

Programme





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Welcome

Australian Recreational Therapy Association would like to welcome you to the 2O24 Virtual National Conference. The conference theme "Choice, Connection, Community" has attracted both local and international speakers to present on a range of professional issues. The ARTA Board encourages you to embrace the variety of philosophies, ideas and concepts presented over the next two days as we celebrate Recreational Therapy and examine the challenges and opportunities presented in this conference.

To assist you to have a positive experience at the conference, here are some important tips:

- > Negotiating the conference programme: We have put together a full and diverse programme. Please refer to the programme for the timing of presentations. To ensure that this event is as stress free as possible, we have tried to incorporate regular breaks, so please take note of start times of presentations. This booklet provides you with the abstracts of each presentation and we suggest you read them to help familiarise yourself with the topic.
- > **Networking:** Although we cannot have our usual face-to-face networking opportunities, at the end of the sessions each day, we have time for questions to the Board. We welcome your participation at these times. This conference will be held as a regular Zoom meeting, so you will be able to use both your video and audio. We encourage you to keep your video on, as it is much more enjoyable to present to faces, rather than black screens! However, we ask that you mute your audio during the presentations, unless you wish to ask a question, or join in the discussions after the presentation. You can also post questions or comments in the Chat as this will be monitored and we will endeavour to answer questions as soon as possible I ask that any contact is done with kindness and respect.
- > Trade Exhibition: In lieu of having trade tables this year, we do have sponsors and will be advertising their services in a slide show during break times where you can see what our great supporters and sponsors have to offer. We have their contact details in the program booklet so that you can follow up on any queries, and we will be sending all attendees an eSatchel with information from our sponsors. Please support them as they very generously support our association every year.

On behalf of ARTA, have a wonderful conference experience and let's find inspiration around 'Choice, Connection, Community'.

President

Renée Smith

Australian Recreational Therapy Australia

Day 1 Thursday 26th September

8:30am	Welcoming Address: Renee Smith, ARTA President
9:00am –	Keynote Speaker: Michael Verde Introduced by Monique Pockran
10:00am	Dementia without Loneliness:
1 hour	Michael Verde is an award-winning writer, speaker, documentary producer and teacher. He founded Memory Bridge in 2003 - an internationally recognised NGO dedicated to ending the emotional isolation of people with dementia. Memory Bridge's programs are hosted on three continents and provide ongoing education to caregivers in 14 countries. To date, Memory Bridge has connected over 9,000 people with and without dementia in one-to-one relationships.
	Michael has a M.A. in literary studies from the University of Iowa; and a M.A. in theology from the University of Durham, England, where he graduated at the top of his international class. He is currently completing his PhD dissertation at Indiana University in the area of empathetic communication and literature and religion.
10:00am -	All Aboard!!!
10:15am	Diana Rizos, Quality Compliance & Risk Manager – Lifestyle/HSE/Hospitality
15 mins	Connection helps us live meaningful and purposeful lives. We find happiness and wellness in connecting with people, pets and places. Our everyday connections offer empathy, compassion and goodwill where we also hope to find trust, faith, belief and understanding. Our human and social connections give us a sense of belonging, support and closeness, habitual routines, planned experiences and spontaneous opportunities.
	Most of us have connections in other parts of the world. Some many, others few but we have those connections because our diverse backgrounds originated from other parts of the world. Our backgrounds shape our existence and character, our moral compass and our view of the world. Without that connection we lose our perception of beginning and purpose for the future.
10:15am - 10:30am	Morning Tea (15 minutes)
10:30am –	Navigating Aged Care Excellence: Insights from USA & Canada - A Fellowship Review
11:15am 45 min	Jacqueline Quirke, Engagement & Purposeful Living Manager, Southern Cross Care (NSW & ACT), Australia Fellow International Specialised Skills Institute
	This paper will explore the learnings from the international component of Jacqueline's International Specialised Skills Institute (ISS) Fellowship journey. Jacqueline explored ten aged care communities across the USA and Canada, visited the Research Institute of Aging, and actively participated in two related conferences. Some findings that she will share cover diverse areas, including staffing models, leisure and recreational programming, environmental design and innovative client care approaches. The presentation will feature photos from her research trip and highlight key takeaways from the conferences. Attendees will also have the opportunity to engage in a $Q \Delta A$ session.
11:15am –	Evaluating a Social Connection Assessment α Enablement Toolkit.
11:30am	Professor Jane Farmer, Director Social Innovation Research Institute Swinburne Research Institutes
15 min	We present results from evaluating a social connection toolkit (e-learning module, guide, and conversation questions) for residential aged care (RAC) staff and residents. The toolkit informs staff about social connection and its effects on resident health and wellbeing. The tool supports comfortable conversations about residents' social connections with aged care staff. Access to social connection for residents is variable across RAC yet evidence shows that older people in RAC are at risk of depression, cognitive decline and physical ill-health linked to social isolation and loneliness. There is thus, a potential need for social connection activation resources.
11:30am - 11:35am	Stretch break (5 minutes)
11:35am -	A Practical Guide to Implementing Intergenerational Programs
12.20pm	Wendy Lawrence, National Lifestyle and Wellbeing Advisor Bupa Villages and Aged Care - Australia
45 min	Anneke Fitzgerald, PhD Emeritus Professor, Griffith University Founder of the AllP (Australian Institute of Intergenerational Practice)
	This presentation delves into the transformative power of intergenerational initiatives in fostering meaningful connections between older adults and younger generations. We will explore practical strategies for designing and delivering programs that bridge generational gaps, emphasising the benefits these connections bring to individuals and society. Highlighting the alignment with current standards, this guide showcases how intergenerational programs can enhance social cohesion, reduce isolation, and promote mutual understanding. Attendees will gain insights into best practices, potential challenges, and the profound impact of intergenerational practice on society.

Day 1 Thursday 26th September

12:20pm – 12.35pm	The Effectiveness of visual aids on improving social interaction, mood δ quality of life of age care residents and their carers: a systematic review.
15 min	Samantha Gordon, Bachelor of Psychology (Honours) Student School of Behavioural and Health Science, Australian Catholic University
	Dr Kirsten Challinor (PhD), Senior Lecturer, Psychology, School of Behavioural and Health Sciences, Australian Catholic University
	Living in residential aged care can be challenging for both residents and caregivers. Visual aids such as photographs, videos and virtual reality are commonly used in everyday activities in residential aged care. The first objective of this systematic literature review was to synthesise literature to understand if visual aids can improve residents' social satisfaction, mood, wellbeing and quality of life. The second objective was to see if visual aids improve caregiver's social connectedness and relationship with residents.
12.35pm – 1:15pm	Lunch (40 minutes)
1:15pm –	Assistive Technology in Recreational Therapy: Enabling Choice, Connection and Control
2.OOpm	Jody Asquith, Final year student WSU Bachelor of Health Science (Recreational Therapy Major).
45 min	Assistive technology can provide people with a disability with the opportunity to participate in leisure activities that would be otherwise inaccessible. While there is attention on, and investment in, adapted sports activities from local groups through to international paralympic events, this paper will focus on other leisure activities where adaptations are not readily available. The creation of individualised assistive technology solutions that enable the individual to participate in an activity of their choice aligns with the person-centred practice of Recreational Therapy.
2:00pm –	Applying the 'Community Formula' - Draft Standard 7.1.1.(d) (f)
2:15pm 15 min	Jane Taylor, Bachelor of Health Science, Leisure & Health, Functions and Volunteer Manager, Racecourse and Peninsula Grange Aged Care
	The creation of a community within the facility starts with an individual, we facilitate an activity, we engage the resident, include families, volunteers, other staff, we connect to other communities.
	It's a formula that can be applied to any activity and compliments our model of care, Better Together.
2:15pm – 2:20pm	Stretch break (5 minutes)
2:20pm –	Explaining the new Strengthened Standard 7, The Residential Community and how it applies to Lifestyle
3:05pm	Lesley Jones, B.Health Sc. Dip.App.Sc. RN, RM, Trainer and Assessor in Certificate 4 Leisure and Health.
45 min	My presentation will look at each part of the strengthened standard 7 as it applies to Lifestyle for those working in Residential Aged Care.
	How care staff can gain skills to be able to transition into Lifestyle using a skill set based on the nationally required units of competency over a 2 day program. This is an alternative for culturally specific staff who are unable to complete the nationally recognised qualification but need the skills and knowledge for their role. It also includes a short overview of the new reforms.
3:05pm – 3:20pm	Afternoon tea break (15 minutes)
3:20pm –	Establishing a New Diversional Therapy Service
3.35pm	Omar Al-Dabbas, Diversional Therapist, Allied Health Bankstown-Lidcombe Hospital
15 min	This leisure bite presentation will be centred on the establishment of a new Diversional Therapy service within Bankstown-Lidcombe Hospital. The role/position is only financed for one ward within the hospital which is the Older Person's Behavioural unit in ward 2D.
3:35pm – 3:55pm	Connecting to our profession and our purpose Carmen Hawthorne and Kayla Garside, ARTA Board members
20 min	Developing our theme for 2025 and what has been developed with LGBQIT+ Health
3:55pm – 4:00pm	Stretch break (5 minutes)
4:00pm –	ARTA Board
4:30pm	Questions to the Board
30 min	Current local and global RT information from the board
4:30pm	Close

This program and times given will be subject to changes due to circumstances beyond ARTA control. Correct at time of printing.

Day 2 Friday 27th September

8:30am	Welcoming Address: Charlise Bennett, ARTA Executive Officer				
9:00am -	Keynote Speaker: Daniel Gray				
10:00am	Exploring Excellence: Insights From Around The Globe In Recreational Therapy				
1 hour	This presentation delves into Daniel's transformative international study tour across Europe, Canada, the US, and Australia, focusing on best practices in recreation and mental health. Through visiting key organisations, the journey uncovered a wealth of insights, discoveries, and innovative practices that have the potential to enhance recreational therapy interventions and service development.				
	Recreation Manager, Therapist, and International Speaker, Daniel has over 20 years of experience in the Recreation and Leadership industries, serving as a Recreation Therapist, Manager, Coach, Trainer, and Business Owner. He is dedicated to helping people transform their lives through meaningful connections and experiences. In his current role at Wintringham, Daniel oversees the recreation program, delivering high-quality services to improve the lives of elderly clients who are homeless or at risk.				
	Daniel is a passionate educator who believes in the power of effective communication, coaching, and leadership skills. His extensive experience includes working with outreach and homelessness programs. He has established multiple companies and programs to empower individuals globally.				
	His recent study tour across the UK, Europe, Canada, USA, and Australia enriched his understanding of the industry, bringing valuable insights to his work. With a global perspective, Daniel shares strategies for enhancing mental health outcomes through recreation and creating engaging programs for isolated clients.				
10:00am -	Dignity of Risk and Enabling Choices - in everyone's best interest!				
10:45am	Stephania Bejma, Social Facilitator, Corporate Trainer, Dementia Consultant, CST Trainer.				
45 min	"I wish I hadda"				
	Highlighted in the Aged Care Standards and the NDIS, Dignity of Risk is a big part of person-centred care! As advocates for an individual's well-being, we seek to meet the choices of the people we support - supporting their right to choose, providing options, and enabling their preferences, even if their choices might go against our sense of, or the community sense of, better judgement				
10:45am - 11:00am	Morning Tea (15 minutes)				
11:00am – 11:45am	Tell Me About It – The development of conversation cards to support facilitation of conversations about consent, sex and respectful relationships				
45 min	Nita Joy, Community Education and Advocacy Manager, Laurel House Sexual Assault Support Service				
	Elisha Deagan, Project Officer, Laurel House Sexual Assault Support Service				
	This presentation will outline the work of Laurel House to ensure that people with disability have choice about sexual wellbeing, and are able to engage in discussions around consent, sex, and respectful relationships, and to be empowered to report sexual abuse or sexual harassment.				
11:45am –	Lockdowns to Data: How we increased our service for weekend Recreational Therapy				
12:15pm	Breanne Bradley, Senior Recreational Therapist, Brain Injury Unit, Royal Rehab Ryde				
30 min	Covid19 created unexpected challenges for brain injury rehabilitation inpatients and their families. Clients were struggling with social isolation, increased boredom and low mood, particularly on the weekends when therapy was limited and loved ones were unable to visit. This project sought to evaluate the effects of implementing a 14-week inpatient recreational program on weekends with the objective of improving client experience during this time.				
12:15pm –	Emergent Curiosity: Addressing Social Isolation Among Vulnerable Elderly Individuals				
1.00pm	Jan Dean, B.Psy.Sc. Senior Recreation Coordinator-Wintringham				
45 min	Cathryn Kircher, Recreation Coordinator-Wintringham				
	This presentation explores the challenges faced by elderly individuals experiencing or at risk of homelessness and effective strategies for social engagement based on individualised programs. Housing insecurity increases the risk of negative personal outcomes, particularly for the elderly and can lead to a significant decline in adequate social connection. Social isolation has been identified as a significant global health issue which impacts on the quality of life formany older individuals.				
1.00pm –					

Day 2 Friday 27th September

1:30pm – 2.15pm	Exploring the Intersection of Leisure and Faith: Reconsidering the Role of Leisure in Holistic Human Development and Connectivity through an Interfaith Perspective					
45 min	Belinda Clarke, Volunteer Co-ordinator - Sydney City Salvos					
	The intersection of leisure and faith remains a relatively underexplored area of study. Concepts like the Protestant work ethic have, in more recent history, minimised the significance of leisure in fostering holistic human development and connectivity. Taking a sensitive, interfaith perspective the paper will examine spirituality and the insights offered by ancient texts regarding the role of leisure. Additionally, it will explore the ideas and practices of Jerome Berryman, a researcher known for his Montessori-inspired approach to godly play.					
2:15pm –	Tech and Rec					
2:30pm	Taleah Critchley, Recreational Therapist, Royal Rehab Lifeworks					
15 min	This paper will explore the use of advanced technology from both the perspective of the recreational therapist and the client through a single case study. Firstly, from the recreational therapist perspective on the use of using advanced technology equipment to support a clients' goal of returning to guitar playing. Secondly, the client and family perspective on the use of advanced technology towards supporting connections with family and the wider community.					
2:30pm – 2:35pm	Stretch break (5 minutes)					
2:35pm –	Mapping Rural Pride: LGBTIQA+ Choice, Connection & Community					
3:20pm	Daniel Witthaus (he/him/his), Founder & CEO Rural Pride Australia (formerly NICHE)					
45 min	Are you interested in finding out about an LGBTIQA+ map of regional, rural and remote Australia? Do you want to hear how LGBTIQA+ across rural Australia are overcoming local challenges? Would you like to help us change the way Australia thinks about rural LGBTIQA+ life?					
	Rural Pride Australia is mapping regional, rural and remote LGBTIQA+ Australia. We're travelling across the country to create a Rural Mural - an LGBTIQA+ snapshot of what life is like outside the big smoke.					
3:20pm – 3:35pm	Afternoon tea break (15 minutes)					
3:35pm –	Community - Connecting Generations through Community					
3.50pm	Natalie Pereira, Intergenerational Specialist at Playgroup NSW					
15 min	Intergenerational programs have emerged as a promising initiative to bridge the gap between different generations. Fostering meaningful connection and understanding through play, children and older adults offer a unique connection that benefits both age groups.					
	Understanding Leisure in Residential Aged Care					
7.50	Dr Sharon Stoddart, Certificate IV in Leisure and Health Trainer-Training Beyond 2000, Marker for B Dem Care-University of Tasmania					
3:50pm – 4:10pm 20 min	Leisure provision in Australian residential aged care is mandated through the Aged Care Quality Standards, however, little is known about the nature of leisure or how it is undertaken. Research involving leisure workers has tended to focus on novel interventions trialled by researchers who are specialists in their therapeutic field and evaluated against what is usual practice, with little attention to elucidating this practice. Moreover, the occupational role of 'leisure worker' has struggled for recognition in Australia and has low visibility in literature that relates to aged care workers. This study aimed to explore how leisure and its enactment is understood in residential aged care in Australia.					
4:10pm – 4:25pm	Pastel Nagomi Art (PNA) – a Japanese finger-painting art form with properties in healing, calming and managing stress					
15 min	Nancy Ong, Occupational Therapist, BAppSc, Certified Associate Instructor, Pastel Nagomi Art, Cairns Community Care Unit, MHATODs, Queensland Health					
	Pastel Nagomi Art was developed by Hosoya Norikatsu in 2002 who went on to establish the Japan Pastel Hope Art Association (JPHAA) in 2003. The mission of JPHAA is to promote peace, joy and social cohesiveness to individuals and communities through art.					
	This art form became very popular through social media and zoom during Covid when people were looking for projects to occupy themselves during lockdowns. Nagomi is a Japanese word for "healing". It uses soft pastel and fingers to paint. This art form is so easy, flexible and forgiving, one does not need to have any art experience to pick it up. Participants can create beautiful pieces within 20 minutes making it a convenient and enjoyable activity.					
4:25pm – 4:30pm	AWARDS AND CLOSING					
5 min						
4:30pm	Formal closing of 2024 Conference					

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9.00am Thursday 26th September Keynote Address



Michael Verde

Michael Verde is an award-winning writer, speaker, documentary producer and teacher. He founded Memory Bridge in 2003 - an internationally recognised NGO dedicated to ending the emotional isolation of people with dementia. Memory Bridge's programs are hosted on three continents and provide ongoing education to caregivers in 14 countries. To date, Memory Bridge has connected over 9,000 people with and without dementia in one-to-one relationships.

Michael has a M.A. in literary studies from the University of Iowa; and a M.A. in theology from the University of Durham, England, where he graduated at the top

of his international class. He is currently completing his PhD dissertation at Indiana University in the area of empathetic communication and literature and religion.

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10.00am Thursday 26th September

All Aboard !!!

Subtheme: Connection

Diana Rizos

Certificate IV in Leisure and Health, Certificate IV in Fitness, Accredited NDIS Service Provider – Improved, Health & Wellbeing, Registered AUSactive Professional – Level 3, Civil Marriage Celebrant, Justice of the Peace

Quality Compliance & Risk Manager – Lifestyle / HSE / Hospitality Greek Orthodox Community Home for the Aged – Earlwood, NSW

Abstract: Apologies for not being with you in person this year however, this doesn't mean that we can't stay connected. I offer my recorded presentation as I very excitedly embark on my first extended overseas holiday to connect with new friends in diverse nations and enjoy a visual and multi-sensory travel experience with vibrant landscapes, different cultures, delightful cuisines, age-old traditions, historic landmarks, music, art and sculptures in places I've never been. As opposed to the seasoned traveller, I'm quite the novice and there's a little trepidation about the unknown. However, I'm with family and close friends to guide me along this new adventure for the next five weeks.

Connection helps us live meaningful and purposeful lives. We find happiness and wellness in connecting with people, pets and places. Our everyday connections offer empathy, compassion and goodwill where we also hope to find trust, faith, belief and understanding. Our human and social connections give us a sense of belonging, support and closeness, habitual routines, planned experiences and spontaneous opportunities.

Most of us have connections in other parts of the world. Some many, others few but we have those connections because our diverse backgrounds originated from other parts of the world. Our backgrounds shape our existence and character, our moral compass and our view of the world. Without that connection we lose our perception of beginning and purpose for the future.

Connection stabilises our presence in an emotional, social, psychological, physical and spiritual wakefulness.

Sailing across the seas I'm anticipating connecting with like-minded people as well as crossing paths with some unexpected characters. Connections will be made across the oceans in all seasons and this is where I'll be visiting. My flight to London left Sydney four days ago.

First stop is London.

Notes:

Then at Southampton Port it's All Aboard for Norway and the Northern Lights –							
Trondheim	Tromso	Alta	Lofoten Island	ds (Gravdal)	Alesund		
Back to South	Back to Southampton.						
Spain – La C	Coruna Se	ville (Cad	iz) Malaga	Cartagena	Mallorca (Palma)		
Malta - Valle	etta						
Italy – Sicily (Messina) Salerno Rome (Civitavecchia)							
See you wher	n I get back	to Sydne	y.				

10.30am Thursday 26th September

Navigating Aged Care Excellence: Insights from USA & Canada – A Fellowship Review

Subtheme: Aged Care

Jacqueline Quirke

Notes:

Engagement and Purposeful Living Manager, Southern Cross Care (NSW & ACT)
MCommHlth; GradDipHlthSc; DipDT; AssDipAppSc(DT); CertIVHlth&Rec; CertIV Training & Assessment
Fellow of the International Specialised Skills Institute

Abstract: This paper will explore the learnings from the international component of Jacqueline's International Specialised Skills Institute (ISS) Fellowship journey. Jacqueline explored ten aged care communities across the USA and Canada, visited the Research Institute of Aging, and actively participated in two related conferences. Some findings that she will share cover diverse areas, including staffing models, leisure and recreational programming, environmental design and innovative client care approaches. The presentation will feature photos from her research trip and highlight key takeaways from the conferences. Attendees will also have the opportunity to engage in a Q&A session.

11.15am Thursday 26th September

Evaluating a Social Connection Assessment δ Enablement Toolkit

Subtheme: Education, Leadership

Jasmine Knox MSc1, Jane Farmer MA PhD2, Edwina Gow3, Vanessa Ogborne4, Lucio Naccarella5

- 1. Main contact Researcher & PhD candidate, Swinburne University of Technology jmknox@swin.edu.au
- 2. Professor of Health & Social Innovation, Swinburne University of Technology
- 3. Uniting ACT.NSW
- 4. Southern Cross Care
- 5. Associate Professor, University of Melbourne

Abstract:

Aims & Background: We present results from evaluating a social connection toolkit (e-learning module, guide, and conversation questions) for residential aged care (RAC) staff and residents. The toolkit informs staff about social connection and its effects on resident health and wellbeing. The tool supports comfortable conversations about residents' social connections with aged care staff. Access to social connection for residents is variable across RAC yet evidence shows that older people in RAC are at risk of depression, cognitive decline and physical ill-health linked to social isolation and loneliness. There is thus, a potential need for social connection activation resources.

Methods: We evaluated toolkit implementation at 4 RAC settings in 2024, using surveys and interviews with residents, frontline care staff, lifestyle coordinators and facility managers.

Results: Residents were enthusiastic to talk about their needs for social connection. Staff opinions about using the toolkit varied. Some found that undergoing training and having a tool that facilitated conversations, supported their connection with residents. There was confusion at some sites, with staff missing the training aspect and some thought the tool duplicated existing tools. While there was enthusiasm from senior management, issues raised by facility managers and lifestyle coordinators include lack of time, clash with biomedical/personal care priorities, and issues about translation for culturally and linguistically diverse staff and residents.

Conclusions & Implications: Variation between sites finding the toolkit successful/unsuccessful include individual managers' and staffs' enthusiasm, engagement with the topic as significant to wellbeing, time available and workplace culture. Some settings thought they were already taking care of this issue, for residents. Despite this, the study showed some promise for the toolkit and raised issues for future research and development.

Notes:		

11.35am Thursday 26th September

A Practical Guide to Implementing Intergenerational Programs

Anneke Fitzgerald

PhD | Emeritus Professor, Griffith University

Wendy Lawrence

National Lifestyle and Wellbeing Advisor, Bupa Villages and Aged Care - Australia

Abstract: This presentation, titled "A Practical Guide to Implementing Intergenerational Programs" delves into the transformative power of intergenerational initiatives in fostering meaningful connections between older Adults and younger generations. We will explore practical strategies for designing and delivering programs that bridge generational gaps, emphasising the benefits these connections bring to individuals and society. Highlighting the alignment with current standards, this guide showcases how intergenerational programs can enhance social cohesion, reduce isolation, and promote mutual understanding. Attendees will gain insights into best practices, potential challenges, and the profound impact intergenerational practice on society.

Notes:		

12.20pm Thursday 26th September

The effectiveness of visual aids on improving social interaction, mood, and quality of life of age care residents and their carers: a systematic review

Samantha Gordon

Bachelor of Psychology (Honours) Student, School of Behavioural and Health Science, Australian Catholic University

Megan Willis

Associate Professor, Honours Course Coordinator, Discipline of Psychology, School of Behavioural and Health Sciences, Australian Catholic University

Kirsten L. Challinor

Senior Lecturer, Psychology, School of Behavioural and Health Sciences, Australian Catholic University

Abstract:

Background: Living in residential aged care can be challenging for both residents and caregivers. Visual aids such as photographs, videos and virtual reality are commonly used in everyday activities in residential aged care.

Objective: The first objective of this systematic literature review was to synthesise literature to understand if visual aids can improve residents' social satisfaction, mood, wellbeing, and, quality of life. The second objective was to see if visual aids improve caregiver's social connectedness and relationship with residents.

Method: PsycINFO, CINHAL, Medline, SCOPUS, and ProQuest Dissertation & Thesis were searched on 10th of May 2024 for three concepts: visual aids, the outcomes measures of wellbeing, quality of life, mood, social connectedness, and relationships with residents, and the concept for residential aged care. Studies were included if they: 1. incorporated visual aids (passive, digital or physical types) 2. Live in residential age care or are formal caregivers, 3. Outcome measures exploring, social satisfaction, mood, wellbeing, quality of life for residents and social connectedness and relationship with residents for caregivers. Risk of bias was assessed using the Johanna Briggs Institutes of Systems critical appraisal checklist.

Results: Thirty-six quantitative studies were included, overall, 82% found a significant effect in improving either resident social satisfaction, wellbeing, mood, and quality of life. One paper found a significant increase in caregivers' social connectedness and five indicated a significant improvement in caregivers' relationship with residents.

Discussion: The auglity of studies was moderate to high with only two papers included with low quality

The findings suggest that showing still or moving images to aged care residents is beneficial to their overall psychological health, particularly their mood. Formal caregivers also appear to benefit from this cost-effective activity.
Notes:

1.15pm Thursday 26th September

Assistive Technology in Recreational Therapy: Enabling Choice, Connection and Control

Jody Asquith

Final year student WSU Bachelor of Health Science (Recreational Therapy Major). Student Member, ARTA. Director, Better Day Solutions

Abstract: Assistive technology can provide people who have disability with the opportunity to participate in leisure activities that would be otherwise inaccessible. While there is attention on, and investment in, adapted sports activities from local groups through to international paralympic events, this paper will focus on other leisure activities where adaptations are not readily available. The creation of individualised assistive technology solutions that enable the individual to participate in an activity of their choice aligns with the person-centred practice of Recreational Therapy.

Issues related to assistive technology that will be addressed include: the ability to fund assistive equipment for recreation under the National Disability Insurance Scheme (NDIS); the need for bespoke devices versus those available "off-the-shelf"; finding a balance between making an activity possible while still providing a satisfying challenge; and consulting with the participant to ensure the item delivered is what they need and want. The concepts covered will then be illustrated by a case study of designing and delivering a remote-activated dog-treat dispenser that enabled a young woman with cerebral palsy to train her own dog.

Notes:		

2:OOpm Thursday 26th September

Community - Applying The 'Community Formula' - Draft Standard 7 1.1.(d) (f)

Jane Taylor

Bachelor of Health Science, Leisure & Health Functions and Volunteer Manager Racecourse and Peninsula Grange Aged Care

Abstract: The creation of a community within the facility starts with an individual, we facilitate an activity, we engage the resident, include families, volunteers, other staff, we connect to other communities.

It's a formula that can be applied to any activity and compliments our model of care, Better Together.



We used this formula for our Christmas market. It was a tool to encourage residents, who needed a purpose to attend art and craft. What they made; we would sell.

- Our resident's set to work over the next few months making chocolates, Christmas decorations, cards, and bookmarks.
- Our knitting group got on board with covered coat hangers.
- We sort expressions of interest from staff who got to work crocheting, making jam, bags, jewelry, pottery, gingerbread houses, and knitting cardigans.
- We advertised in the newsletter to families and friends, who booked stalls and made biscuits, sold paintings and soaps.
- We emailed the attached village whose resident's set up a stall and sold greeting cards.

The day of the market brought the community together, to set the stalls up and sell the products. The stall holders donated 10% of their profits, and our residents donated 100% of their profits. The proceeds from the market were donated to Southern Peninsula Support Centre.

Staff and residents proudly embarked on a bus trip to the Support Centre to donate the money. They were presented with certificates of appreciation and hear how the money raised would be used to support those in need in our community. The Support Centre thanked our community in their newsletter which then, included us in their community.

We now recognize that we have many examples of how we use the formula. We don't 'run' activities anymore, we engage our residents and connect, incorporate, and grow within the greater community.

Notes:			

2.20pm Thursday 26th September

Presentation explaining the new Strengthened Standard 7 The Residential Community and how it applies to Lifestyle.

Lesley Jones

B.Health Sc. Dip.App.Sc. RN, RM, Trainer and Assessor in Certificate 4 Leisure and Health.

Abstract: When people move into a residential service, the residential community becomes a central feature of their lives. It is critical that older people feel safe and at home in the residential community, have opportunities to do things that are meaningful to them and are supported to maintain connections with people important to them.

Meaningful activities can include participating in hobbies or community groups, seeing friends and family or activities that contribute to the residential community such as gardening, cooking and setting tables.

A residential community can involve diverse members from different cultures and backgrounds. It is important that each older person's culture is respected, and their diversity valued so they feel included, safe and at home in the service.

Given the scope of responsibility in residential care, providers also have increased requirements to ensure that older people have access to other services and to coordinate a planned transition to or from the service to maximise continuity of care for older people.

Standard 7 is intended to apply only to residential care services.

The provider supports and enables older people to do the things they want to do, including to:

- a) participate in lifestyle activities that reflect the diverse nature of the residential community
- b) promote their quality of life
- c) minimise boredom and loneliness
- d) maintain connections and participate in activities that occur outside the residential community
- e) have social and personal relationships
- f) Contribute to their community through participating in meaningful activities that engage the older person in normal life.

Source https://www.agedcarequality.gov.au/for-providers/strengthening-governance

My presentation will look at each part of the strengthened standard 7 as it applies to Lifestyle for those working in Residential Aged Care.

How care staff can gain skills to be able to transition into Lifestyle using a skill set based on the nationally required units of competency over a 2 day program.

This is an alternative for culturally specific staff who are unable to complete the nationally recognised qualification but need the skills and knowledge for their role.

It also includes a short overview of the new reforms

Made

Notes:			

3.20pm Thursday 26th September

Establishing a New Diversional Therapy Service

Omar Al-Dabbas

Matan

Bachelor of Health Science in Therapeutic Recreation and Health Services Management course from Western Sydney University

Diversional Therapist at Bankstown Hospital

Abstract: This leisure bite presentation will be centred on the establishment of a new Diversional Therapy service within Bankstown-Lidcombe Hospital. The role/position is only financed for one ward within the hospital which is the Older Person's Behavioural unit in ward 2D. There is capacity for the provision of diversional therapy service to patients external to this ward, if they are:

- Scheduled for admission to ward 2D as soon as a bed becomes available.
- Or the Director of Allied Health requests that they are reviewed by the DT.

Ward 2D previously employed a diploma qualified health professional who provided recreational interventions for many years though only in a part-time capacity. This is the hospital's first full-time and degree-qualified DT service and there are many challenges involved establishing this service.

The most obvious challenges were in resource procurement, learning documentation requirements and working as a sole practitioner with no other Diversional Therapist on site. There was also a significant change in pace and workload from working at a Residential Aged Care Facility and managing a team as opposed to being the only therapist responsible for clinical duties and fulfilling the recreational needs of patients and not holding managerial duties.

notes:		

3.35pm Thursday 26th September

Connecting to our profession and our purpose

Carmen Hawthorne

Bachelor of Health Science (Therapeutic Recreation), Graduate Diploma in Dance Movement Therapy & Cert IV Training & Assessment.

Kayla Garside

Bachelors of Health Science (Therapeutic Recreation)

ARTA Board members

Abstract: Connecting to our Profession and Our Purpose is all about shaping next year's theme by highlighting how our work connects with our personal values, helping us find more meaning in what we do. Kalya will also demonstrate a new resource developed teaming up with LGBTIQA+ Health with a resource that gives recreation and lifestyle staff the tools they need to provide inclusive and supportive care for everyone.

Notes:	

9.00am Friday 27th September Keynote Address



Daniel Gray

BA Recreation Leadership, Adv Dip Management

Recreation Manager Wintringham

This presentation delves into Daniel's transformative international study tour across Europe, Canada, the US, and Australia, focusing on best practices in recreation and mental health. Through visiting key organisations, the journey uncovered a wealth of insights, discoveries, and innovative practices that have the potential to enhance recreational therapy interventions and service development.

The session will explore the highlights, key takeaways, and common threads among exceptional services and programs observed during the tour. It will also compare these global insights with the Australian aged care landscape, highlighting opportunities for enhancing the quality of life for individuals through strategic interventions and program development.

The aim of this presentation is to ignite imagination, encourage strategic thinking, and spark ideas among recreational therapy professionals, health professionals, academics, researchers, and students. By sharing experiences, lessons learned, and best practices, this session aims to contribute to the growth of clinical practice, research, education, policy, funding and workforce development in the field of recreational therapy.

Join Daniel as we navigate through the powerful components of "Choice, Connection, and Community," empowering individuals, supporting meaningful connections, and curating unique and impactful recreational therapy interventions that make a difference in people's lives.

Notes:	

Notes:	

10.00am Friday 27th September

Dignity of Risk and Enabling Choices- is in everyone's best interest!

Stephania Bejma

Social Facilitator, Corporate Trainer, Dementia Consultant, CST Trainer.

Abstract: "I wish I hadda...."

Highlighted in the Aged Care Standards and the NDIS, Dignity of Risk is a big part of person-centred care! As advocates for an individual's well-being, we seek to meet the choices of the people we support-supporting their right to choose, providing options, and enabling their preferences, even if their choices might go against our sense of, or the community sense of, better judgement...

Why must we, and how can we, provide the social and psychosocial conditions that promote the right of all to be their authentic selves? Changing the narrative from care and protection (which we are not released from) to self-actualisation at all stages of health and cognition.

This presentation will look at how as enablers of people's choices we can add value to the discourse that will make our contributions invaluable to services taking up this challenge to address the dignity of risk versus duty of care- as being in everyone's best interest.

Notes:		

11.00am Friday 27th September

Tell Me About It – The development of conversation cards to support facilitation of conversations about consent, sex and respectful relationships

Nita Joy

Master of Arts – Social Ecology, Diploma Lifestyle and Leisure, TAA Community Education and Advocacy Manager, Laurel House Sexual Assault Support Service

Elisha Deagan

Registered Nurse, PhD student Project Officer, Laurel House Sexual Assault Support Service

Abstract: People with disability are more than twice as likely to experience sexual abuse as people without disability. If the person with disability also identifies as Aboriginal and Torres Strait Islander, culturally and linguistically diverse, or LGBTIQA+ the risk of sexual abuse increases further.

This presentation will outline the work of Laurel House to ensure that people with disability have choice about sexual wellbeing, and are able to engage in discussions around consent, sex, and respectful relationships, and to be empowered to report sexual abuse or sexual harassment. Too often people with disability are considered to have no sexual needs or rights which can leave the person at risk of misinformation, exploitation and abuse. With an NDIS Information, Linkages and Capacity Building grant, Laurel House facilitated a co-design approach to developing resources. A steering committee inclusive of lived experience of disability and sexual violence, LGBTIQA+, service providers, public guardians ensured that the voice of disability was kept at the centre of the project. After extensive research to identify what resources already existed and where the gaps were, the steering committee embarked on the process of developing a suite of conversation cards. The cards provide information on consent, sex and the law, healthy relationships, sexual harassment, pornography, rights and responsibilities and aim to support conversations through which to empower individuals with choice, knowledge, and connection. Too often people with disability, those who acquire disability, and older persons, are denied their right to information on sex and sexual relationships, and/or access to the supports they may need for their sexual wellbeing. This presentation will discuss the co-design process, and demonstrate how the cards can be used by recreational and diversional therapists in a range of settings including mental health, rehabilitation, family violence, youth groups, veterans groups, aged care, and schools.

Notes:	

11.45am Friday 27th September

Lockdowns to Data: How we increased our service for weekend Recreational Therapy

Breanne Bradley

Senior Recreational Therapist, Brain Injury Unit, Royal Rehab Ryde

Abstract:

Background: Covid19 created unexpected challenges for brain injury rehabilitation inpatients and their families. Clients were struggling with social isolation, increased boredom and low mood, particularly on the weekends when therapy was limited and loved ones were unable to visit.

Aim: This project sought to evaluate the effects of implementing a 14-week inpatient recreational program on weekends with the objective of improving client experience during this time.

Methods: Descriptive pre- and post-trial questionnaires containing multiple choice and open-ended questions related to reported, observed and perceived feelings of boredom, loneliness and weekend activity levels were administered to staff, clients and their family members. Additionally, descriptive statistics of adverse clinical events, including falls and behaviours of concern, were obtained 6-weeks prior to the trial commencing and throughout the intervention period. Following completion of the trial period and the lifting of COVID 19 visitor restrictions, further data were collected over 10 weekends.

Results: This project exceeded expected outcomes. Data indicated that the implementation of recreational programs on the weekends significantly improved inpatient experience. This was evident through client self-reports of improved mood and reductions in comments related to boredom and loneliness. Staff observed increased client interaction and socialisation, and there was a noted reduction in call bell use, aggression and agitation.

Data collected over 10 weekends after completion of the trial indicate that despite visitor restrictions being lifted, clients continued to struggle with the experience of isolation, boredom and low mood on

Notes:			

12.15pm Friday 27th September

Emergent Curiosity: Addressing Social Isolation Among Vulnerable Elderly Individuals

Subtheme: Aged care/Dementia care, Palliative Care, Private Practice

Jan Dean

B.Psy.Sc. Senior Recreation Coordinator-Wintringham

Cathryn Kircher

Recreation Coordinator-Wintringham

Abstract: This presentation explores the challenges faced by elderly individuals experiencing or at risk of homelessness and effective strategies for social engagement based on individualised programs. Housing insecurity increases the risk of negative personal outcomes, particularly for the elderly and can lead to a significant decline in adequate social connection. Social isolation has been identified as a significant global health issue which impacts on the quality of life for many older individuals. Alternatively, meaningful social engagement and a sense of belonging, has shown to have lasting physical, mental and financial benefits. This includes the ability to remain independent in their chosen community for longer. The current approach is to provide support through a variety of community-based programs, supportive housing models, and social engagement initiatives designed to respect the choice of elderly individuals. 'Emergent Curiosity' refers to the spark of interest that leads to exploration and discovery. This begins in childhood and enhances problem solving, creativity and cognitive growth. A critical foundation for lifelong learning and adaptability which may have diminished over time for many socially isolated elderly people. This highlights the importance of providing ongoing opportunities for regular social interactions and fostering meaningful connection with community. Emergent curiosity can be reignited by creating a safe space to explore, share experiences, build confidence, develop social skills, and fortify bonds. The process often encourages individuals to seek ongoing interactions and engagement in their surroundings. More recently there has been a move toward integrated social, housing and allied health support. Anecdotal evidence through real life case studies will be presented highlighting the benefits of Recreational Therapies aimed at supporting vulnerable elderly individuals.

otes:	

1.30pm Friday 27th September

Exploring the Intersection of Leisure and Faith: Reconsidering the Role of Leisure in Holistic Human Development and Connectivity through an Interfaith Perspective

Belinda Clark

(BA Health Science (Leisure and Health) MA Child & Adolescent Welfare, PG Cert Theology, currently working on MA Theological Studies.)

Volunteer Co-ordinator - Sydney City Salvos

Abstract: The intersection of leisure and faith remains a relatively underexplored area of study. Concepts like the Protestant work ethic have, in more recent history, minimised the significance of leisure in fostering holistic human development and connectivity. Taking a sensitive, interfaith perspective the paper will examine spirituality and the insights offered by ancient texts regarding the role of leisure. Additionally, it will explore the ideas and practices of Jerome Berryman, a researcher known for his Montessori-inspired approach to godly play.

Notes:	

2.15pm Friday 27th September

Rec and Tech

Taleah Critchley

Notes:

(Bachelor of Health Science (Therapeutic Recreation) Western Sydney University (Campbeltown). Recreational Therapist, Royal Rehab Lifeworks

Abstract: Current evidence supports the use of advanced technology with traditional therapy, and at Royal Rehab this has been incorporated into everyday practice by several disciplines. Recreational therapists can be challenged by how to incorporate client's choices into goal directed therapy using advanced technology.

This paper will explore the use of advanced technology from both the perspective of the recreational therapist and the client through a single case study. Firstly, from the recreational therapist perspective on the use of using advanced technology equipment to support a clients' goal of returning to guitar playing. Secondly, the client and family perspective on the use of advanced technology towards supporting connections with family and the wider community.

This case study will also discuss the use of advanced technology to support the client's goal of returning to guitar playing including: clinical reasoning behind choosing the most appropriate advanced technology, assessments completed, the range of advanced technology used and outcomes achieved.

110103.		

2.35pm Friday 27th September

Mapping Rural Pride: LGBTIQA+ Choice, Connection & Community

Daniel Witthaus (he/him/his)

Founder & CEO

Rural Pride Australia (formerly NICHE)

Abstract: Are you interested in finding out about an LGBTIQA+ map of regional, rural and remote Australia?

Do you want to hear how LGBTIQA+ across rural Australia are overcoming local challenges?

Would you like to help us change the way Australia thinks about rural LGBTIQA+ life?

Rural Pride Australia is mapping regional, rural and remote LGBTIQA+ Australia. We're travelling across the country to create a Rural Mural - an LGBTIQA+ snapshot of what life is like outside the big smoke.

At the end of this demonstration project, we will complete a national digital map of regional, rural and remote LGBTIQA+ communities, that:

- (a) reflects their LGBTIQA+ best, including signs of LGBTIQA+ hope, local stories and history;
- (b) shows local services, resources and community-led initiatives and events;
- (c) maps LGBTIQA+-friendly, inclusive and safe toilets, spaces and settings; and,
- (d) creates a pathway for the reporting of LGBTIQA+ hate (i.e. abuse, harassment, violence and discrimination).

Along the way we're visiting every state and territory to find out about local LGBTIQA+ life. Exploring the conference themes of 'Choice, Connection and Community', we'll share the experiences of other regional, rural and remote communities, and what they're telling us about what works, what's challenging and their signs of local LGBTIQA+ hope.

Notes:	

3.35pm Friday 27th September

Connecting Generations through Community

Natalie Pereira

Matan

Bachelor of Applied science in Adult development & Aging, Diploma in Recreation Therapy from Canada Intergenerational Specialist at Playgroup NSW

Abstract: Introduction to a Program-Intergenerational Programming

Intergenerational programs have emerged as a promising initiative to bridge the gap between different generations. Fostering meaningful connection and understanding through play, children and older adults offer a unique connection that benefits both age groups.

For children, intergenerational programs provide a rich and diverse learning experience. Children gain access to a wealth of knowledge of different experiences, emotional intelligence and cultural awareness. The presence of older adults has also promoted respect and patience between the generations.

Older adults on the other hand, experience numerous psychological and psychical benefits to intergenerational programming. It has shown to combat feelings of loneliness and isolation. Engaging in play and conversation keep older adults mentally active. The joy and energy of children often have a rejuvenating effect improving their overall mood.

In keeping with the theme of community, Intergenerational programs also strengthen community bonds creating a sense of belonging and mutual support on the community. Intergenerational programs can play a crucial role in breaking down stereotypes and promote a more inclusive society.

Further research and support for these programs could amplify their positive outcomes and so Playgroup NSW have commenced working with RACF's across NSW to help care homes start their own Intergenerational Playgroups. We work with lifestyle teams of RACF's and provide resources (physical and behind the scenes) to help start up these wonderful groups.

lotes.	

3:50pm Friday 27th September

Understanding Leisure in Residential Aged Care

Sharon Stoddart¹ (PhD)

Certificate IV in Leisure and Health Trainer-Training Beyond 2000 Marker for B Dem Care-University of Tasmania

Fran Mcinerney¹ Sharon Andrews² Emma Lea¹

1 Wicking Dementia Research and Education Centre, University of Tasmania

2 College of Health and Medicine, University of Tasmania

Abstract: Leisure provision in Australian residential aged care is mandated through the Aged Care Quality Standards, however, little is known about the nature of leisure or how it is undertaken. Research involving leisure workers has tended to focus on novel interventions trialled by researchers who are specialists in their therapeutic field and evaluated against what is usual practice, with little attention to elucidating this practice. Moreover, the occupational role of 'leisure worker' has struggled for recognition in Australia and has low visibility in literature that relates to aged care workers.

Objective: This study aimed to explore how leisure and its enactment is understood in residential aged care in Australia.

Method: This study used grounded theory methodology. Data were derived from semi-structured interviews with 18 leisure workers, who may be best placed to provide insights on how leisure is constructed in residential aged care. Data were subjected to coding and constant comparative analysis.

Results: Findings are presented in the form of concepts generated from the data, and substantive theory developed from these, that portray leisure as complex in nature, and its enactment as skilled work. The concepts portray leisure as having multiple foci, purposes and processes. The Leisure Theory of Connectivity with its three key categories: familiarity, empathy and holism, and core category connection, encapsulate understandings of leisure elucidated within this study.

Conclusion: The findings of this research relate to literature from the fields of health and social care. This is important work because it contributes towards making leisure in residential aged care visible, and has the potential to further the development of this field. This research may be used to shape the curricula of courses that train leisure workers and as a foundation for further research. Furthermore, it contributes towards raising the profile of a practice that influences how life is experienced by those living in residential aged care.

Notes:		

4.10pm Friday 27th September

Pastel Nagomi Art (PNA)— a Japanese finger-painting art form with properties in healing, calming and managing stress

Nancy Ong

Occupational Therapist, BAppSc, Certified Associate Instructor, Pastel Nagomi Art Senior Occupational Therapist, Cairns Community Care Unit, MHATODs, Queensland Health Self-employed, private practice OT

Abstract: Pastel Nagomi Art was developed by Hosoya Norikatsu in 2002 who went on to established the Japan Pastel Hope Art Association (JPHAA) in 2003. The mission of JPHAA is to promote peace, joy and social cohesiveness to individuals and communities through art.

This art form became very popular through social media and zoom during Covid when people were looking for projects to occupy themselves during lockdowns. Nagomi is a Japanese word for "healing". It uses soft pastel and fingers to paint. This artform is so easy, flexible and forgiving, one does not need to have any art experience to pick it up. Participants can create beautiful pieces within 20 minutes making it a convenient and enjoyable activity.

The therapeutic values of Nagomi Pastel Art promote grounding, mindfulness, relaxation and stress reduction. It uses sensory modulation principles to promote self-regulation. It also facilitates positive intra and interpersonal growth – creating a deeper connection with one self, improving confidence and building social connections.

Nagomi Pastel Art is still relatively unknow in Australia with only a handful of certified instructors qualified to teach. This paper hopes to share the beauty of this art form to a wider audience and to encourage participants to explore this art form to self-sooth and promote personal well-being.

Notes:		

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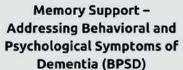
Books by Julie: Beyond the Reluctant Move Beyond Unwelcome Change in Late Life (publication late 2024)





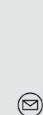
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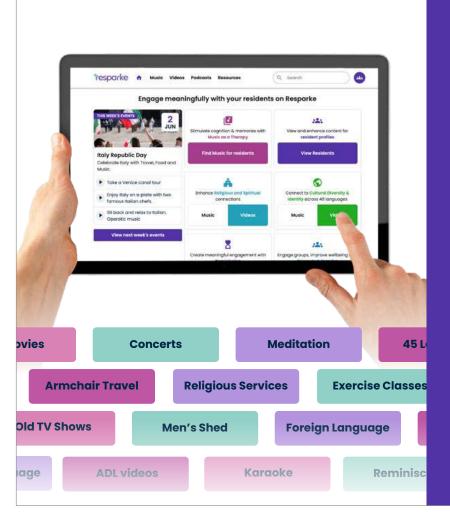
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