



It is a common part of aging, with or without dementia, to see the older adult lose abilities. It is the role of the activity and engagement professional to focus on serving the person based on their needs and their strengths – not merely their infirmity or diagnosis. One of the major challenges of person-centered care, after taking into account the person’s needs and interest, is to select the most appropriate activity that isn’t too challenging while remaining interesting and stimulating. This selection process is referred to as staging. Successful staging helps families and staff understand where the person is and set realistic goals for living situations and activities, as well as to maintain independence and improve quality of life. This leads to better engagement, better outcomes, better satisfaction and more smiles!

MASTERING THE ART OF STAGING

- 1** | **Person-centered:** A successful staging process first considers the resident for the individual that they are. The voice of the resident needs to be included as much as possible. We can start by asking: “what type of activities would you like to do?”, “Is this easy/difficult enough?”. If they cannot be included in the process, a family member should be reached.
- 2** | **Start from the start – and never stop:** Staging is an ongoing process specific to the individual. It should start on the first assessment for engagement and throughout the length of stay.

- 3** | **Explain the goal:** As with any assessment or interview process, the voice of the resident is important. Explaining the goal of the staging process will help the person be involved, understand the goal and be an actor in their own care – which results in better activation & outcomes.
- 4** | **Constant improvement:** The same way the team is involved in quality improvement and thrives to augment the care and experience of the person, we need to consistently evaluate the engagement staging. The goal is to repeat success & avoid failures.
- 5** | **Comprehensive:** A comprehensive staging process takes into account both physical and cognitive abilities.
- 6** | **ADL and IADL:** Although not perfect, ADL and IADL stages can also contribute to distinguish between groups of people according to both severity and the types of limitations experienced but should also include the strength of the person.
- 7** | **GDS Scale:** The Global Deterioration Scale (GDS), developed by Dr. Barry Reisberg, provides caregivers an overview of the stages of cognitive function for those suffering from a primary degenerative dementia such as Alzheimer’s disease. It is broken down into 7 different stages.
- 8** | **Correct group size:** An essential aspect of staging is to understand if the person can withstand large group, small group activities or should be the focus of 1:1 activities also known as room visits.
- 9** | **There is always a person:** Even at the very late stage of life, there are way to engage a person. End of life care studies have shown that people respond to sensory programs, music, massage therapy and that results in better outcomes.

Linked Senior has made available assessments and other cheat sheets and other helpful resources to help you,, they’re available at [linkedsenior.com](https://www.linkedsenior.com). As always, feel free to contact us if you have any questions or want to learn more!