopement while attending TAPS are also not eligible to attend the program. Seniors who are not socially isolated and can maintain connections to community do not qualify for this program. Participants that have unstable, long-lasting mental illnesses may not be eligible to attend. All those found ineligible to participate in a TAPS program should be made aware of this decision and the reasons for their ineligibility. Every effort should be made to support them in finding a program that meets their needs.

REFERRAL, INTAKE, AND ORIENTATION



Referrals

Referrals can be made in person by prospective participants, family, friends, health professionals, or over the phone. During the first contact with TAPS program staff, it is important to determine that the person being referred is a good match for the program, ensuring that they fit the profile of those who benefit most from TAPS programming. Other options for support and connection can be offered if necessary. It is also important that the referred senior is aware of the referral and understands what programming TAPS offers. The Referral/Waitlist Form is used to gather information such as the participant's name, date of birth, phone number, and address, as well as the name and relationship of the referring person (such as a health professional with knowledge of TAPS or a caregiver of a senior), reason for referral, and details of other programs and supports they are connected to.

A preliminary phone call is made to the referred senior to clarify their information, briefly discuss the TAPS program, and explain what to expect from participating. Their needs and priorities are assessed during this call, and if there is a waitlist, an approximate timeline is provided along with options for support during the waiting period. Occasionally, weekly phone calls are made to prospective participants while they are on the waiting list.

Initial Home Visit

A home visit is conducted using the [Participant Intake Form](#) and [Interview Guide](#). This interview is preferably conducted by TAPS staff in the participant's home, as it provides a comfortable environment for the participant and can yield valuable information for the staff member regarding any barriers that could hinder participation. The assessment collects social, emotional, intellectual, and physical mobility information about the participant. The

types of socialization that the senior has experienced in both the past and the present are discussed along with any present feelings of isolation and depression. Information regarding both their past and present interests and hobbies is gathered. Mobility is assessed and the type of mobility aids used by the participant are noted. Participants are encouraged to share their aging journey and the changes in lifestyle that they have experienced.

The home visit also serves as an opportunity to discuss and complete other forms (see [Appendix](#)) required for participation, including the Participant Agreement Form, Release of Information and Consent to Participate, Emergency Identification, Personal Safety Plan, Health Support Plan, and the Dietary Restriction form.

Orientation

During the initial assessment and orientation, participants receive information about the voluntary nature of the program and the choice involved in becoming a participant. The role of TAPS as a community senior support service is explained, along with an introduction of TAPS staff. It is clarified that staff members are not medical professionals, but that they are qualified to provide therapeutic recreation and can support them in accessing medical assistance when necessary. The cost of participating in TAPS is discussed, as well as how any financial barriers to participation can be addressed.

Transportation options are also explored. When the participant arrives at the building, an orientation of the building is given. Orientation includes the bathroom, fire plan, staff, and meeting other TAPS participants.

Participants continue to receive services offered by TAPS until they are no longer able to participate in the program, or until they feel that their personal needs are being filled in other ways.

PARTICIPANT FILES/NOTES



Participant files are kept for each TAPS participant. These files may include the following:

- **TAPS Participant Agreement** - This form outlines the Rights and Responsibilities of participants and outlines the expectations of the program.
- **TAPS Release of Information and Consent to Participate** - This form provides signed consent to participate and who information can be shared with.
- **Emergency Identification Tag** - A photo is taken of the participant and added to the emergency tag, this form is used in case of emergency if a participant becomes lost. Copies of this form are carried by the drivers in case of emergency.

- **Personal Safety Plan** - This form is used for seniors that live alone and have no safety plan in place. They have requested a TAPS assumes that role.
- **Health Support Plan** - This form is used if a participant has specific health need that needs to be supported during program operation. For example, a senior has grand mal seizures, the senior, caregiver, and doctor developed a plan to support the participant.
- **Dietary Concerns** - Any special dietary needs, try to focus on needs rather than personal choice.

Please see [Appendix](#) for the full list of forms.

Cost of Participation

Some TAPS programs have a meal, transportation, or daily fee for participating. Typically, a fee for a meal and for transportation is reasonable and understandable for seniors and their families. Fees are always waived for participants with financial constraints. Additionally, some programs have a donation basket available for participants or family members. Not all TAPS program charge or ask for donations, and some seek sponsorship from community groups.

Crisis Intervention Supports

Non-Violent Practices

Seclusion and restraints are not used within the TAPS program.

All staff will receive initial and ongoing training concerning the potential risks inherent in community-based work settings, risk prevention, strategies for managing aggressive participants, and many strategies aimed at fostering safe and supportive connections with a range of diverse participants (see [Training Resources](#)).

DEMENTIA SUPPORT



When a participant with dementia enters the TAPS program, all staff are informed in order to best support the participant's needs and to be aware of any associated risks. Participants with dementia often need extra support in various areas of the TAPS program.

Pick Up and Drop Offs

Participants with dementia often need a reminder 5-10 minutes before being picked up to ensure they are ready to attend the program. At the end of the day, TAPS staff must ensure that the participant is safely in their home and not left alone unless the caregiver agrees that the participant is safe to be home alone.

Clothing and Other Items

TAPS staff should make a mental note of specific clothing and items a participant with dementia brings to the program (jacket, purse, hat, etc.). This minimizes the chance of a participant taking someone else's clothing or becoming upset while searching for an item.

Meal Support

During meals at TAPS, a participants with dementia may need additional support with portion control or serving themselves at the table. A TAPS staff member or caregiver will usually sit beside the participant to assist with serving and provide verbal support regarding food.

Program Support

Participants with dementia are encouraged to participate in all TAPS activities and are given extra support to do so. If some activities become too difficult for participants with dementia, TAPS staff will support the participant in other dementia-friendly activities, such as a gentle game or a project to work on.

Role of Volunteers Supporting Participants with Dementia

Volunteers play a significant role in the support of participants with dementia during TAPS program activities. Staff will provide volunteers with directions on how to support the participant. Volunteers are always supervised by Program Coordinators.

CONTACT INFORMATION AND COMMUNICATION



Coordination and Ongoing Communication - Internal and External

To ensure coordination and ongoing communication with internal and external service providers, staff may occasionally coordinate services or provide updated information to service providers on behalf of the participants. The required information is found in the person-centered plan and/or the program file. All information is provided in accordance with confidentiality, privacy, and participant parameters/requests.

TAPS participant Mr. J was recovering from eye surgery and thought that he would have to miss TAPS for six weeks as he would need to have Home Support administer eye drops over the lunch hour. TAPS staff realized that this would be detrimental Mr. J's struggle with isolation and depression. TAPS staff asked Mr. J for permission to talk with Home Support to see if an arrangement could be made. Home Support agreed to administer the drops at TAPS over the lunch hour. Mr. J was able to attend TAPS and made a good recovery.

TAPS staff will communicate with participants' family and/or friends support group as needed for the benefit, and in the best interests, of participants.

Staff will communicate participant needs to those volunteers in the program on an as needed basis to ensure the wellness, health, and safety of all those involved.

Referrals to Health Services and Community Agencies

To ensure that all participants receive the most appropriate services for their strengths, needs, and desires, all TAPS staff are required to maintain up-to-date knowledge of the most relevant and commonly accessed community and regional services. With the assistance of administration, staff should also obtain a supply of pamphlets for resources relevant to participant needs.

Information pamphlets may contain the following listing of services within the community:

- Crisis lines/Emergency Response
- Food bank
- Employment services
- Income supports
- Health services
- Mental health services
- Clothing services
- Counselling services
- AA, NA, and other similar support groups
- Other relevant self-help or advocacy groups
- BC Senior's Advocate

PROGRAM EVALUATION/SERVICE SATISFACTION

TAPS program collects information to support program evaluation and service satisfaction. Participants are given opportunities throughout the year to participate in evaluation activities.

Quality Review

The TAPS programs are expected to complete UWBC's quarterly reporting requirements and participate in Communities of Practice and other training, learning, and coaching opportunities. Data collected regarding program impact, fidelity/effectiveness, accessibility, and satisfaction will be utilized to evaluate future needs.

MEDICATION

TAPS programs do not prescribe, administer, or control any medications. TAPS participants often take medication at lunchtime. Occasionally, a participant needs to be reminded to take their medication. TAPS staff do not touch or pour medication but are permitted to cue a participant to take a medication (see [Cueing TAPS Participants For Medication](#)).

TAPS VOLUNTEERS - DEFINED



TAPS Volunteers

A TAPS volunteer may commit to a regular day that they volunteer with the program. Program Coordinators do not call volunteers to remind them to attend and volunteers are not routinely transported to the program. Volunteers are expected to call to cancel if they are unable to attend TAPS. Additionally, some volunteers may be on call and must be prepared to transport themselves to the program when needed.

All TAPS volunteers:

- Receive a job description to guide their duties during TAPS programming.
- Arrive with enthusiasm and readiness to connect with and support the participants at TAPS.
- Must read and acknowledge all relevant volunteer policies and procedures, as well as the TAPS Program Handbook.
- Provide a current criminal record check.

TAPS Tweenie Volunteers

Tweenie volunteers experience therapeutic benefit from helping at the TAPS program. It is recognized that these volunteers depend on TAPS for their own wellbeing. Tweenies may be experiencing a loss of smaller barriers that have begun to limit their abilities but still feel capable of contributing.

Tweenies may have referred themselves, or been referred by family, friends, or a healthcare professional to volunteer at TAPS. TAPS helps these “volunteers” enhance connections with their community, gain a sense of belonging, and have an opportunity to keep contributing within a supportive environment.

Tweenies acknowledge the therapeutic benefits they receive from volunteering at TAPS. They often discuss the personal benefits and support gained from the program with their family members and healthcare providers. To clarify further, if a Tweenie were asked, “whether they would volunteer at any other organization if TAPS were unavailable”, they would likely answer “No”.

COLLABORATION WITH PARTICIPANTS



TAPS uses the Therapeutic Recreation Model to adapt and modify real-life experiences in ways that support vulnerable older adults in improving or maintaining their independence and quality of life. Information on preferences, interests, and skills is collected during the intake (see [Intake and Orientation](#))

Informal collaboration can occur in small groups through a focused conversation on a certain experience or topic. More formal collaboration can be conducted through targeted surveys and large group brainstorming sessions.

Tips for Collaboration

- Focus on a specific area of activities to seek input on, such as spring or summer activities.
- Establish a theme for the year's activities, such as intergenerational activities, and gather information on past programs that have been enjoyed by participants to inform new programming.
- Engage volunteers to assist with brief surveys.
- Designate a week where seniors place stickers on posters around the room that reflect all past and potential activities.

FUNDRAISING



TAPS benefits from both small and medium grants that enhance the activities that are provided. Grants can be sourced from federal, provincial, and local funding streams. Developing a yearly theme helps to focus fundraising and grant writing efforts. For instance, a yearly theme like “Getting Our Seniors Active” could target grants and resources from various sources, such as New Horizons for Seniors for equipment, honorariums, staffing and transportation, BC Gaming for facility rentals, transportation and staffing, and local governments for venues and transportation. Establishing a focused volunteer group with a mandate to fundraise for a TAPS program can be highly beneficial. The group can sell crafts, host teas, and run raffles, with all proceeds dedicated to supporting activities or equipment for the program.

Potential sources of funding include:

Federal

- [New Horizons for Seniors](#) - This grant supports community-based projects and is particularly suitable for intergenerational programming. For example, a project called “Teaching Our Culture Through Music” could bring together TAPS seniors with different generations to share traditional songs.
- [Canada Summer Jobs](#) provides wage subsidies to employers to create summer work experiences for young people aged 15 to 30 years.

Provincial

- [Vancouver Foundation](#) funds charities and non-profits to make meaningful impacts across BC.
- [Community Gaming Grants](#) - provides funds to non-profit organizations throughout BC to support their delivery of ongoing programs that meet the needs of their communities.

- [Neighbourhood Small Grants British Columbia](#) offers small grants for community projects. This is helpful for short projects, such as hosting a come-and-go tea to showcase the TAPS program and build connections, or taking a group of seniors to sing at a seniors' care facility to entertain and connect.

Local Government

- Regional Districts or Municipal discretionary funding is good for joint program funding. A garden program with TAPS and early years programming.
- Local Art Groups - great for art, and drama projects. An example was a grant to hire an artist to teach a watercolor winter scene that was used to create Christmas cards which was then printed and in turn sold as a fundraiser.
- Gambling Support - a small grant for TAPS seniors to present dramatic skits to increase knowledge and awareness about gambling.

Fundraising Partnerships

- Community groups are often interested in partnerships with seniors' programs. It is beneficial to invite them to a TAPS lunch and let them experience the program. Often ideas will be generated as to how they can help each other.
- Local Lions Clubs may sponsor a senior for a year on the program, providing transportation and meals, in exchange TAPS participants host a pancake breakfast for them.
- Legion poppy fund supports veterans and seniors. Great for individual sponsorship or supporting a day of programming in exchange for TAPS seniors selling poppies as a team.
- Rotary Clubs are often keen to make small donations for specific needs or partner on a joint project.
- Seniors Clubs are great for sharing space and often have volunteers who could organize a fund raiser for you i.e. crib tournament, or a community Bingo.
- Churches are a great for space, food programs, and partnerships, ie TAPS will run an activity for everyone if the church sponsors a meal for TAPS.
- Women's Institute will often support seniors programming.
- Community Hobby groups, for example a cycle club may partner to fundraise for a rickshaw.

JOB DESCRIPTION SUMMARIES

TAPS staffing needs will depend on the agency, agency support available, and the needs of the community where the program is being provided. Some agencies provide administrative support only to the program, while others have hands on managers and other support. Some agencies have a 1:15 ratio of staff to participants with always two staff (first aid trained) available in case of an emergency. TAPS Creston began with two coordinators working four days a week, each sharing all the tasks including cooking and driving. The following job descriptions are examples of possible TAPS positions.

Coordinator

Responsible for all aspects of operating the TAPS program. This is a sole charge position. The Coordinator will deliver and coordinate the TAPS program to provide social, emotional, physical, and recreational stimulation for at-risk seniors. This position also supervises staff and volunteers, and oversees the operation of the meals portion of the program.

Assistant Coordinator

This position assists the Program Coordinator to deliver programs that meet the physical, intellectual, emotional, and social needs of TAPS participants. This person supports other program and support staff as needed. This person assists in office duties including billing and phoning. This position includes transporting participants and one-to-one visits as necessary.

Community Liaison Development Coordinator

This position is responsible for maintaining community connections with the TAPS program to ensure community awareness and understanding of the program. This person writes articles, does presentations, and maintains donor relationships to promote the program. Support to program administration is also provided in the form of data collection for reporting purposes.

Program Aide/Driver

This position drives TAPS owned vehicles to transport participants to and from the TAPS program. This person also assists the TAPS Coordinator with programming and meal preparation, supports seniors to participate in the TAPS program, and is responsible for ensuring vehicles are maintained according to manufacturer recommendations.

Cook

The TAPS Cook prepares between 30 and 40 home cooked meals each day. The Cook also manages food deliveries/shopping, supervises setting up the dining room, and supervises kitchen volunteers.

Summer Student

The TAPS summer student supports the activity portion of this program for seniors. This position helps deliver program activities and researches, organizes, and assists seniors to participate in community events. This position also provides office and computer support.

PROCEDURE TO SUPPORT SAFETY AND WELLBEING



DROPPING PARTICIPANTS OFF AT THE END OF THE DAY

Rationale

TAPS participants are typically isolated and have barriers to accessing services and supports. The TAPS program seeks to assist people to maintain independence as safely as possible within program parameters; this extends to bringing participants to their homes at the end of the day.

Policy

Participants will be escorted into their homes and staff will briefly check-in to ensure they are well and not needing immediate assistance.

Procedure

- TAPS staff assist participants into their homes assisting with keys etc. as necessary.
- TAPS staff have a brief conversation to ensure well-being of the participant.

ESCORTING A TAPS PARTICIPANT TO THE EMERGENCY DEPARTMENT

Rationale

TAPS participants may need to go to the emergency department due to a sudden onset illness or an ongoing issue that needs attending to.

Policy

TAPS staff will call 911 or take participants to the hospital as required.

Procedure

- If a participant needs emergency medical attention, 911 will be called.
- If a participant needs non-emergency medical attention, and are cognitively and physically able to be transported, a TAPS staff member will drive them to the hospital and assist as necessary.
 - In this situation, the family or emergency contact person will be contacted and arrangements will be made to meet at the hospital.
 - Staff will remain with the participant as long as necessary, until family arrives or nursing staff indicate that it is ok to leave.
 - Staff will ensure the participant has a plan to return to their home.

SUPPORTING TAPS PARTICIPANTS DURING AN EXERCISE PROGRAM

Rationale

TAPS participants participate in facilitated exercise programs in a supportive environment to promote health and wellness in a safe and supported manner.

Policy

TAPS participants are encouraged to participate in exercise groups at their comfort level and may require support to participate.

Procedure

- TAPS staff are always present during exercise class.
- At the beginning of every class, the instructor or staff encourage participants to participate within their level of comfort.
- Staff participate in class and observe the abilities of participants.
- Staff prompt participants as necessary to work within their abilities and not to experience strain or pain.
- Staff stand by to assist those participants that need support with balance or execution of the exercise.
- Staff work with instructors to modify exercises for those that need it.

ASSISTANCE WITH PARTICIPANT PERSONAL CARE

Rationale

TAPS participants occasionally have incontinence and need help with personal care. If this need becomes routine, i.e. more than three times in a month, then further discussion with the supervisor (Coordinator) is required.

Policy

TAPS participants need occasional support with personal care. Staff will assess each situation and assist as necessary.

Procedure

- When a participant needs assistance with personal care, staff will assess the situation.
- If the participant can be transported home safely and respectfully knowing that there will be assistance there, staff will support the participant to get home.
- If the situation warrants assistance at TAPS, staff will ask permission to assist, then respectfully help the participant using the wheelchair bathroom.
- Once a participant is safely in the wheelchair bathroom, the staff will gather supplies in the cupboard including the following:
 - Scrub top
 - Gloves
 - Paper towels
 - Wipes
 - Depends
 - Clean pants
- Staff will encourage the participant to do all they can to clean up and will only assist as necessary.
- Once the person is clean, staff will ask if they would like to go home or stay at TAPS.
- Staff will then clean the bathroom using disinfectant cleaners from the janitor room and take out the garbage.
- If a participant says they have had a personal care issue while alone in the bathroom, with their permission, they must be checked and cleaned accordingly by staff.

- If the participant would like to be transported home, staff will use sanitary covers to protect the seats of the vans. The protective items are stored in a clean-up kit located in the back of each van. When returning back to TAPS staff will dispose of the sanitary covers and inspect the van to ensure the seats are clean. If there is a mess on the seat covers they must be removed and washed immediately.
- Staff will follow all Health and Safety Policies regarding Infection Prevention and Control which guides situations where staff may be in contact with bodily fluids.

TAPS POLICY FOR PARTICIPANTS WHO HAVE PRE-EXISTING SEIZURE ACTIVITY

Rationale

TAPS participants may have a pre-existing seizure disorder that requires specialized support at times when they are at TAPS.

Policy

During the initial assessment, the TAPS Coordinator or Assistant Coordinator will use the [TAPS Health Support Plan](#) with the participant and family member to develop a safe plan of care for the participant.

Procedure

- Use the TAPS Health Support Plan to itemize the support plan.
- The plan should include the type of seizure, premonitions, normal duration, normal cycle between seizures, special supports, and when to get help.
- Any plan may also include a confirmation of care letter from a medical professional.

CUEING TAPS PARTICIPANTS FOR MEDICATION

Rationale

TAPS participants often take medication at lunchtime. Occasionally a participant needs a reminder to take their medication.

Policy

TAPS staff do not touch or pour medication. TAPS staff are permitted to cue a participant to take a medication.

Procedure

- TAPS staff are informed daily by a caregiver if a participant needs support taking a medication.
- Staff will make a note of the time the participant is to take the medication and will cue them at said time.
- Staff may play a verbal, supportive role only.
- If there is a problem, the participant's caregiver is contacted.

MAINTAINING A SAFE, COMFORTABLE ENVIRONMENT AT TAPS

Rationale

Maintaining a safe and comfortable environment at TAPS ensures participants' needs are met without harm. This includes being aware of hazards and removing them if they exist.

Policy

When staff, volunteers, and participants of TAPS are in the building or at different locations in the community, everyone needs to be aware of tripping or other hazards that could pose a safety risk.

Procedure

- The set-up and layout of tables and chairs is kept the same as much as possible. Four tables are set up starting at the east end of the room. Eight chairs are put around each table. Care is taken to ensure there is enough space for participants with walkers to move freely. If another table is needed, it is added, but is usually taken down after lunch to allow more space for activities.
- Staff will clear away any tripping hazards such as bags, purses, and canes. Coats are to be kept on chairs, hung up on a coat rack, or placed on cupboards in the TAPS area.
- Staff will ensure all walkers are left with the brakes on and parked along the wall or in corners to prevent tripping. These items are retrieved at the participant's request by staff or volunteers.
- If the floor is wet from a spill or from wet feet, it is cleaned immediately with a mop and the caution sign will be placed in the wet area.
- On snowy or wet days, a mop is used in the entrance to immediately clean up any water.

SUBSTANCE USE WHILE ATTENDING TAPS

Rationale

TAPS needs to be a safe and comfortable environment for all participants. In order to maintain the well being of everyone, participants are asked not attend if under the influence of drugs or alcohol.

Policy

TAPS staff will assess participants who may be under the influence of drugs and alcohol, and find alternate support.

Procedure

- When staff are picking up a participant for the TAPS program, a quick assessment of their personal condition is performed. If there is any question about a person's ability to participate fully in the program, the staff will ask the participant to wait at home and the Coordinator will call shortly. The other participants are taken to TAPS the other participants are taken to TAPS and the Coordinator is alerted.
- The Coordinator will call the participant and have a conversation around safety and comfort of all participants and explain the reason why the participant was asked not to attend. The Coordinator will offer different supports such as a home visit later in the day if safe to do so or connect the participant to professional support.
- If a participant arrives at TAPS and is thought to be under the influence of drugs or alcohol, the coordinator will take the participant to private space where they will discuss the problem and support the participant to a plan for the remainder of that day and a future plan. The Coordinator will encourage and support the participant to connect with community supports.
- The Coordinator will check in with the participant at the end of the TAPS day.

SUPPORTING PARTICIPANT MOBILITY NEEDS

Rationale

Participants with limited mobility need support from time to time during their participation at TAPS. Participant's physical safety and the safety of staff is always imperative.

Policy

Staff will support participants' mobility when necessary. Volunteers and/or participants do not assist other participants "hands on" with their mobility needs. If assistance is needed, staff will provide this support.

Procedure

- Staff will use the appropriate handhold and back support method when assisting a participant needing mobility support, (see [Figure A on next page](#)).
- Staff will maintain awareness of their role in supporting participants and at no time will staff carry any of a participants' weight.
- If a participant seems to need more help, staff will use the walker and transfer belt that are kept in the wheelchair bathroom to move the participant. This is used for small distances over easy terrain.
- If a participant requires more help, family and/or emergency services will be contacted.
- If a volunteer sees two participants assisting each other, they must alert a staff member to intervene. Staff will then assist by supporting the participant.
- Volunteers will support staff members as directed (not physically).

Assisting the Patient to Walk – One Person Technique

Instructions

Cane:

Patient should use the aid on the 'good' side if possible. Caregiver should assist on the 'bad' side.

Use a thumb-to-thumb grasp – place your right hand (palm up) into the patient's right hand (palm down) (or left hand to left hand depending on patient and space).

Use a firm trouser belt or preferably a **transfer belt** to support the patient.

Reach across the patient's back to grasp the belt. **Do NOT lift up on the belt.**

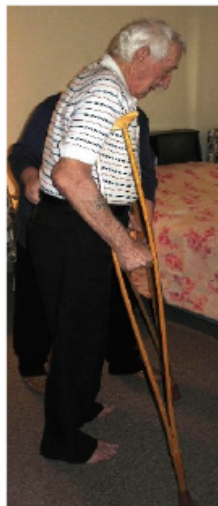
Remain at the side of the patient to provide support with your hip and hand grasp. Only move away from the chair once you are sure the patient can **balance**.

Maintain contact and only provide as much support as the patient needs:

1. **Raising your hand grasp** will allow the patient **less support** from you.
2. **Lowering your hand grasp** will enable the patient to take **more support** from you (like a cane).

Crutches: Position yourself at the side, grasp a belt and hold onto the closest crutch. This allows you to direct the patient's walking pattern and provides extra support if needed.

Stand behind the patient going up stairs and in front of them going downstairs (with a very firm grasp on the railing to support yourself).



Safety Points

Use these instructions to assist any patient to walk including:

1. No aid required
2. Use a cane,
3. Use a 4-point cane,
4. Use a regular walker,
5. Use a wheeled walker or
6. Have crutches.

This procedure is to be used only after a recent *Patient Mobility Assessment* form or a rehab assessment indicates that the patient is capable of a manual transfer with assistance of an aid and one caregiver.

DO not support the weight of the patient with your hand grasp. If you feel you are taking too much weight for safety of you or the patient—sit the patient down and contact the clinician or your supervisor for direction.

Use the transfer belt as a handhold only—do not attempt to lift or fully support the patient with it.

If the patient begins to sway or fall, you may be able to break the fall but do not attempt to keep the patient standing—you **will be unable to support their weight** and are at significant risk of injuring yourself.

This applies whether the patient uses a walker, cane or crutches. Follow the Home Support protocol for a patient fallen to the floor.

Assisted Walking – One Person

SUPPORTING PARTICIPANTS WHO HAVE FALLEN AT TAPS

Rationale

TAPS participants are prone to falls due to a variety of factors.

Policy

If a participant falls at TAPS or while attending the TAPS program away from the main program location, TAPS staff must be alerted immediately and begin First Aid.

Procedure

- Do not attempt to help the person up.
- TAPS staff will follow first aid procedures. Volunteers will support staff as necessary.
- Staff will begin administering First Aid to their appropriate level of First Aid certification. If there appears to be no apparent injury requiring immediate emergency treatment, staff can cue the person to begin getting up. Staff will encourage the person to get onto their hands and knees, then to a chair.
- If a participant is unable to get up or if they require emergency treatment, staff or a volunteer at the staff's request, will call 911.
- All participants that have had a fall must be seen by a medical professional at the emergency department as soon as possible. The participant's family or emergency contact will be called to meet the participant and TAPS staff at the hospital as soon as possible (see, [Escorting a TAPS Participant to the Emergency Department](#) Policy).
- A Reportable Incident report must be completed.

TRANSPORTATION AND LICENSING

Rationale

TAPS participants will be transported in vehicles conforming to current licensure and Motor Vehicle Act Regulations to maintain safety.

Policy

Drivers who provide transportation to TAPS participants in the big van are required to hold a class 4 driver's license. Vehicles operated by the TAPS Program will be maintained according to manufacturer recommendations.

Procedure

- Those being considered for hire as a TAPS driver operating the big van will be required to provide proof of class 4 licensure and a clean driver's abstract.
- TAPS Drivers are required to schedule appointments for maintenance and keep a log book.

TRANSPORTING AND PURCHASING FOOD

Rationale

To ensure food is handled appropriately to maintain freshness.

Policy

Food served at the TAPS program will always be fresh. To maintain freshness, the following procedures will be followed by all staff transporting or purchasing food.

Procedure

- Food is purchased from local grocery stores.
- Purchased perishable food is placed in cooler with ice and sealing lids.
- Purchased nonperishable food items are placed in bags.
- Coolers and bagged items are placed in rear of the bus and transported immediately to the TAPS building.
- Food items are unloaded and stored immediately.
- When putting purchased food away, it is important to check for breaks, dents, expiry dates, trans fat content, and leakage.
- Food items needing to be returned will be bagged and returned to the supplier.

BILLING AND CASH HANDLING

Rationale

To ensure cash is kept secure and accounted for at all times.

Policy

Cash will be kept secure and accurate records will be kept.

Procedure

- Participants are charged \$6 per day for meals. Some people pay daily and some prefer to be billed monthly. Payments may be made by cash, cheque, or by monthly direct debit (Pre Authorized Debit).
- Billing is performed based on daily attendance records. Staff will notify participants of the amount owing at the beginning of the following month.
- Money collected is noted on the billing summary sheet with a check mark and tallied at the end of the first week. Money that comes in after the end of the first week is totaled in another deposit.
- Participants are charged \$2 per day for transportation to and from the program.
- Participants who pay daily are encouraged to combine the transportation and meal fees into their daily payment.
- Participants who pay monthly will have both meal and transportation fees combined on one invoice. Attendance records will be used to determine amounts invoiced.
- Money collected for Wednesday shopping is totaled into individual bags and the amount collected must match the expected amount as per the daily attendance sheet.
- When adding funds in deposit bags, staff must initial the slip indicating the amount they counted matches the attendance records.
- Money is taken to the main office within one to two weeks of receipt, depending on the amount received.

FOOD DONATIONS

Rationale

Food donated to the program will only be accepted from specific groups to ensure freshness and fitness for use.

Policy

TAPS will only accept donations from preselected sources.

Procedure

When accepting donated food, it is essential staff ensure the food is safe (not spoiled) and healthy (nutritious). Some foods are known to be potentially hazardous and cannot be accepted or given to participants.

Foods that cannot be accepted include:

- Perishable foods such as meat or dairy products fresh or frozen
- Foods that have been prepared at home
- Home canned food
- Home frozen food
- Foods that have been exposed to contaminants
- Out of date food
- Open boxes of food
- Damaged canned goods

Food products that are not accepted can be passed along to other programs in the community. Volunteers are encouraged not to take unusable food home.

Acceptable donations include:

- Items baked the same day - must be dated when put in the freezer
- Canned products in good condition
- Closed packages of products in good condition

TAPS EVACUATION PROCEDURE

This is an example from TAPS Creston and is practiced regularly. Upon discovery of a fire or a fire alarm going off, locate the fire. If the fire is small and can be easily extinguished - do so. If the fire is too large to be extinguished using a fire extinguisher, proceed to the Fire Muster Station(s) and begin a building evacuation.

Procedure* - First person to arrive at the Fire Muster Point.

1. Gather daily attendance, staff contact information, flashlight, fire procedure sheets, extra bus/van keys, and phone.
2. If 2nd and 3rd staff arrive give them directions (see below).
3. Announce evacuation of building. Say, "there is a fire and we are evacuating the building please follow...." yourself or 2nd person to the {LOCATION} where the bus will meet you.
4. Delegate volunteers to specific participants that need extra help to evacuate.
5. Phone 911 or delegate to a staff, volunteer, or participant.
 - Say: Your name
 - Provide: The address of the building and report that the building is being evacuated because of a fire
 - Give: A contact number in case you are disconnected
6. Have participants and volunteers follow staff to gather at the muster point. Check off names of participants on attendance list as they arrive.
7. Begin checking building room by room if possible, closing doors behind you.
8. When all rooms are checked or if unsafe to continue, leave the building.
9. If possible, wait in parking lot for fire department to arrive.
10. Call the main office to report the incident.

Procedure* – Second person onsite

Provide the second person onsite with the attendance list and the red flash light and ask them to lead the evacuation.

Check off names of people as they arrive at the muster point.

Procedure* - Third person onsite

Assist people as necessary to exit the building and walk to the muster point.

*Staff assigned to tasks during an evacuation will not put themselves in jeopardy for carrying out tasks, nor should they delay an evacuation if they are in harm's way.

TAPS HOT WEATHER POLICY

Rationale

Hot weather can quickly put participants at risk for heat related illnesses. The TAPS programs may not have central air conditioning, and this can result in the area becoming too hot to be comfortable and safe.

Policy

The Program Coordinator in consultation with other program staff, including drivers, will make the decision to close the program, limit the geographical location of pickups, or run a half-day program if the temperature is predicted to exceed 30° celsius during program hours of operation.

Procedure

- The Program Coordinator will make an assessment of current weather and will consult the weather forecast.
- Temperatures over 30° celsius are considered too hot to have a full day of activity.
- If possible, lunch will be provided by TAPS as this relieves participants from having to cook at home.
- When participants are called, an explanation of the closure or partial closure is provided. During this call, participants are asked about their ability to keep cool in their homes, support will be given as needed.
- When transporting participants to and from TAPS in hot weather, vehicles must be cooled down before participants enter them.
- All vehicles will be equipped with a hot weather cooler box. Staff are responsible for ensuring this cooler box is properly stocked with water, cloths, and cold packs.

TAPS WINTER WEATHER POLICY

Rationale

Winter weather can make transporting participants to TAPS with poor mobility unsafe and uncomfortable.

Policy

The Program Coordinator, in consultation with program drivers, will make the decision to close the program, limit the geographical location of pickups, or run a half day program if roads, driveways, and/or pathways appear to be unsafe.

Procedure

- The Program Coordinator will consider the weather forecast and make an assessment of the forecasted temperature and road conditions.
- Temperatures below -20° celsius are considered too cold to transport participants safely.
- Program drivers may be asked to drive in order to assess road conditions.
- At the discretion of the Program Coordinator, a decision may be made to open the program to those participants who live within town limits.
- The program could be closed for the day, or close after lunch if more severe weather is forecast.
- When participants are called, they are asked about their pathways and driveways. Access to the participant's door must be free of ice and snow for a pickup to be made.
- Support is given to those that need help finding snow removal service.

TAPS ACTIVITY SET UP AND TAKE DOWN PROCEDURES

Setting Up the Program Area for Dining

- Wash hands using hand washing sink in the kitchen.
- Ask staff how many places are needed for the lunch meal.
- Clean tables and lazy Susans using dish soap and cleaning cloth found in the server.
- Allow to air dry.
- Set the correct number of chairs around the tables.
- Using metal cart for supplies, set placemats at each place setting.
- Wrap silverware in a napkin and place at each setting.
- Set cup upside down on placemat.
- Check to make sure the salt and pepper, sugar, cream, bowl for garbage, stir sticks, and napkins are on the Lazy Susan.

Program Clean Up

- Clear tables using metal cart, putting supplies in server.
- Use a bucket and cleaning cloth to wash tables and lazy-susan.
- Allow tablecloths to air dry.
- Put tablecloths and lazy Susan away.
- Wipe chairs if necessary.
- Stack chairs on dollies, facing the back of the chair to the lowest part of the dolly. Stack as high as you are comfortable doing.
- Roll chairs to wall.
- Collapse tables and put away in storage cabinet.
- Tidy counters.

APPENDIX A - TAPS FORMS

Therapeutic Activation Program for Seniors (TAPS) Participant Intake Form

*denotes required fields for reporting.

OPTIONAL: all other fields that do not have an asterisk * are only for program sites as needed and will not be required or collected by UWBC.

*Intake date (yyyy/mm/dd): _____	<input type="checkbox"/> Inactive
*Intake staff: _____	Inactive date (yyyy/mm/dd): _____
* Region	Reason: _____
*Referral source (choose one):	
<input type="checkbox"/> bc211 <input type="checkbox"/> Host Organization <input type="checkbox"/> Other Community-Based Agency <input type="checkbox"/> Advertisement <input type="checkbox"/> Physician	
<input type="checkbox"/> Allied Health Professional <input type="checkbox"/> Nurse <input type="checkbox"/> Home Health Nurse <input type="checkbox"/> Hospital (Registered Nurse)	
<input type="checkbox"/> Hospital (Social Work) <input type="checkbox"/> Friend/Family <input type="checkbox"/> Self-referral <input type="checkbox"/> Unknown <input type="checkbox"/> Other _____	
Participant Information	
*First name:	Middle name:
*Last name:	*Personal Health Number (PHN):
Phone (Primary):	Phone (Secondary):
Email:	
*Date of birth (yyyy/mm/dd): _____	*Gender (choose one):
<i>Note year is sufficient if birth date cannot be acquired</i>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other: _____
	<input type="checkbox"/> Prefer Not to Disclose <input type="checkbox"/> Unknown

Street address: _____

City: _____ Province: _____ *Postal code: _____ Country: _____

Lifeline: _____ Lock Box: _____ PIN: _____

*Living Arrangement: Living alone Do not live alone Unknown

Marital status: Married Common law Single Divorced Widowed

*Ethnic origin (choose one):

- Anglo-Canadian French-Canadian (Quebecois, Acadian) European African
- North American Indigenous (First Nations, Indigenous, Metis, Inuit) Oceania
- East/South East Asian (Chinese, Vietnamese, Japanese) South Asian (Indian, Pakistani)
- West Asian/Middle Eastern (Persian) Caribbean Latin, Central, or South American
- Other: _____ Prefer Not to Disclose

*Primary language (choose one): English French Indigenous Language German Korean

Mandarin Cantonese Punjabi Tagalog Farsi Spanish

Other _____

Emergency Contact(s)

Name:

Relationship:

Phone (Primary):

Phone (Secondary):

Email:

*Income: <input type="checkbox"/> less \$24,000 <input type="checkbox"/> above (or equal to) \$24,000					
	Not at all (1)	A little (2)	Somewhat (3)	Very (4)	Not applicable (5)
*How comfortable do you feel living independently at home?					
	Very bad (1)	Bad (2)	Bad and good about equal (3)	Good (4)	Very good (5)
*How have things been going for you in the past 6-months?					
	Yes (1)	No (2)	Prefer not to say (3)		
*Do you find it hard to complete daily activities (such as making meals, banking, getting around, shopping, and meeting other people) due to physical, mental, or emotional challenges?					

Interview Guide

This form is a sample of how to collect social information.

Interview date:	Interview staff:	Date active:	Date inactive:
First name:	Middle name:	Last name:	Date of birth:
Phone number:	Secondary phone number:	Email:	Dr/clinic phone number:
Emergency contact:		Emergency contact:	

Health and Safety

Condition of home:	Safety concerns
Condition of the person?	Are there any pets present?
How does the person mobilize?	What mobility aids are used?

Any health concerns you would like to share that would help support you at TAPS?	Any dietary concerns?
What form of transportation do you use?	What supports do you use to access the community?
What challenges do you perceive around transportation?	

Physical Activities

What do you enjoy for physical activity?	How did you used to keep active?
Do you have any goals for physical activity? Improving balance or strength?	Did you have any active hobbies?
Have you ever tried seated exercises?	

Intellectual Health

<p>What sort of activities do you do to support your intellectual health?</p> <p>Reading, singing, puzzles?</p>	<p>In the past what sort of quieter activities did you enjoy?</p>
<p>Did you have a career that you enjoyed?</p>	

Emotional Well-Being

<p>Do you ever feel sad or alone?</p>	<p>What do you do to cope with those feelings?</p>
<p>What makes you happy?</p>	

Social Well-Being

<p>Do you see and visit with family or friends?</p> <p>How often?</p>	<p>Do you see and visit with your neighbours?</p> <p>How often?</p>
---	---

Tips for Interview Guide

- The initial referring phone call can be used to make sure the participant is a good fit. Who is calling? Have they spoken to the participant about the program? If it is a health care professional making the call, information can be learned about the goals for the participant they are referring. If the hope is complete recovery and a return to their original life, then maybe they are not a good fit. If they are waiting for placement in a facility, then they may need more support than can be offered in the program.
- Use the guide questions as a jumping off point for deeper conversations.
- Be clear about how the program runs and expectations of participants and any caregivers.
- Take time to get to know each participant, even if it takes two visits.

TAPS Participation Agreement Form

Purpose of the Program:

The Therapeutic Activation Program for Seniors (TAPS) program is funded by the Province of BC, managed by the United Way and offered by **[name of organization]**. It was developed to support higher needs or homebound older adults to remain independent in their homes and active in their communities for as long as possible.

How it Works:

TAPS provides proactive outreach to older adults in the community to check-in on their well-being and arrange transportation to day programs. Day programs are offered Monday to Friday and consist of a mix of physical, educational, creative and, social activities as well as a nutritious meal.

Learning and Quality Assurance Plan:

We are always interested in improving our programs and services at **[name of organization]**. Throughout the TAPS program we will be working with United Way to learn what is working, how it is working, and what needs to be changed, thus ensuring the program continues to improve to best serve our participants. In order to do this, we will ask participants how they have benefitted from the program and changes required to make improvements.

What You Will Be Asked to Do: The TAPS Coordinator will ask you questions as part of the intake interview about your health, challenges, involvement in the community, use of healthcare services, and quality of life. The TAPS Coordinator will follow up with you at various times after your intake interview to see if any changes may have occurred.

Risks and Discomforts: You may be asked questions that you view as very personal or outside of your comfort zone. If you are uncomfortable answering certain questions, please let the TAPS Coordinator know. You do not have to answer questions you are uncomfortable with.

Voluntary Participation: Your participation in the TAPS program is voluntary and you may choose to withdraw at any time. Your decision to withdraw will not affect any other programs and services you currently are receiving or would like to receive at **[name of organization]**.

Confidentiality: All information collected from you will only be shared with **[name of organization]** staff/volunteers and the United Way for research purposes. Information collected will remain confidential; your information will be recorded electronically on a secured server or stored in a locked cabinet in an office that is locked when not in use by staff. Your information will be kept anonymous when used for reports; your name will not be attached to any of the information you provided.

Participant Rights:

As a participant of the TAPS Program you have the **RIGHT** to:

1. Be treated with respect, courtesy, honesty, and consideration;
2. Information about the services you are seeking/receiving and to have your inquiries answered promptly;
3. Have your private information kept confidential;
4. Request a change in volunteer if a reasonable cause can be given;
5. Be informed of any changes to your services as soon as possible;
6. Choose to refuse or to terminate services.

Participant Responsibilities:

As a participant of the TAPS Program it is your **RESPONSIBILITY** to:

1. Treat staff and volunteers with dignity and respect. Failure to do so will result in the termination of services;
2. Provide necessary information accurately and in good faith;
3. Ask questions to clarify anything you do not understand;
4. Be respectful of and adhere to the activity time set up with the TAPS program, except in the case of a medical emergency or severe weather conditions.
5. Inform the organization when an appointment needs to be cancelled as far in advance as possible.
6. If weather conditions such as snow or icy roads occur and you prefer to reschedule your appointment, it is your responsibility to contact the organization to cancel or reschedule your appointment.

By participating in the TAPS Program, I acknowledge that:

Document in personal file when personal safety plan is used.. By completing the intake interview and subsequent follow-up interviews, I understand that I am giving my informed consent to participate in the quality and learning (evaluation) of this program as per the terms of this document.

Participant Name (Printed)

Date

Participant Signature

Date

TAPS Program Signature

Date

TAPS Dietary Restriction Form

Name: _____ Phone: _____

Contact information: _____

Physician name and number: _____

Dietary restrictions: _____

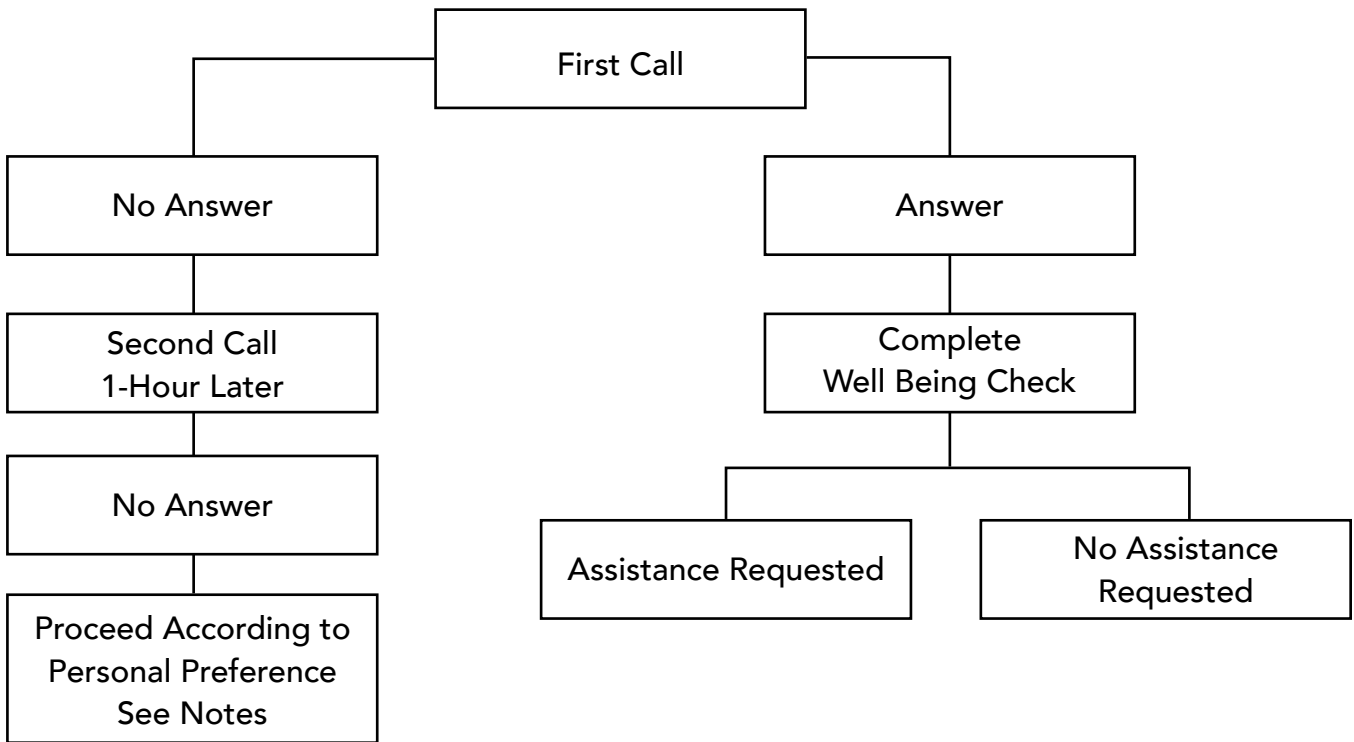
Date: _____

TAPS Personal Safety Plan

Date: _____ Name: _____

Address: _____

Phone Number: _____



Call #
Call #
Call #
Call #

Notes:

X

 Staff Signature

Document in personal file when personal safety plan is used.

TAPS Medical Emergency Policy Acknowledgement

TAPS participants attend TAPS under the full time supervision of a TAPS staff member. TAPS staff members are not medical professionals i.e. doctors, nurses. All TAPS staff have a valid level one First Aid certificate. In a medical emergency TAPS staff will administer first aid to their level of training until the situation is resolved or medical help arrives. If a TAPS participant is taken to hospital, either by TAPS staff or by ambulance, TAPS staff will remain with them if possible, until a caregiver arrives or the hospital staff feel there is no need to stay.

Name: _____

Signed: _____

Date: _____

TAPS Photo Release

I consent to be included in photos and videos taken during social and educational events that maybe released into the media.

Name: _____

Signed: _____

Date: _____

TAPS Emergency Identification

Name: _____

Date of Birth: _____

Address: _____

Phone Number: _____

Emergency Contact Person: _____

Phone Number of Emergency Contact Person: _____

Special Considerations: _____

TAPS Participant Health Support Plan

Name: _____

Start date of support plan: _____

End date of support plan: _____

Health concern that requires a support plan: _____

Health Support Plan developed in consultation with: _____

Medical Professionals involved: _____

Plan: _____

Signed: _____ TAPS Coordinator

Signed: _____ TAPS Participant

Date: _____

APPENDIX B - ACTIVITIES AND RESOURCES

SAMPLE TAPS CALENDAR

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
1 Closed Canada Day	2 Book Club Strumming Canadian Lunch Tai Chi	3 Swimming Shopping Lunch Art	4 Singing Canadian Lunch Drama Group Bowling	5 Lunch Field Trip
8 Games Field Trip Lunch Exercises	9 Book Club Strumming Lunch Tai Chi	10 Swimming Shopping Lunch Art	11 Singing Lunch Drama Group Bocce	12 Lunch Field Trip
15 Games Lunch Exercises	16 Book Club Strumming Lunch Tai Chi	17 Swimming Shopping Lunch Art	18 Singing Lunch Guest Speaker Bowling	19 Lunch Field Trip
22 Games Field Trip Lunch Exercises	23 Book Club Strumming Lunch Tai Chi	24 Swimming Shopping Lunch Art	25 Singing Fancy Dress Luncheon Word Games Bingo	26 Closed Office Day
29 Games Lunch Exercises	30 Book Club Strumming Lunch Tai Chi	31 Swimming Shopping Lunch Art		

Activity Resources

ACTIVITY	TYPE OF ACTIVITY	SUPPLIES	GROUP SIZE	TIPS AND ADAPTIONS
Score keeping	All	White board	All	Use high contrast pens
FM system	All	Portable FM system	All	Very useful for staff to wear during activities. Have hard of hearing participants sit together and share the speaker.
The Family Book of Parlour Games (amazon)	All		All	Try to have participants working in teams.
Hangman	Intellectual, Social	White board	All	Take turns among the players so everyone gets a chance.
Crossword	Intellectual, Social	Giant erasible crossword book and poster	All	Take turns around the room so everyone gets a chance. Great to have it on going throughout the day and have people fill it in.
Reading aloud	Intellectual, Emotional, Social	Chicken soup books, quick mysteries, short stories. Short plays	All	Allow time to reminisce.
Charades	Physical, Intellectual, Social	Activities to act out	All	Work in teams, more fun and great for team building,

ACTIVITY	TYPE OF ACTIVITY	SUPPLIES	GROUP SIZE	TIPS AND ADAPTIONS
Dominoes	Intellectual, Social	Dominoes, Chicken foot dominoes (Wikipedia)	3-6 players great for dementia	Always make a big chicken noise when a double is played. Part of the fun.
Crockinole	Intellectual, Social	Crockinole board	2 or 4 great for dementia	Easy game almost anyone can play.
Cards	Intellectual, Social	Cards	6	Golf, Kings in the corner, Crazy 8, Uno
Scrabble	Intellectual, Social	Scrabble Game	2-6	Find easy variants of the game, or play in teams
Bingo	Intellectual, Social	Good quality bingo game	All	Make theme variations on the cards
5 pin Bowling	Physical, Intellectual, Social	Full size indoor bowling set, 5 pin (trust me) scoreboard	All	Have two teams select names. Use a chair for stability.
Horseshoes	Physical, Intellectual, Social	Indoor horse shoes	All	Make teams
Golf	Physical Intellectual, Social	Indoor putting set	All	
Reminiscing	Intellectual, Social, Emotional	Conversation cards, magazines, photos, show and tells	Small groups	Make sure everyone has a chance to share.

APPENDIX C - JOB DESCRIPTIONS

COORDINATOR

POSITION SUMMARY: Responsible for all aspects of TAPS program. This is a sole charge position. The Coordinator will deliver and coordinate the activity program to provide social, emotional, physical, and recreational stimulation for at risk seniors.

RESPONSIBLE TO: Executive Director

QUALIFICATIONS: Bachelor's Degree in Recreation Education, Therapeutic Recreation, Occupational Therapy, or a related field and two years recent related experience or a combination of education and experience. Graduation from a recognized geriatric recreation coordinator program.

Must also have the following;

- Valid, unrestricted, class 4 BC driver's license
- Food Safe certificate
- Valid CPR certificate
- Valid First Aid certificate
- Experience in a supervisory capacity or equivalent
- Education and experience with dementia and aging

JOB RESPONSIBILITIES:

- Maintain files as per organization requirements
- Supervisory and administrative duties such as scheduling, timekeeping, statistics collection, and charting
- Work with various committees
- Work with the community liaison to assist in the development of proposals
- Participate in ongoing professional development by attending related seminars, courses, and conferences
- Review programming regularly to ensure therapeutic program meets the specific needs of the participant

- Coordinate group activities with other community groups
- Provide home visits and one-to-one visits when required
- Coordinate the volunteer program by recruiting, orientating, scheduling, supervising, and evaluating volunteers in program activities
- Schedule workers
- Supervise activity aides
- Provide public safety during all activities
- Operate and complete maintenance log for buses on a daily basis
- Transport participants to and from activities when required
- Collect fees and keep inventory of supplies updated
- Give input to accountant regarding operating budget
- Assess incoming participants
- Consult with the participants' family, home support, adult mental health, dietician, and medical staff as appropriate in order to determine the activity needs of the participant
- Monitor and record participant's behaviour, attitudes, participation, and general progress (note taking required)
- Report significant changes in participants to family, home support, and healthcare team
- Coordinate, implement, and evaluate recreational and social programs
- Provide educational programming
- Establish program protocols for activities, safety precautions, and resource lists.
- Coordinate outings, community visits, entertainment, and other social and recreational activities
- Develop a monthly program calendar that includes daily attendance calls (am), meals programs, and safety plans
- Other duties as assigned

COMPETENCIES:

- Possesses the personal qualities and attitudes that respect and maintain the spirit, dignity, and individuality of the participants
- Is able to establish and maintain harmonious relations with participants, families, and staff
- Works independently, organized, and sets priorities
- Has supervisory skills
- Is in good health, physically and mentally fit and able to carry out assigned duties in the working environment
- Remains calm and provides direction in crisis situations
- Performs tasks required to maintain/restore the physical, social, and emotional health of the individuals and their families and to improve upon their quality of life
- Possesses excellent communication skills
- Operates program equipment effectively
- Knowledge of program eligibility criteria
- Knowledge of community resources and agency programs and how participants can access these resources

STAFF SUPERVISED BY THIS POSITION: TAPS Assistant Coordinator, TAPS Cook, TAPS Drivers and Program Aides

Updated June 2019

COMMUNITY LIAISON DEVELOPMENT COORDINATOR

POSITION SUMMARY: To support TAPS through the acquisition of funds from various sources.

RESPONSIBLE TO: Executive Director

QUALIFICATIONS: A combination of relevant education and experience is required.

JOB RESPONSIBILITIES:

- Maintain files
- Work to develop community partnerships in support of TAPS
- Maintain positive relationships with supporters
- Work with Program Coordinator and establish priorities for funding
- Research funding that would fit TAPS
- Develop funding proposals with Coordinator and other staff
- Develop a business strategy for the program
- Work on budgets and final reports
- Develop a schedule with Development Coordinator to insure all opportunities to apply for grants are met and reporting deadlines
- Present opportunities to community funders to support TAPS
- Develop evaluations to meet grant reporting requirements
- Collect data to report to funders according to specific funder requirements
- Maintain communication and liaison with administration and TAPS staff to keep both parties aware of all possible opportunities for partnership for TAPS
- Demonstrates ability to maintain strong partnerships within the community
- Demonstrates ability to maintain good solid relationships with the TAPS and administrative team
- Other duties as assigned

COMPETENCIES:

- Is comfortable speaking to groups and making community presentations
- Is well organized and meets deadlines
- Is connected to the community
- Uses effective verbal and written communication skills
- Is flexible
- Demonstrates sound decision making abilities
- Provides and receives constructive feedback
- Knowledge of program eligibility criteria
- Knowledge of community resources and agency programs and how participants can access these resources

Updated June 2019

ASSISTANT COORDINATOR

POSITION SUMMARY: The Program Assistant Coordinator will help deliver and coordinate the activity programming and meals program which provide social, emotional, physical, and recreational stimulation for at risk seniors.

RESPONSIBLE TO: TAPS Coordinator

QUALIFICATIONS: Graduation from a related Baccalaureate program for example; Recreation Education, Therapeutic Recreation, Occupational Therapy, or a Human Service diploma and two years recent related experience including 1 year in a supervisory capacity preferred; or an equivalent combination of education, training, and experience. Graduation from a recognized geriatric recreation coordinator program.

Must also have the following;

- Valid, unrestricted, class 4 BC driver's license
- Food Safe certificate
- Valid CPR certificate
- Valid First Aid certificate
- Experience in a supervisory capacity or equivalent
- Education and experience with dementia and aging

JOB RESPONSIBILITIES:

- Agree to and follow policies in Administration and Management Policy Manual and relevant Program Manual(s)
- Maintain files as per organization requirements
- Supervisory and administrative duties such as scheduling, timekeeping, and charting
- Participate in ongoing professional development by attending related seminars, courses and conferences
- Provide nutritious balanced meals for groups of seniors
- Supervise staff and volunteers to follow food safe practices in kitchen and dining room areas
- Assist in the management of a commercial kitchen

- Organize and support clients on the Better at Home shopping program
- Review programming as a team regularly to ensure therapeutic program meets the specific needs of the client
- Coordinate group activities with other community groups
- Provide home visits and one-to-one visits when required
- Supervise activity aides
- Provide public safety during all activities
- Operate and complete maintenance log for buses on a daily basis
- Collect fees and keep inventory of supplies updated
- Monitor and record client's behaviour, attitudes, participation, and general progress
- Develop as a team a monthly program calendar that includes daily attendance calls (am), meals programs, and safety plans
- Review programming as a team regularly to ensure therapeutic program meets the specific needs of the participant
- Transport participants to and from activities when required
- Assess incoming participants
- Other duties as assigned

COMPETENCIES:

- Possesses the personal qualities and attitudes that respect and maintain the spirit, dignity, and individuality of the clients
- Is able to establish and maintain harmonious relations with clients, families, and staff
- Works independently, organized, and sets priorities
- Has supervisory skills
- Is in good health, physically and mentally fit, and able to carry out assigned duties in the working environment
- Understanding of volunteer roles within the program
- Remains calm and provides direction in crisis situations

- Performs tasks required to maintain/restore the physical, social, and emotional health of the individuals and their families and to improve upon their quality of life
- Possesses excellent communication skills
- Operates program equipment effectively

STAFF SUPERVISED BY THIS POSITION: Activity aides and volunteers.

Updated June 2019

PROGRAM AIDE/DRIVER

POSITION SUMMARY : Assist TAPS Coordinator with programming and meal preparation. Support seniors in their participation at the TAPS program. Maintain and drive vehicles used in the TAPS program.

RESPONSIBLE TO: TAPS Coordinator

QUALIFICATIONS: A combination of relevant education and/or experience related to seniors.

Must acquire the following within 6 months of hire:

- CPR/First Aid certificate
- Class 4 driver's license unrestricted
- Food Safe certificate

JOB RESPONSIBILITIES:

- Assist program to provide physical, intellectual, emotional, and social stimulation for seniors
- Organize work and set priorities
- Operate program equipment
- Advise TAPS Coordinator of any needed supplies
- Report to Coordinator to discuss participant needs and progress
- Computer related duties
- Receive participant feedback, inquiries, and complaints and respond as required.
- Demonstrate knowledge and understanding of the dementia journey and support seniors with dementia and aging
- Assist with activity programs such as arts and crafts, music, woodworking, board games, cards, cooking, gardening, etc.
- Assist with participants' activity programs outside the facility; ensure participants have appropriate clothing and necessary equipment for the activity; confirm details of proposed activity with family if applicable; and coordinate the movement of participant during the activity and teach the techniques of related activities
- Report any malfunctioning of equipment to TAPS Coordinator

- Facilitate the shopping program
- Assist Kitchen Coordinator as required
- Driving participants safely to and from their home to TAPS
- Facilitate DOT inspections
- Cleaning & fuelling busses
- Pre-trip inspections
- Keep book of emergency contacts for participants up to date in bus
- Wednesday shopping program
- Facilitate maintenance of bus
- Reporting maintenance to Assistant Coordinator
- Complete/maintain maintenance log for busses
- Report progress on participant's overall wellness, behaviours, and participation to Assistant Coordinator
- Perform relief work for other drivers
- Check safety supplies on bus
- Other duties as assigned

COMPETENCIES:

- Establishes and maintains effective working relationships with others
- Possesses excellent communication skills
- Works well independently and as part of a team
- Communicates effectively with all levels of care team; possesses tact, empathy, patience, and courtesy when dealing with others
- Possesses a positive attitude and works well with seniors
- Remains calm in a crisis situation
- Is physically and mentally able to carry out the duties of the position
- Knowledge of program eligibility criteria
- Knowledge of community resources and agency programs and how participants can access these resources

COOK

POSITION SUMMARY : The Cook is to prepare between 30 and 40 home cooked meals each day. The cook also will supervise the setting up of the dining room and supervise the kitchen volunteers.

RESPONSIBLE TO : TAPS Coordinator

QUALIFICATIONS:

- Food Safe certificate
- Criminal record check
- Experience working with seniors
- Experience cooking in commercial kitchen
- Experience setting and cleaning tables

JOB RESPONSIBILITIES:

- Manage sanitation and food organization in the kitchen, pantry, and servery
- Order and receive groceries
- Cook pre-planned home cooked meal for 30-40 people in a commercial kitchen
- Create monthly meal plans
- Coordinate kitchen volunteers (approximately 3 at a time)
- Coordinate donations of food

COMPETENCIES:

- Must be able to follow food safe and public health practices
- Must be able to supervise volunteers and kitchen helpers
- Must be able to supervise setting tables and making coffee
- Keep supplies in dining fridge organized and stocked
- Must be able to supervise the serving of hot drinks and the serving of tables
- Must be able to supervise clearing tables after meals

SUMMER STUDENT

POSITION SUMMARY: The summer student supports the TAPS program for seniors. This position researches, organizes, and assists seniors to participate in community events. This position also provides office and computer support.

RESPONSIBLE TO: TAPS Coordinator

QUALIFICATIONS: Currently a full time student (either high school or in a post-secondary institution). Good research and communication skills, good knowledge of the community, and good event planning skills. Must provide a criminal record check.

JOB RESPONSIBILITIES:

- Assist seniors to participate in socialization projects with peers and within the community
- Assist seniors in activities that foster independence, activity, and wellness
- Assist program to provide physical, intellectual, emotional, and social stimulation for seniors
- Organize work and set priorities
- Research community events and ways seniors can participate
- Work with seniors to develop activities that interest them
- Work with community groups to adapt events for seniors
- Prepare, coordinate, and assist seniors as they access events
- Evaluate seniors' involvement and contributions to community events
- Office and computer support related duties
- Researches and facilitates events for seniors

COMPETENCIES:

- Establishes and maintains effective working relationships with others
- Works well as part of a team and independently
- Communicates effectively with all levels of care team; possesses tact, empathy, patience, and courtesy when dealing with others
- Knowledge of program eligibility criteria
- Knowledge of community resources and agency programs and how participants can access these resources

Staff Training Resources

S.A.I.L.S - Strategies and Actions for Independent Living.

This is a 15 hour online course for coordinators to learn the fundamentals of strength and balance based exercises for seniors. This program could enable staff to lead an exercise program and decrease the dependency on paid leaders. Good for program leaders.

<https://continuingstudies.uvic.ca/health-wellness-and-safety/courses/strategies-and-actions-for-independent-living-sail>

BCRPA - British Columbia Recreation and Parks Association.

Complete training for fitness instructors with an older adult speciality. Very comprehensive and great if your staff member is interested in fitness and leading fitness groups.

www.bcrpa.bc.ca

CTRI - Conflict Resolution Crisis and Trauma Resource Institute.

Many courses online, including dementia and non-violent intervention. Good for all staff.

<https://ctrinstitute.com>

UWBC - United Way British Columbia.

iVolunteer has training, resources, and support for volunteers and running a volunteer program.

iVolunteer.ca

Foodsafe BC.

Online food safety courses.

www.foodsafe.ca

Dementia Training

Alzheimer Society BC.

Under the menu title "I am a caregiver" lots of valuable information for supporting Dementia participants on the program.

<https://alzheimer.ca/bc/en>