Bingo Wars

And Other True Stories from the Front Lines of Caring in Healthcare

By Jeremy Miller

Introduction

For more than twenty-five years, I have had the privilege of working in healthcare, primarily as an Activity Director. During that time, I have worked in nursing homes, personal care communities, memory care units, and retirement communities. I have spent my career helping people stay connected, engaged, active, and involved in life.

When most people think about healthcare, they often think about doctors, nurses, medications, and treatments. What they may not think about are the people whose job it is to help residents find purpose, laughter, friendship, and joy. That has been my world for more than two decades.

Over the years, I have collected countless stories. Some are funny. Some are heartbreaking. Some are inspiring. Some are completely unbelievable. All of them are true.

These stories are written through the eyes of my experience. While details have been changed and privacy protected, the heart of every story remains authentic. The people in these pages taught me lessons about patience, resilience, humor, kindness, love, and what it means to truly care for another person.

I have been fortunate enough to meet incredible residents, devoted family members, hardworking coworkers, and unforgettable personalities. Many of them made me laugh. Some challenged me. Others changed the way I view life.

These stories are about people.

They are about the resident who taught me patience when I thought I already had plenty of it.

They are about the family member who showed incredible devotion to someone they loved.

They are about coworkers who quietly stepped in when help was needed.

They are about moments that were funny, awkward, inspiring, heartbreaking, and unforgettable.

Most of all, they are about the people who made an impression on me and helped shape the person I became.

When I first started in healthcare, I thought my job was planning activities. Looking back now, I realize my job was really about building relationships. The activities simply gave us a reason to gather together.

My hope is that these stories make you laugh, help you understand the world of healthcare a little better, and remind you that caring for people is one of the most important things we can do.

Welcome to The Bingo Wars.

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A Note About These Stories

The stories in this book are true and are based on real experiences, people, and events from my more than twenty-five years working in healthcare activities. To protect the privacy of residents, families, coworkers, and organizations, identifying details have been changed or omitted.

These stories come from strong memories and meaningful experiences that stayed with me throughout my career. While some details have been expanded and elaborated to help tell the story, the heart of each story remains true to the people, moments, and lessons I remember. My goal is not to provide a historical record of every event exactly as it happened, but rather to share the experiences, emotions, humor, challenges, and humanity that made these moments unforgettable.

The residents, families, coworkers, and communities I have encountered over the years taught me countless lessons about caring, resilience, patience, kindness, and joy. This book is my way of honoring those memories and sharing a glimpse into the world of healthcare activities through the stories that have stayed with me the longest.

Chapter 1

Activity Director Life

When people find out I have spent most of my career as an Activity Director, they usually respond the same way. "Oh, that sounds like fun." I always smile when I hear that because they are right and they are completely wrong at the same time. It is fun. It is also exhausting, unpredictable, challenging, rewarding, frustrating, and occasionally downright ridiculous.

Most people have no idea what an Activity Director actually does. They imagine someone playing games, making crafts, singing songs, and organizing parties. Those things are certainly part of the job, but they only tell a small piece of the story. Imagine being an event planner, social worker, entertainer, counselor, travel guide, referee, decorator, problem solver, cheerleader, therapist, maintenance worker, and professional improviser all at the same time. Now imagine doing all of those jobs while trying to keep a calendar full of activities running smoothly. That is much closer to reality.

A typical day as an Activity Director rarely goes according to plan. You might start the morning preparing for an exercise class only to discover that transportation needs help getting residents to an appointment. While helping with that situation, a family member wants to discuss their loved one's participation. Before that conversation ends, a volunteer arrives with questions about an upcoming event. Then someone reminds you that the monthly newsletter needs to be finished. Somewhere in the middle of all of this, you are still expected to run the exercise class. And that is before lunch.

One of the first things I learned about activities is that people matter more than programs. Early in my career, I spent a lot of time worrying about schedules, calendars, and attendance numbers. I wanted every activity to be successful. I wanted every room to be full. I wanted everything to run perfectly. Then healthcare taught me a valuable lesson. The most important moments usually happen between the activities.

Some of my best memories have nothing to do with the programs I carefully planned. They happened during conversations in hallways. They happened while helping someone walk back to their room. They happened while sitting beside a resident who simply needed someone to listen. Those moments never appeared on a calendar, yet they often mattered more than anything I had scheduled.

One thing people do not realize is how much responsibility Activity Directors carry. We are often responsible for creating the atmosphere of an entire community. When families visit, they notice the activities. When residents are engaged, people notice. When residents are bored, people notice that too. The pressure can be intense. I remember walking through buildings where people would stop me every few feet. Someone wanted another trip. Someone wanted more music. Someone wanted less music. Someone wanted bingo. Someone else wanted anything except bingo. Everybody had an opinion.

I quickly learned that if ten residents agreed on something, eleven residents would disagree. The funny thing is that I genuinely loved it. I loved the challenge of figuring out what made people smile. I loved watching someone participate in an activity they initially refused to attend. I loved seeing friendships develop. I loved helping people discover that life could still be meaningful regardless of their age or circumstances.

Of course, there were difficult days too. There were days when attendance was low. There were days when activities failed. There were days when the equipment broke. There were days when nothing seemed to go right. Healthcare has a way of keeping you humble. Just when you think you have everything figured out, something unexpected happens. A bus breaks down. A performer cancels. A room reservation gets changed. A resident decides they no longer want to participate in the event they requested two weeks earlier. Flexibility becomes a survival skill.

One of the greatest misconceptions about activities is that we simply entertain people. That word has always bothered me a little. Entertainment suggests people are passive observers. Activities are about engagement. They are about creating opportunities for people to participate, connect, learn, share, laugh, and continue living meaningful lives.

I have watched residents who rarely spoke begin singing every word to songs from their youth. I have seen people who insisted they were not artistic create beautiful works of art. I have watched strangers become friends over a simple card game. I have witnessed people rediscover pieces of themselves they thought were gone forever. Those moments are why Activity Directors keep showing up.

Over the years, I learned that successful activities are not measured by attendance sheets or perfect schedules. They are measured by connection. They are measured by smiles. They are measured by conversations that continue after the activity ends. They are measured by residents who feel valued, included, and remembered. The longer I worked in healthcare, the more I realized that activities are really about helping people continue to live rather than simply exist.

That is a powerful responsibility. It is also a tremendous privilege. I have spent my career working with people from different backgrounds, different generations, and different walks of life. Some became friends. Some became mentors. Some taught me lessons they probably never realized they were teaching. All of them helped shape the person I became.

When people ask me what an Activity Director does, I usually smile because there is no simple answer. We plan events. We organize programs. We lead activities. But those descriptions only scratch the surface. What we really do is help create moments. Sometimes those moments are funny. Sometimes they are meaningful. Sometimes they are unforgettable. And sometimes they become stories that stay with us for the rest of our lives.

That is what an Activity Director's life has been for me. It has been a career built on relationships, unexpected adventures, countless lessons, and more stories than I could ever fit into a single book. The stories that follow are some of my favorites

Chapter 2

The Bingo Wars

If you have never worked in healthcare, you probably think bingo is a harmless game. That is adorable.

Before I became an Activity Director, I imagined bingo as a quiet activity where people politely sat around tables, marked numbers on cards, and enjoyed each other's company. In my mind, it was a peaceful social gathering. I pictured gentle conversation, occasional laughter, and perhaps a polite round of applause when someone won. Then I started working in healthcare and quickly discovered that bingo is not simply a game. It is not a pastime. It is not a recreational activity. It is a contact sport disguised as a leisure program.

My introduction to bingo happened early in my career when I was still learning what it meant to work in activities. At the time, I thought calling bingo would be one of the easiest parts of my job. After all, how difficult could it be? You pull a number, call it out, and wait for someone to yell bingo. I believed I had discovered the closest thing healthcare had to a stress-free activity. I was wrong before the first number was even called.

The first thing I noticed was that residents arrived early. Not five minutes early. Not ten minutes early. Some residents treated bingo like people treat airline boarding. If bingo started at two o'clock, they were parked outside the activity room by one-thirty. Some wanted their favorite seat. Others wanted their lucky bingo card. A few simply wanted to make sure nobody else claimed territory they had unofficially occupied since the Reagan administration.

I quickly learned that seating arrangements were serious business. One afternoon, I watched two residents engage in a debate over a chair that lasted longer than most staff meetings. The funny thing was that neither resident particularly liked the chair. They simply believed it belonged to them. By the time the discussion ended, one resident sat in a completely different chair and somehow still considered it a victory. I remember standing there wondering if I should call bingo or contact a mediator. The game had not even started.

Then there were the bingo cards. Most normal people use one card. Healthcare bingo professionals laugh at such limitations. Some residents played two cards. Others managed four. A few appeared capable of monitoring enough cards to control air traffic at a major airport. I watched residents track numbers across multiple cards while simultaneously carrying on conversations, drinking coffee, and keeping an eye on their competition.

And yes, there was competition. Lots of competition. Certain residents knew exactly who usually won. They knew who had lucky cards. They knew who had suspiciously good luck. They knew who always seemed to win the travel-sized shampoo. I remember one resident who acted as the unofficial FBI director of bingo. Whenever another resident started getting close to a win, she

would quietly lean over and inspect their card. She never accused anyone of cheating, but if she had owned a trench coat and a magnifying glass, she absolutely would have used them.

Then there were the complaints. Every Activity Director eventually becomes a professional complaint manager. During bingo, I heard complaints I never imagined possible. The numbers were being called too fast. The numbers were being called too slow. Someone missed a number. Someone repeated a number. Someone coughed during an important number. Someone's card was lucky. Someone's card was unlucky. Someone won too often. Someone never won. The prizes were too small. The prizes were too nice. The prizes favored one side of the room. To this day, I still do not know what that last complaint meant.

What amazed me most was that many of these same residents were absolutely delightful during every other activity. They attended crafts. They enjoyed socials. They participated in exercise groups. They smiled, laughed, and thanked staff. Then bingo started. It was like watching Clark Kent become Superman. The sweetest little grandmother in the building suddenly became a strategic competitor with the focus of a championship poker player.

I remember one resident who never raised her voice and never complained about anything. During bingo she would lean so far forward in her chair that I worried she might tip over. Her eyes locked onto her cards like a hawk spotting prey from a thousand feet in the air. If someone interrupted her concentration, she looked at them as though they had personally ruined Christmas. Honestly, they probably had.

The funniest part was that people were competing for prizes worth less than a dollar. I watched residents battle for a candy bar with the intensity of people competing for a luxury car. A travel-sized bottle of lotion could trigger excitement normally reserved for winning the lottery. The prize itself did not matter. Winning mattered. Bragging rights mattered. Being able to say, "I won three times today," mattered. One resident used to keep track of her victories like a baseball statistician. If she won four games in a week, everyone knew about it.

The real challenge for Activity Directors was maintaining order. You had to call numbers clearly. You had to verify winners. You had to settle disputes. You had to keep things moving. Most importantly, you had to remain completely neutral. You could not have favorites. You could not celebrate one winner more than another. You could not accidentally smile at the wrong person. For one hour each week, you transformed into a referee, judge, announcer, diplomat, and occasionally hostage negotiator.

Over time, however, I began to understand why bingo mattered so much. It was never really about the prizes. It was not even about the game. Bingo gave residents something to anticipate. It gave them excitement. It created community. It gave people a reason to gather together. Friendships formed around those tables. Conversations happened before and after the games. Residents who rarely participated in anything else often showed up faithfully for bingo.

What looked like a simple game from the outside was actually something much more important. It was connection. It was routine. It was belonging. The competition, complaints, and occasional controversies were simply part of the package. Of course, that does not mean things were always

peaceful. There were disagreements. There were investigations. There were debates over whether someone actually had bingo. There were moments when I questioned whether I was leading a recreational activity or presiding over a courtroom trial.

Yet somehow, every week, the residents returned. They arrived early. They found their seats. They organized their cards. They prepared for battle. And I stood at the front of the room calling numbers and trying to maintain order in what was essentially organized chaos.

Looking back now, I realize bingo taught me some of my earliest lessons about healthcare. It taught me about personalities. It taught me patience. It taught me flexibility. Most importantly, it taught me that activities are never really about the activity itself. They are about people. The game was simply the excuse for everyone to gather.

That lesson stayed with me throughout my entire career. And it all started with bingo. Or perhaps more accurately, it started with the Bingo Wars.

Chapter 3

The Scenic Route

One of the things residents always seemed to enjoy most was getting out of the building. It did not have to be a major trip or an expensive destination. Sometimes the simplest outings became the most memorable. A ride through the countryside, a stop for ice cream, or simply seeing something different than the same four walls could completely change a person's day. As an Activity Director, I learned that sometimes the journey was more important than the destination.

While working in Pennsylvania, I was fortunate to be surrounded by some beautiful scenery. Lancaster County was one of my favorite places to take residents. There was something peaceful about the rolling farmland, horse-drawn buggies, covered bridges, and open fields. Many of the residents had spent parts of their lives in rural communities, and driving through the countryside often sparked stories and memories. They would point out farms that reminded them of where they grew up, talk about raising families, or share stories about working the land when they were younger. These scenic drives often became much more than a bus ride. They became opportunities for people to reconnect with pieces of their lives that they had not thought about in years.

One particular drive started like many others. I loaded a group of residents onto the bus along with another staff member. The weather was beautiful, and everyone seemed excited to get out for the afternoon. The plan was simple. We would enjoy about an hour of driving through Lancaster County and then return to the community. I had done drives like this many times before and did not think much about it. The residents settled into their seats and the conversations began almost immediately. One resident talked about growing up on a farm.

Another shared stories about family vacations. A few pointed out horses and barns as we drove past. Everyone seemed relaxed and happy. The trip was unfolding exactly the way I had hoped.

Then I realized I had a problem. I had forgotten my printed MapQuest directions. For younger readers, there was a time before everyone carried a GPS in their pocket. Back then, if you were going somewhere unfamiliar, you sat down at a computer, typed in your destination, and printed out directions from a website called MapQuest. Those printed pages were your lifeline. If you missed a turn, there was no calm voice telling you to make a U-turn. There was no blue dot showing your location. There was no rerouting feature. There was just you, the road, and whatever confidence you could pretend to have. Unfortunately, my directions were sitting back at the community instead of on the bus with me.

At first, I was not worried. I knew where I was, or at least I thought I did. As we continued driving, I began taking roads that looked familiar. Then I took another road that looked familiar. Then another. After a while, I started noticing that things looked less familiar than they should have. That is never a good sign when you are responsible for transporting a busload of residents. Lancaster County is beautiful, but after a while one country road starts looking a lot like another country road. There are only so many red barns, silos, cornfields, and horse-drawn buggies a person can use as landmarks before everything begins blending together.

At some point, I realized I was officially lost. Of course, there was no way I was going to announce that to the residents. Imagine standing up in front of a bus full of older adults and saying, "Good news everyone. We are no longer on a scenic drive. We are now participants in a geography experiment." So I kept driving. The funny thing was that the residents were having a wonderful time. They had no idea anything was wrong. In fact, the more lost I became, the more scenery they got to enjoy. Every road seemed to reveal another beautiful farm, another covered bridge, or another picturesque view. As my stress level increased, their enjoyment increased.

About an hour into the trip, the staff member who had accompanied us slowly walked up to the front of the bus. She leaned toward me and quietly asked a question. She wanted to know when we were going to get back. That question immediately raised my blood pressure. I smiled and gave what I hoped sounded like a confident answer. The truth was that I had absolutely no idea. By this point, I had entered what I call Activity Director Survival Mode. This is the ability to look completely calm on the outside while internally questioning every decision you have made during the previous hour.

Inside my head, the conversation sounded very different. I kept thinking that we should have seen certain roads by now. Every barn began looking familiar. Then I would wonder if it was actually a different barn. Eventually, I found myself asking how many barns one county could possibly have. The answer, I discovered, was far more than I ever imagined.

As I continued driving, I started imagining the conversations that might be happening back at the building. People were probably wondering where we were. They were probably wondering why we had not returned. I imagined staff members looking at the clock and questioning whether I knew where I was. The truth was that by this point, I was beginning to question that myself.

Meanwhile, the residents continued having a fantastic time. They were laughing, talking, sharing stories, and enjoying the scenery. Looking back, it was probably one of the best scenic drives I ever provided. The only person not enjoying it was me. The longer we drove, the more concerned I became. At some point, I stopped worrying about being late and started focusing entirely on finding a road that looked familiar.

Eventually, after what felt like several days but was actually about two and a half hours, I spotted a road I recognized. I cannot adequately describe the relief I felt. It was like finding water after wandering through a desert. It was like seeing your highway exit after realizing you missed it twenty miles ago. It was one of the most beautiful sights I had ever seen.

When we finally pulled into the community, there were people waiting. The staff looked relieved. They also looked curious. Several people wanted to know what had happened. They wanted to know why we had been gone so long and whether everything was okay. I looked at them and gave what remains one of my favorite answers from my entire career. I told them that the residents were having so much fun that I just kept driving. Technically, that statement was true. Very technically.

The residents absolutely loved the trip. They spent the rest of the day talking about the scenery, the stories, and the beautiful countryside. Not one resident complained. Not one resident seemed bothered by the extra time. In their minds, it had been a wonderful afternoon. To me, it had been a lesson. From that day forward, I never forgot my directions again. I also developed a much deeper appreciation for GPS technology. Every time my phone calmly tells me where to turn today, I silently thank it.

Looking back now, however, I am grateful for that experience. Some of the best stories happen when things do not go according to plan. If everything had worked perfectly, I probably would not remember that trip today. Instead, it became one of those stories that stayed with me throughout my career. It reminded me that activities are not always about the schedule. They are not always about arriving on time. Sometimes they are about the experience itself. Sometimes an unexpected detour becomes the highlight of the day. I would not recommend getting lost with a bus full of residents, but if you are going to get lost, Lancaster County is not a bad place to do it. And if the residents are smiling, laughing, and making memories along the way, maybe the scenic route is not always the wrong route after all.

Chapter 4

The Quiet Curse

Every profession has its unwritten rules. Teachers have them. Nurses have them. Police officers have them. Activity Directors have them too. One of the most important rules in healthcare is this: never, under any circumstances, say the words, "It sure is quiet today." If you are new to

healthcare, that statement probably sounds harmless. It sounds like a simple observation. It sounds innocent. It sounds reasonable. It is none of those things. Those six words have the power to completely destroy an otherwise peaceful day.

I learned this lesson very early in my career while working as an Activity Assistant. At the time, I was still figuring things out. I was learning how to run groups, work with residents, and navigate the sometimes unpredictable world of healthcare. Like many young employees, I thought I knew more than I actually did. I had not yet learned that healthcare has its own culture, its own language, and its own superstitions.

One afternoon, I was leading a craft activity. The residents were seated around tables working on a painting project. The room was peaceful. People were quietly painting, chatting, and enjoying themselves. Soft music played in the background. A few residents were complimenting each other's artwork while others were carefully deciding which colors to use. Everything was running exactly as planned. For an Activity Assistant, this was the dream. Nobody was upset. Nobody needed anything. The group was engaged. The staff seemed relaxed. It was one of those rare moments when everything appeared to be going perfectly.

I remember looking around the room and thinking how calm everything felt. Without giving it a second thought, I looked at one of the nurses and casually said, "It sure is quiet today."

I will never forget the look she gave me.

She did not smile. She did not laugh. She did not respond right away. She simply stared at me. It was the kind of look normally reserved for someone who had just announced they were about to cut the wrong wire on a bomb. At the time, I had no idea why she reacted that way. I remember thinking that perhaps she was having a bad day. I found out very quickly that her reaction had nothing to do with her mood.

Within what felt like minutes, the atmosphere in the room changed. A disagreement started between two residents. To this day, I honestly cannot remember exactly how it started. What I do remember is that it involved paint colors. Somehow a discussion about paint turned into an argument. The argument turned into a debate. The debate turned into a full-scale verbal battle. One resident believed a certain color should be used. Another resident strongly disagreed. Before long, residents were taking sides.

Voices began getting louder. People who had been peacefully painting moments earlier suddenly became very passionate about something that had started with a craft project. Nurses became involved. Staff members started moving around the room. Administrators eventually heard about the situation. What had started as a quiet afternoon craft group suddenly felt like an international diplomatic crisis involving paint and construction paper.

Meanwhile, I stood there wondering how we had gotten from watercolor painting to World War III in less than fifteen minutes.

The nurse eventually walked by me. She did not say much. She did not need to. The look on her face communicated everything. It was the same look a veteran firefighter might give a rookie who accidentally started the fire. I knew exactly what she was thinking.

"This is your fault."

From that day forward, I learned about what healthcare workers refer to as the quiet curse. The quiet curse is the belief that the moment someone announces how quiet things are, chaos immediately follows. It does not matter whether you work in activities, nursing, housekeeping, maintenance, dietary services, or administration. Healthcare workers everywhere seem to agree that speaking those words invites trouble.

The funny thing is that once you learn about the quiet curse, you start noticing it everywhere. I would hear new employees say it from time to time. Someone would walk into a nursing station and say, "Wow, it is really quiet today." Immediately, experienced staff members would react. Some would shake their heads. Some would laugh nervously. Some would tell the person to stop talking immediately. Others would look around the building as if they expected trouble to emerge from around the corner at any moment.

And often, somehow, trouble did.

Maybe it was coincidence. Maybe it was superstition. Maybe healthcare workers simply have long memories. Whatever the reason, I stopped saying it.

Years later, when I became an Activity Director, I heard a brand-new employee make the same mistake. He casually looked around and said, "It sure is quiet today." I immediately felt my shoulders tighten. The employee looked at me and laughed.

"What?" he asked.

I smiled and simply said, "You'll learn."

Sure enough, before the shift ended, everything changed. A transportation issue developed. A family concern surfaced. A resident disagreement needed attention. Several unexpected situations appeared at the same time. Nothing major happened, but enough happened to remind everyone why those words were considered dangerous. Later that day, the employee walked up to me and shook his head.

"I think I understand now."

Welcome to healthcare.

One of the reasons this superstition survives is because healthcare is unpredictable. Every day starts with a plan. Then real life arrives. Residents have needs. Families have concerns. Equipment breaks. Weather changes. Schedules shift. Emergencies happen. No matter how organized you are, something unexpected usually finds its way into the day.

Activity Directors become particularly familiar with this reality. You can spend weeks planning an event and discover the entertainer is sick. You can prepare an outdoor activity and watch a thunderstorm appear from nowhere. You can organize transportation and discover the vehicle has mechanical problems. You can set up a beautiful craft project and somehow end up mediating an argument about paint colors. The longer I worked in healthcare, the more I realized that flexibility was far more valuable than perfection. The people who survived and thrived in healthcare were not necessarily the ones with the best plans. They were the ones who could adapt when the plans changed.

Still, I never forgot the lesson from that craft group. To this day, whenever someone says, "It sure is quiet," a small part of me im mediately becomes nervous. I start waiting. I start looking around. I start wondering what is about to happen. Maybe nothing will happen. Then again, maybe someone will decide that blue paint should have been green paint and suddenly the entire building will be involved.

You never know.

That is one of the reasons healthcare remains interesting. No two days are exactly alike. No matter how much experience you gain, there is always something new waiting around the corner. If there is one piece of advice I would offer to anyone entering healthcare, it would be this: learn your job, work hard, stay flexible, treat people with kindness, and whatever you do, never, ever say, "It sure is quiet today."

Trust me on that one.

Chapter 5

Catherine

One of the greatest lessons I learned as an Activity Director was that behavior always has a story behind it. Sometimes it takes a little time to discover that story. Sometimes it takes patience. Sometimes it takes teamwork. And sometimes it takes seeing a person not for what they are doing, but for who they are and what they have experienced throughout their life. I learned that lesson from a resident named Catherine.

Catherine was approaching one hundred years old. She lived in the community where I worked, and she was well known by both staff and residents. She was sharp in some ways, forgetful in others, and she had a personality that could fill a room. One thing everyone noticed was that she constantly wanted my attention. If I walked down the hallway, Catherine wanted to talk to me. If I was leading an activity, Catherine wanted to sit near me. If I stopped to speak with another resident, Catherine somehow managed to insert herself into the conversation. If I was walking

from one end of the building to the other with a purpose, Catherine would find a way to slow me down.

At first, I will admit, it was a little frustrating. As an Activity Director, your day is already filled with responsibilities. There are activities to run, families to talk with, volunteers to coordinate, calendars to create, transportation to arrange, and a hundred other things competing for your attention. When someone consistently wants your time, it can become difficult to balance everything. The staff noticed it too. They would smile and tell me that Catherine really liked me. That part was obvious. What was not obvious was why.

The interesting thing was that Catherine did not seek attention from everyone in the same way. She was pleasant with staff and enjoyed socializing with other residents, but there seemed to be something different about the way she interacted with me. It was as though she felt drawn to me for reasons neither of us understood. Over time, the staff and I began talking about it. We tried to figure out what was happening. Was it something I said? Did I remind her of someone? Was there a memory she associated with me? None of us knew.

Then one day, the answer finally revealed itself. Through conversations with Catherine and her family, we learned more about her husband. As people described him, something became very clear. The way they described his personality, his mannerisms, and even some of the things he would say sounded surprisingly familiar. It turned out that I reminded Catherine of her husband.

Suddenly everything made sense. The attention seeking. The conversations. The way she would light up when I entered a room. The way she wanted to be near me. It was not really about me at all. It was about someone she had loved. When that realization hit me, my entire perspective changed. What had sometimes felt like an interruption now felt like an opportunity. What had occasionally felt frustrating now felt meaningful. I began seeing those interactions differently. Every conversation became a chance to provide comfort. Every moment spent listening became an opportunity to help her feel connected to a memory that brought her peace.

The experience taught me something important about working with older adults, especially those experiencing memory loss or cognitive changes. Often, people are not responding to who you are. They are responding to who you remind them of. They are connecting with memories, emotions, and relationships that have shaped their lives. Sometimes we become part of a story that started long before we arrived.

As I spent more time with Catherine, I found myself appreciating those moments. She had lived nearly a century. Think about that for a moment. She had witnessed world events, family milestones, technological changes, and experiences most of us can only read about in history books. She had loved, lost, celebrated, struggled, and persevered through decades of life. And now, near the end of that journey, a familiar feeling had resurfaced because of a connection she made. That realization humbled me. It reminded me that every resident carries a lifetime of memories into a healthcare community. We often meet people in the final chapters of their lives, but those chapters are connected to an entire book of experiences that came before.

As healthcare workers, we only get to see a small piece of that story. The challenge is remembering that there is always more to the person than what we see. Catherine taught me that lesson better than anyone. Over time, I stopped wondering why she wanted my attention and started appreciating the opportunity to spend time with her. Some days our conversations were brief. Some days they lasted longer. Sometimes we talked about activities. Sometimes we talked about life. Sometimes she simply wanted someone to sit nearby.

The details of those conversations have faded over the years, but the lesson remains. People are not problems to be solved. They are stories to be understood. When we take the time to understand the story, behaviors often begin to make sense. Looking back now, Catherine was not trying to make my day more difficult. She was responding to something that brought her comfort. She was reaching for a connection that reminded her of someone she loved deeply.

Years later, I still think about her. Whenever I encounter a resident whose behavior seems confusing or difficult to understand, I remember Catherine. I remind myself that there is probably a story I have not heard yet. There is probably a reason I do not fully understand. There is probably a piece of their life that explains what I am seeing. Sometimes all it takes is patience to discover it.

Catherine taught me many things, but perhaps the greatest lesson was this: behind every behavior is a human being, and behind every human being is a story worth knowing.

Chapter 6

Listen Buddy, You Don't Know Everything

One of the benefits of working in healthcare is that if you stay long enough, people will teach you things. Some lessons come from coworkers. Some come from books and training classes. Some come from experience. And then there are the lessons that arrive completely unannounced and hit you right between the eyes. This is one of those stories.

Early in my career, I was working in a dual role as both the Social Worker and Activity Director. Looking back, I am not entirely sure how I managed both jobs at the same time. During the day I might be helping families navigate difficult situations, meeting with residents about concerns, completing assessments, coordinating services, and then immediately switching gears to run activities, plan events, organize trips, and keep residents engaged. It was a busy role that required wearing many different hats. At the time, I thought I had a pretty good understanding of what I was doing. I had learned the basics of activities. I was gaining experience as a social worker. I knew how to run groups. I knew how to organize events. I knew how to talk with residents. My confidence was growing. Looking back now, I realize that confidence and experience are not always the same thing. Like many young professionals, I had enough knowledge to feel confident but not enough experience to realize how much I still had to learn.

One day, I was spending time with a resident who was known for speaking her mind. She was not rude. She was not mean. She was simply honest. The kind of person who would tell you exactly what she was thinking whether you asked for her opinion or not. Residents like that can be some of the best teachers because they are rarely interested in protecting your feelings. If they thought something needed to be said, they said it.

I was standing beside her bed having a conversation. Like many young healthcare workers, I was probably talking more than I was listening. I may have been explaining something. I may have been sharing my opinion. I honestly do not remember exactly what the conversation was about. What I do remember is what happened next because it became one of the most memorable moments of my career.

Without warning, she reached up and grabbed my tie.

Now, for younger readers, there was a time when Activity Directors and Social Workers regularly wore ties to work. We thought it made us look professional. Looking back, it also gave residents a convenient handle if they ever needed to get our attention.

Before I could react, she pulled me down closer to her bed. Suddenly, my face was only inches away from hers. She tightened her grip on my tie, looked directly into my eyes, and delivered a sentence that I have never forgotten.

She said, "Listen buddy, you don't know everything."

Then she let go.

That was it. No long explanation. No follow-up discussion. No additional comments. Just six words that landed harder than any lecture I had ever received.

I stood there for a moment trying to process what had just happened. Part of me was embarrassed. Part of me was surprised. Part of me wanted to laugh. The entire interaction happened so quickly that I was not quite sure how to respond. Meanwhile, the resident seemed perfectly satisfied. From her perspective, the meeting was over. Message delivered. Lesson complete.

What makes the story even funnier is that she was absolutely right. At the time, I probably thought I knew more than I actually did. I had enough experience to feel confident but not enough experience to fully appreciate how much I still had to learn. That seems to be a common stage in many careers. We gain a little knowledge and begin feeling like experts. Then life kindly reminds us that we are still students.

Healthcare has a way of doing that. Just when you think you have figured people out, someone surprises you. Just when you think you have seen everything, something new happens. Just when you think you have all the answers, someone asks a question you cannot answer. The longer I worked in healthcare, whether as a Social Worker, Activity Director, or both, the more I realized that every day brought opportunities to learn something new.

Over the years, I came to appreciate residents like her. They kept me humble. They reminded me that wisdom does not always come from degrees, certifications, job titles, or years of employment. Sometimes wisdom comes from people who have simply lived longer than you have. Think about what this resident had experienced. She had lived through decades of change. She had seen world events, family milestones, successes, disappointments, joys, and losses. She had learned lessons that cannot be taught in classrooms. She had accumulated a lifetime of experience. Compared to that, I was still fairly new to the journey.

The longer I worked in healthcare, the more I realized how often residents became my teachers. They taught me about patience. They taught me about resilience. They taught me about grief, love, humor, and perseverance. Some taught through stories. Some taught through observation. This resident taught through direct communication and, apparently, a firm grip on a necktie.

The funny thing is that I do not remember much else about that day. I cannot tell you what activity I was planning. I cannot tell you what meetings I attended. I cannot tell you what paperwork I completed as a social worker. I cannot tell you what else happened during my shift. But I remember those six words. I remember being pulled down to her level. I remember the look in her eyes. And I remember the lesson.

As the years passed, those words became more meaningful. Every time I entered a new job, every time I took on new responsibilities, every time I thought I had things figured out, I would remember that resident. Her voice would come back to me and remind me to stay humble. The lesson was simple but powerful. There is always more to learn. There is always another perspective. There is always someone who knows something you do not.

She was right then, and she is still right today.

After more than twenty-five years in healthcare, I know far more than I knew when I started. I have learned countless lessons from residents, families, coworkers, and experiences. Yet the more I learn, the more I realize how much there is still to understand. That may be one of the greatest gifts healthcare gives us. It keeps us learning. It keeps us growing. It reminds us that every person we meet has something valuable to teach us if we are willing to listen.

Whenever I think about that resident now, I smile. What felt embarrassing in the moment became one of the most valuable lessons of my career. She did not give me a lecture. She did not sit me down for a formal discussion. She simply grabbed my tie, pulled me close, and gave me a truth that has followed me ever since.

There are many lessons I learned throughout my years in healthcare, but few have stayed with me as long as those six simple words. "Listen buddy, you don't know everything." And honestly, that is probably the smartest thing anyone ever told me.

Chapter 7

The Day the Exercise Class Became a Dance Party

If there is one thing I learned during my years as an Activity Director, it is that people will almost always surprise you. You can spend hours planning an activity, carefully organizing every detail, and creating a perfect schedule. Then residents show up and decide they have a better idea. Sometimes the best thing you can do is get out of the way and let the moment happen.

Exercise classes were a regular part of life in every community where I worked. Doctors encouraged exercise. Families appreciated it. Staff liked seeing residents stay active. Residents themselves often knew it was good for them, even if they occasionally needed a little encouragement to attend. Like many Activity Directors, I spent a lot of time leading exercise groups. In the early years of my career, exercise classes often involved videotapes. I would wheel a television into a room, put in an exercise tape, and encourage residents to follow along. It worked well enough. People participated. They got movement. They exercised. But something always felt missing.

Over time, I began noticing that residents were not really connecting with the television. They were watching it because that was what was available. What they really wanted was a person standing in front of them leading the group. They wanted interaction. They wanted encouragement. They wanted someone to laugh with. They wanted someone who could adjust the pace based on how they were feeling that day. Eventually, I stopped relying so much on the television and started leading more of the exercises myself. The difference was remarkable. Attendance improved. Participation improved. People smiled more. The energy in the room felt completely different.

One afternoon, I was leading an exercise class in a community room filled with residents. The plan was simple. We would stretch, move our arms, move our legs, do some range-of-motion exercises, and then everyone would head off to their next activity. At least that was the plan.

As the class progressed, I noticed residents were particularly energetic that day. They were laughing more than usual. They were teasing one another. They seemed to be enjoying themselves. One resident started making jokes. Another resident began singing along with the music that was playing quietly in the background. The room had a different feeling than usual. There was a lightness in the air that was hard to explain. Instead of fighting it, I decided to lean into it.

I turned the music up a little louder. Nothing dramatic. Just enough to change the atmosphere. Suddenly a resident started moving to the beat instead of following the exercise routine. Another resident joined in. Before long, a few people were moving their arms more like dancers than

exercisers. Then someone started clapping. That is usually the point where an Activity Director realizes the original plan is no longer in charge.

The music continued and the clapping continued. Before long, what had started as an exercise class began transforming into something completely different. Residents were smiling. People were laughing. Some were singing. A few were dancing in their chairs. One resident began directing others as though she were the choreographer for a Broadway production. Another resident insisted he knew exactly how the song should be performed and demonstrated his own version. Whether his version was correct remains open for debate, but what mattered was that everyone was having fun.

I remember looking around the room and realizing something important. Nobody cared whether they were exercising correctly anymore. Nobody was counting repetitions. Nobody was worrying about technique. They were simply enjoying being together. The funny thing was that they were still exercising. Arms were moving. Legs were moving. Bodies were moving. The only difference was that nobody was thinking about exercise anymore. They were thinking about having fun.

One of the residents looked at me and said that this was much better than exercise. I laughed because she was probably right. The class eventually ended, but people kept talking about it long afterward. Residents who normally rushed back to their rooms lingered in the activity room. Conversations continued. Laughter continued. The energy stayed with them.

That experience changed how I viewed activities. Early in my career, I sometimes focused too much on the activity itself. Was the exercise class successful? Did everyone complete the movements? Did we follow the plan? Over time, I learned to ask a different question. Did people enjoy themselves? Because if people are laughing, connecting, and engaging with one another, something meaningful is happening.

The exercise class that day reminded me that healthcare activities are rarely about the activity itself. The exercise was not the most important thing that happened in that room. The connection was. The joy was. The laughter was. Years later, I would continue using that lesson. Whether I was leading exercise groups, bingo games, discussion groups, or special events, I learned to pay attention to the energy in the room. Sometimes residents need structure. Sometimes they need routine. And sometimes they simply need permission to enjoy the moment.

One of the reasons I loved being an Activity Director was because moments like that could happen without warning. You might walk into a room expecting to lead an exercise class and leave having hosted a dance party. You might start a discussion group and end up listening to stories that no one planned to tell. You might organize an event and discover that the most memorable part happened completely by accident. That is what happened that afternoon.

The schedule said exercise class. The residents had other ideas. Looking back now, I cannot remember what songs were playing. I cannot remember what exercises we completed. I cannot remember how long the class lasted. What I remember is the laughter. I remember the smiles. I

remember the feeling in the room. I remember residents who seemed lighter, happier, and more connected when they left than when they arrived.

That day reminded me that activities are not really about calendars, schedules, or programs. They are about people. They are about creating opportunities for joy, connection, and shared experiences. Sometimes the best thing an Activity Director can do is stop worrying about the plan and follow the energy of the room.

The residents may have thought they attended an exercise class that day. I like to think they attended a dance party disguised as exercise. And honestly, I think everyone got exactly what they needed.

Chapter 8

The Resident Council Revolution

Most people probably imagine that life inside a healthcare community is calm, quiet, and orderly. They picture residents peacefully going about their day while staff members keep everything running smoothly. What they may not realize is that every community has its own government. It may not have elections, campaign commercials, or political debates on television, but it does have opinions, negotiations, disagreements, and occasionally what feels like a full-scale political uprising. I am talking about Resident Council.

For those who have never worked in healthcare, Resident Council is a meeting where residents gather to discuss concerns, share ideas, make suggestions, and talk about life in the community. In theory, it sounds simple. Residents sit together, discuss topics, and provide feedback. In reality, Resident Council can sometimes feel like a combination of a town hall meeting, a city council session, and a family reunion. As the Activity Director, I was often responsible for facilitating these meetings. My job was to take notes, guide discussions, and make sure everyone had an opportunity to speak. What I quickly learned was that residents always had something to say.

Sometimes the concerns were significant. Residents might discuss food quality, transportation issues, maintenance requests, or concerns about services. Those conversations were important and often resulted in positive changes. Other times, however, the topics could become surprisingly passionate. I remember one meeting where an extended discussion broke out over the temperature of the coffee. One resident believed the coffee was too hot. Another resident believed it was too cold. A third resident believed it was exactly right. Before long, there were multiple opinions being shared. Some residents offered suggestions. Others provided evidence from previous coffee experiences. I sat there wondering how a discussion about coffee had become one of the longest agenda items of the afternoon.

The funny thing about Resident Council was that the residents genuinely cared. These meetings gave them ownership. It was their home. They wanted their voices heard. They wanted to know that their opinions mattered. And they did matter. One of my favorite parts of Resident Council was watching residents advocate for one another. Sometimes a resident would bring up a concern that did not affect them personally but affected a friend. They would speak up because they wanted someone else to have a better experience. Those moments reminded me that community does not stop simply because people move into a healthcare setting.

Of course, there were also moments that made me laugh. I remember one resident who treated every meeting like a press conference. She arrived prepared. She carried notes. She had questions. She had follow-up questions. She occasionally had questions about the questions. By the time she finished speaking, I often felt like I had just testified before Congress. Then there were the residents who rarely spoke during the entire meeting. They would sit quietly, listening to everyone else. Just when I thought we were finished, one of them would raise a hand and deliver the most insightful comment of the day. Everyone would nod in agreement, and I would wonder why we had not simply asked that person first.

The best meetings were the ones that included humor. Residents would tease one another, laugh about everyday situations, and occasionally turn minor concerns into comedy routines. Those meetings reminded me that people do not lose their personalities when they move into a healthcare community. If anything, their personalities often become even more visible. The building might be their residence, but they still brought decades of life experience, opinions, habits, and stories into every room they entered.

One particular meeting stands out in my memory. We had spent nearly forty-five minutes discussing a variety of concerns. Food had been discussed. Activities had been discussed. Housekeeping had been discussed. Maintenance had been discussed. I thought we were finally reaching the end of the meeting when one resident slowly raised his hand. I asked what he wanted to discuss. He looked around the room, cleared his throat dramatically, and announced that he believed the community needed more cookies. The room erupted in applause. Apparently, he had discovered the one issue everyone could agree on. I remember laughing because after forty-five minutes of debate, discussion, and differing opinions, cookies had united the entire community.

Resident Council taught me many lessons over the years. It taught me how to listen. It taught me patience. It taught me that people want to be heard. It also taught me that sometimes the smallest concerns can feel like the biggest concerns when they affect someone's daily life. As an Activity Director, I often found myself sitting in the middle of these conversations. Some days I felt like a meeting facilitator. Other days I felt like a diplomat negotiating peace treaties between competing nations. Regardless of the topic, my role was always the same. Listen carefully. Take people seriously. Help find solutions whenever possible.

Looking back now, I appreciate those meetings more than I did at the time. Resident Council was not really about complaints. It was about participation. It was about giving residents a voice. It was about helping people maintain a sense of control and involvement in their own lives. The residents may not have realized it, but they taught me something every month. They reminded

me that every person wants to be heard. Every person wants to matter. Every person wants to know their opinion counts.

And every once in a while, they reminded me that if you want a successful meeting, it helps to have cookies on the agenda. That may not have been written in any Activity Director training manual, but after years of Resident Council meetings, I can confidently tell you it is one of the most valuable lessons I learned.

Chapter 9

Keeping Up With Gretchen

Throughout my career, I met many residents who left a lasting impression on me. Some did it through their stories. Some did it through their sense of humor. Some did it through the lessons they taught me. Then there was Gretchen, who became memorable because she could outwalk just about everyone in the building.

I first met Gretchen while working in Philadelphia. She was one of those residents who seemed to have endless energy. Most people her age were slowing down a bit, taking their time getting from place to place, and moving at a comfortable pace. Gretchen apparently never got that memo. She walked everywhere with purpose and determination. She did not stroll. She did not casually wander down hallways. Gretchen speed walked.

The first time I accompanied her on a walk, I made the mistake of assuming it would be a leisurely outing. As an Activity Director, I spent plenty of time walking with residents. Many enjoyed taking their time, stopping to talk, and pointing out things they noticed along the way. I expected something similar. Instead, Gretchen took off like she was trying to qualify for the Olympics.

Within minutes, I found myself struggling to keep up. The funny thing was that Gretchen never appeared to be exerting herself. She looked completely relaxed. Meanwhile, I was increasing my pace and wondering how someone old enough to be living in a retirement community had more energy than I did. Every time I thought we were slowing down, she somehow found another gear. She would turn a corner, and I would have to speed up to catch her. More than once, I wondered if she was secretly enjoying watching me try to keep up.

As time went on, our walks became a regular routine. Gretchen enjoyed walking, and I enjoyed spending time with her. What started as an activity eventually became a challenge. Every time we headed down the hallway, I knew I needed to be ready. There was no easing into the walk. The moment Gretchen started moving, it was game on.

Staff members noticed it too. They would see us heading down the hallway and smile because they knew exactly what was about to happen. Gretchen would be moving at full speed while I followed a few steps behind trying to maintain my dignity. More than once, I heard someone joke that I looked like I was getting my daily cardio workout. They were not wrong. There were days when I felt like I needed to stretch before taking a walk with Gretchen.

The remarkable thing about her was that she rarely seemed tired. She simply loved to move. Walking gave her freedom. It gave her independence. It gave her something to do that she enjoyed. Looking back, I think those walks were about much more than exercise. They were about maintaining a sense of purpose and control over her day. Every lap around the building was another opportunity to stay active and engaged.

During our walks, we talked about all sorts of things. Sometimes she shared stories from her life. Sometimes we talked about what was happening in the community. Sometimes we simply enjoyed the movement and the company. Those conversations often happened quickly because if I slowed down too much, I risked getting left behind. Gretchen did not stop for long discussions. She preferred conversations on the move.

One day, after another particularly fast walk, I remember thinking that Gretchen had accidentally taught me an important lesson. Too often in healthcare, people focus on limitations. They focus on what people can no longer do. Gretchen reminded me to pay attention to what people still could do. She could walk. In fact, she could walk faster than many people decades younger than she was.

Healthcare has a way of surprising you like that. Just when you think you understand what aging looks like, someone like Gretchen comes along and changes your assumptions. She did not fit the stereotype that many people have about older adults. She was active, determined, and full of energy. She reminded me that every person ages differently and that we should never underestimate what someone is capable of doing.

Over time, I stopped trying to keep up with Gretchen and started appreciating the experience. If she wanted to walk fast, we walked fast. If she wanted to take another lap around the building, we took another lap. I learned that my job was not to slow her down. My job was to support her and help her continue doing something she enjoyed.

Years later, I still smile when I think about those walks. I can picture Gretchen moving quickly down the hallway while I tried to stay close behind. I can hear staff members laughing as they watched us pass. Most of all, I remember the joy she found in something as simple as walking.

It is funny how certain residents stay with you. I do not remember every meeting I attended in Philadelphia. I do not remember every activity I planned. I do not remember every schedule I created. But I remember Gretchen speed walking through the building like she had somewhere important to be. Maybe that is because she did. She was heading toward another conversation, another experience, another moment in her day. She reminded me that life keeps moving forward and that sometimes the best thing we can do is keep moving with it.

I learned many lessons during my years in healthcare. Some came from classrooms. Some came from experience. And some came from trying to keep up with a resident named Gretchen who walked faster than anyone I have ever known. Looking back now, I realize she was teaching me far more than the value of exercise. She was teaching me about determination, independence, and making the most of every day. Those are lessons worth keeping up with, even if I never quite managed to keep up with Gretchen herself.

Chapter 10

The Day the Fire Alarm Went Off During Bingo

If you have worked in healthcare long enough, you learn that emergencies rarely happen at convenient times. They never seem to occur when people are sitting quietly doing nothing. They happen during meals, during family visits, during activities, and apparently during bingo.

Of all the activities that could be interrupted, bingo is probably one of the worst. Residents take bingo seriously. Some look forward to it all week. Some arrive early to claim their favorite seats. Others have lucky cards, lucky markers, and what they believe are lucky seats. By the time the first number is called, the room is fully invested in the outcome.

One afternoon, I was leading a bingo game in a healthcare community. The room was full. Residents were focused on their cards, carefully marking numbers and keeping an eye on their competition. Everything was going smoothly. People were engaged. The prizes were lined up on a table. The atmosphere was exactly what you hope for as an Activity Director.

Then the fire alarm went off.

At first, there was a moment of confusion. The loud alarm echoed through the building. Staff immediately shifted into action mode. Nurses began checking residents. Department heads started following emergency procedures. Everyone knew their role.

The residents, however, had a different concern.

"What about bingo?"

I remember looking around the room and realizing that several residents seemed far more concerned about the unfinished game than the possibility of a fire.

One resident asked if we could finish the current round before leaving.

Another wanted to know if her card would still count when we came back.

A third resident insisted she was only one number away from winning and thought it would be unfair to stop now.

Meanwhile, the alarm continued sounding in the background.

As staff members worked through emergency procedures, we began moving residents to designated areas. Some residents cooperated immediately. Others wanted clarification about what was happening. A few were more interested in protecting their bingo cards than following instructions.

One woman carefully folded her bingo card and tucked it into her pocket before moving. She was not taking any chances. If there was going to be an evacuation, she planned to be ready when bingo resumed.

The funny thing about healthcare is that people adapt to situations differently. Staff members were focused on safety. Administrators were focused on procedures. Maintenance was investigating the cause of the alarm. The residents were focused on whether someone was going to remember where the game stopped.

Fortunately, the situation turned out to be a false alarm. There was no fire. There was no danger. Once everything had been checked and cleared, people gradually returned to their normal routines.

And then came the most important question of the afternoon.

"Are we finishing bingo?"

The answer was yes.

The moment the residents heard that, it was as though nothing else had happened. People returned to their seats. Cards reappeared. Markers were gathered. Conversations shifted immediately from the fire alarm to winning.

Within minutes, the room looked exactly as it had before the alarm interrupted us.

I picked up the microphone and prepared to resume the game.

One resident looked at me and said, "Now where were we?"

It was such a simple question, but it made me laugh. We had just gone through an emergency procedure, relocated residents, cleared the building, and returned to the activity room. Yet for many of the residents, the most important issue was finding out which bingo number had been called last.

The game continued.

A winner was declared.

Prizes were distributed.

Life moved on.

Looking back, I think that afternoon taught me something important about residents. Healthcare communities become home. The routines become familiar. Activities become part of daily life. While staff members see emergencies as interruptions, residents often see them as temporary obstacles standing between them and the next bingo number.

I also learned something about the resilience of older adults. Many of the residents in that room had lived through far more serious situations than a false fire alarm. They had lived through wars, economic struggles, family hardships, personal losses, and countless challenges. A fire alarm was simply another event in the day.

Years later, I still laugh when I think about that afternoon. Not because the alarm went off, but because of how the residents responded. Their determination to finish the game was stronger than any concern about the interruption.

That is one of the things I loved about working with older adults. They had a way of keeping things in perspective. The world could feel chaotic around them, but they still knew what mattered.

And on that particular afternoon, what mattered was finding out who was going to win bingo.

Chapter 11

The Snow Dance

If you have never worked in healthcare during a snowstorm, it is difficult to explain what happens. Most people see snow and think about school cancellations, staying home, hot chocolate, and watching the weather report. Healthcare workers see snow and immediately start asking a completely different set of questions. Who is staying overnight? Who can make it to work? Who is covering the next shift? Do we have enough supplies? Do we have enough food? What happens if the roads become impassable? A snowstorm in healthcare is not just weather. It is an operation.

When I worked in Pennsylvania, snowstorms were a regular part of life. Every winter there would be a few storms that had everyone paying attention. The forecasts would begin several

days in advance. Administrators would monitor the weather. Department heads would start discussing plans. Nurses would prepare for the possibility of extended shifts. Everyone knew that if a major storm arrived, normal routines could change very quickly.

Then something funny would happen. The first snowflake would fall and suddenly all seriousness disappeared. The nursing staff and CNAs had a name for this phenomenon. They called it the Snow Dance. The Snow Dance was not an actual dance, although sometimes it came close. It was more of a celebration. The moment people realized a major snowstorm was arriving, excitement spread through the building. Staff members started talking about ordering pizza. Others talked about bringing blankets. Someone inevitably suggested wearing pajamas. Before long, conversations sounded less like emergency planning and more like preparations for a giant sleepover.

I remember hearing comments about ordering pizza, bringing snacks, and keeping pajamas in the car just in case. People talked about the storm almost as if they were preparing for a party. Meanwhile, I was usually standing there thinking about all the work that still needed to be done.

As the Activity Director, my role during a snowstorm looked a little different. While everyone else was talking about pizza and pajama parties, I was trying to figure out how to keep residents engaged if we ended up stuck inside for several days. Activities still had to happen. Residents still needed socialization. Families still called. Schedules still needed adjusted. Snow did not cancel the need for meaningful engagement.

The truth is that snowstorms often made my job busier. Residents could not leave for appointments. Entertainment groups often canceled. Volunteers stayed home. Family visits decreased. Suddenly, the activity department became even more important because we were responsible for helping everyone stay occupied while the world outside disappeared under a blanket of snow. I spent many snow days organizing games, movie marathons, extra bingo sessions, card tournaments, and anything else that would help pass the time. If residents were going to be stuck inside, I wanted them to have something enjoyable to do.

The funny thing was that residents often loved snowstorms. Many would gather near windows and watch the snowfall for hours. Conversations would begin about storms they remembered from decades earlier. Residents shared stories about shoveling snow, building snowmen, driving through blizzards, and getting snowed in with their families. Some of the best storytelling sessions I ever witnessed happened during snowstorms. A simple snowfall outside could unlock memories that had not been shared in years.

As the day went on, the building would begin to take on a different atmosphere. Staff who normally worked one shift might end up staying longer. Extra cots would appear. Blankets would be brought in. Break rooms would start looking like temporary bedrooms. Everyone knew that if the roads became bad enough, some staff members might not be able to get home.

And then the pizza would arrive.

I cannot explain why pizza becomes such an important part of snowstorm culture in healthcare, but it does. It is almost a requirement. The larger the storm, the more pizza seems to appear. It became part of the tradition. The nursing staff especially seemed to enjoy the experience. There was a sense of teamwork that emerged during those situations. Everyone knew they were there for the residents. Everyone knew they might be working longer hours than expected. Yet there was also a feeling of camaraderie that developed. People pulled together because they had to.

As for me, by the end of the day I was usually exhausted. While others talked about staying up late and enjoying the snow day atmosphere, I often found myself searching for the quietest room in the building. After leading activities, adjusting schedules, helping residents, and navigating the challenges that came with a snowstorm, all I really wanted was a little peace and a comfortable bed.

Unfortunately, being the Activity Director often meant joining the festivities whether I felt like it or not. Residents wanted activities. Staff wanted morale boosters. Someone always wanted a game. Someone always wanted music. Someone always wanted another activity. And somehow, I usually found myself right in the middle of it. Even when I was tired, I knew the residents were looking for opportunities to stay connected and engaged.

Looking back now, I smile when I think about those snow days. At the time, they felt exhausting. Today, they feel memorable. There was something special about watching an entire healthcare community come together during a storm. Staff members supported one another. Residents shared stories. People found ways to laugh despite the challenges.

The Snow Dance was really about more than pizza and pajamas. It was about teamwork. It was about adapting when circumstances changed. It was about finding joy in situations that could easily become stressful. Healthcare workers understand this better than most people. We learn to make the best of difficult situations. We learn to work together. We learn to find moments of laughter when we need them most.

Whenever I see snow in a weather forecast now, I still think about those days. I think about the nurses celebrating the first snowflake. I think about residents gathered around windows telling stories. I think about pizza boxes stacked in break rooms and staff members preparing for long nights. Most of all, I remember that no matter how much snow fell outside, the work of caring for people continued inside. The roads could close. Schools could cancel. Businesses could shut down. But healthcare kept moving forward.

And somewhere in the building, someone was probably still doing the Snow Dance.

Chapter 12

Hallway Bingo

There are certain moments in history that people never forget. Everyone remembers where they were when they heard the news. Everyone remembers how life changed. For those of us working in healthcare, COVID was one of those moments.

When the pandemic arrived, healthcare communities changed almost overnight. Activities stopped. Dining rooms closed. Group programs disappeared. Family visits ended. Residents who were accustomed to spending time together suddenly found themselves isolated in their rooms. The routines that helped structure daily life vanished almost immediately. As an Activity Director, I had spent my entire career bringing people together. Suddenly, I was being asked to keep people apart. Nothing in my training had prepared me for that.

One day I was planning group activities, entertainers, outings, exercise classes, and social events. The next day I was trying to figure out how to engage residents who could not leave their rooms. The entire philosophy of activities had to change. We had to become creative very quickly. The building felt different. The hallways were quieter. Staff members wore masks. Residents were confused. Families were worried. Every news report seemed to bring more uncertainty. Nobody knew exactly how long things would last.

One of the biggest challenges was loneliness. Human beings are social creatures. We need interaction. We need conversation. We need a connection. Many residents had spent years attending activities, eating meals with friends, and participating in community life. Suddenly, much of that disappeared. As Activity Directors, we found ourselves searching for ways to create connections while following safety guidelines. We delivered activity packets to rooms. We made individual visits when possible. We organized doorway activities. We looked for any opportunity to help residents stay engaged.

Then came hallway bingo.

If someone had told me years earlier that one of the most memorable activities of my career would involve residents sitting in doorways while I called bingo numbers down a hallway, I would have laughed. Yet that is exactly what happened. Residents remained in or near their doorways while maintaining distance from one another. I would move through the hallway calling numbers loudly enough for everyone to hear. Instead of gathering around tables, people played from their rooms. Instead of hearing conversations across the room, you heard voices traveling up and down the hallway.

At first, it felt strange. Very strange. Bingo had always been a social event. People sat together. They laughed together. They celebrated together. Now everyone was separated. Yet something unexpected happened. It worked. Residents started looking forward to hallway bingo. The familiar game provided a sense of normalcy during a time when very little felt normal. For a

short period of time, people could focus on something other than the pandemic. They could focus on finding numbers, winning prizes, and enjoying a little friendly competition.

The hallways came alive. Residents would call out greetings to one another. They would joke back and forth from their doorways. They would tease each other about winning. For a little while, the isolation felt less overwhelming. Healthcare workers often talk about resilience, and I saw a tremendous amount of it during those years. Residents adapted. Families adapted. Staff adapted. None of it was easy, but people found ways to keep moving forward.

I remember walking those hallways thinking about how much had changed. The activity calendars looked different. The routines looked different. Even the simplest interactions felt different. Yet despite all the challenges, people continued finding reasons to smile. There were difficult days too. Residents missed their families. Families missed their loved ones. Staff members worried about residents and worried about their own families at home. The emotional weight of those years was something healthcare workers will never forget.

Still, moments of joy found their way into the building. Sometimes it happened during hallway bingo. Sometimes it happened during a doorway conversation. Sometimes it happened when a resident simply smiled and thanked us for showing up. Those moments mattered. During a time when so much felt uncertain, they reminded us why we were there. They reminded us that our job was not only to care for people's physical needs but also their emotional needs.

Looking back now, hallway bingo represents much more than a game. It represents creativity during difficult circumstances. It represents perseverance when normal solutions no longer existed. Most of all, it represents the determination of healthcare workers and residents to stay connected even when circumstances tried to keep us apart.

When people ask me what it was like working in healthcare during COVID, I often think about those hallways. I think about bingo cards balanced on walkers and wheelchairs. I think about residents peeking out of their doorways waiting for the next number. I think about staff members doing everything possible to bring a little joy into a very uncertain time. I think about the courage and resilience I witnessed every single day.

None of us would have chosen those circumstances. None of us would want to repeat them. Yet those experiences revealed something important about the people who lived and worked in healthcare communities. We adapt. We care for one another. We find ways to connect. And sometimes, when the world feels turned upside down, we play bingo in the hallway and keep moving forward one number at a time.

When I look back on my career, I remember the parties, the trips, the celebrations, and the special events. But I also remember the hallway bingo games. They remind me that being an Activity Director is not about having the perfect activity plan. It is about finding ways to bring hope, connection, and joy to people no matter what circumstances you face. During one of the most difficult periods in modern healthcare history, a simple bingo card and a hallway full of residents helped remind all of us that we were still a community.

Chapter 13

The Day the Bird Got Into the Building

One of the things I learned during my years as an Activity Director is that no matter how carefully you plan your day, something unexpected is eventually going to happen. It is one of the reasons healthcare is never boring. You can arrive at work with a full schedule, a detailed plan, and every intention of having a productive day. Then life decides it has a different agenda. Sometimes it is a resident. Sometimes it is a family member. Sometimes it is a staffing issue. And every once in a while, it is a bird.

One morning in Pittsburgh, I arrived at the dementia care community where I worked and began my normal routine. The residents were waking up and making their way to breakfast. Staff members were helping people get ready for the day. Coffee was brewing. The televisions were beginning to come on. The building was slowly coming to life. It seemed like it was going to be a completely ordinary day. The activity calendar was ready. I had programs planned. Staff members were moving through their responsibilities. Everything felt normal.

Then someone spotted a bird.

At first, nobody thought much of it. People see birds all the time. The problem was that this bird was not outside the building where birds belong. This bird was inside. Somehow, during the early morning hours, it had found a way into the community. To this day, I have no idea how it got in. Maybe someone opened a door for a delivery. Maybe it slipped in while people were coming and going. Whatever happened, the bird had officially moved into our building.

The news spread quickly throughout the community. One staff member told another staff member. Residents started talking about it. Before long, everyone seemed to know there was a bird flying around the building. At first, I honestly thought someone was exaggerating. Healthcare communities are full of stories, rumors, and misunderstandings. Then I saw it for myself. Sure enough, there was a bird flying through the hallway.

The bird seemed completely comfortable. It flew from hallway to hallway, landed on light fixtures, perched on handrails, and explored the building as if it owned the place. Residents pointed at it. Staff members pointed at it. Everyone seemed fascinated by this unexpected visitor. The bird showed absolutely no signs of wanting to leave.

The residents loved it.

Many of our residents living with dementia were delighted by the surprise. Some smiled every time they saw it. Others pointed it out to friends. A few residents seemed convinced that the bird was part of a planned activity. One resident asked me if we had brought the bird in for entertainment. Another resident insisted that the bird had come to visit someone. A third resident

suggested we simply leave it alone because it seemed perfectly happy. Looking back, that may have been the bird's opinion as well.

Meanwhile, the staff was beginning to realize we had a problem. The bird needed to leave, but the bird had other plans. Every time someone got close, it flew away. Every time someone thought they had cornered it, it escaped. Every time someone developed a strategy, the bird changed locations. It was surprisingly intelligent. In fact, after watching us for a while, I became convinced that the bird was actually enjoying the situation.

Soon the entire building became invested in what was now being referred to as "the bird situation." Nurses were talking about it. Housekeeping was talking about it. Maintenance was talking about it. Residents were talking about it. Even family members arriving for visits were being updated on the latest bird sightings. I remember walking through the building and hearing people ask where the bird had last been seen. It felt less like a healthcare community and more like a wildlife tracking operation.

The funniest part was watching professionals from every department attempt to solve a problem none of us had been trained to handle. We knew how to respond to emergencies. We knew how to care for residents. We knew how to complete state surveys and follow regulations. What we did not know was how to conduct a bird rescue mission in the middle of a workday.

At one point, someone attempted to gently guide the bird toward an open door. The bird immediately flew in the opposite direction. Another staff member came up with what seemed like a brilliant plan. The bird disagreed. A maintenance employee carefully positioned himself near a hallway intersection, convinced he had the bird trapped. Seconds later, the bird casually flew over his head and continued its tour of the building.

The residents found all of this incredibly entertaining. I remember one resident laughing so hard that tears were coming down her face. She watched several staff members unsuccessfully attempt to catch the bird and finally announced that the bird was smarter than all of us combined. The more I watched the situation unfold, the harder it became to disagree with her.

As the hours passed, the bird became something of a celebrity. Residents wanted updates. Staff members reported sightings. Every few minutes someone would announce that the bird had been spotted in another area of the building. The bird visited dining rooms, activity spaces, hallways, and common areas. It seemed determined to inspect every square foot of the community before making a decision about leaving.

The reality is that in dementia care, unexpected moments like this can become powerful moments of engagement. For a brief period, everyone was focused on the same thing. Residents were engaged. Conversations were happening. People were smiling. People were laughing. There was a sense of excitement and connection throughout the building. No one could have planned that experience. It simply happened.

Eventually, a more organized plan was developed. Several staff members coordinated their efforts. Doors were opened. Hallways were monitored. People positioned themselves

strategically throughout the building. It felt less like bird removal and more like a military operation. Slowly and with far more effort than anyone expected, we managed to guide the bird toward an exit.

The bird paused for a moment near the open doorway. Everyone seemed to stop what they were doing. Staff members watched. Residents watched. We all held our breath. Then, as if it had finally decided its tour was complete, the bird flew outside.

The mission was finally over.

The residents applauded.

Staff members cheered.

The bird flew away.

And just like that, the excitement was over.

Looking back now, it seems like such a small event. It was just a bird. Yet after all these years, I still remember it. I do not remember what activity was scheduled that morning. I do not remember what paperwork I needed to complete. I do not remember what meetings I attended that day. What I remember is the bird. I remember the smiles on the residents' faces. I remember the laughter echoing through the hallways. I remember watching healthcare professionals chase a bird while residents provided commentary from the sidelines.

Most of all, I remember how one completely unexpected event brought an entire community together. Healthcare is full of moments like that. They are not listed on calendars. They are not included in care plans. They are not part of any training manual. Yet they become the stories that stay with us. Years later, when I think about my time working in dementia care in Pittsburgh, I think about the residents, the staff, the lessons, and yes, the bird that somehow got into the building and briefly became the most popular resident in the community.

The bird eventually flew away, but the story never did.

Chapter 14

The Bird That Fell Out of Bed

One of the most unusual coworkers I ever had was a bird. While working in a dementia care community in Pittsburgh, we had a bird that lived in one of the common areas. The bird was not officially part of the activity department, although some days it felt like it was. Residents enjoyed visiting it. Families stopped to look at it. Staff members greeted it as they passed by.

Like many things in long term care, it became part of the community and part of the daily routine.

Every evening, the staff would place a cover over the birdcage. Once the cage was covered, the bird would settle down and go to sleep. It was a simple routine that happened every night. The lights would dim, the cover would go over the cage, and the bird would quietly settle onto its perch. Everything worked perfectly at bedtime.

The problem was not bedtime. The problem was morning.

Every day I would arrive at work and begin my routine. Like many Activity Directors, I had developed a predictable pattern. I would walk into the building, greet staff members, check on residents, review the schedule, and start preparing for the day. As I moved through the building, I would pass the area where the bird lived.

Almost every morning the same thing happened. Someone would come through a nearby door. The door would slam shut. Then there would be a noise. A very distinct noise. The bird would fall off its perch.

Now before anyone gets concerned, the bird was perfectly fine. It simply startled awake. Apparently, being suddenly awakened by a slamming door was not the ideal way to start the morning. Every day I would hear the sequence of events unfold. First came the sound of the door. Then came the sound of the startled bird. It happened often enough that it became part of the morning routine.

At first, I thought it was a fluke. Surely this could not be happening every day. Then it happened again. And again. And again. Before long, I could predict it. I would hear the door and immediately think, "There goes the bird."

The funny thing was that other staff members noticed it too. Eventually, several of us would hear the sound and simply shake our heads. The bird had become the victim of what was essentially a daily alarm clock. I started feeling bad for it. Imagine being sound asleep every morning and suddenly being launched into consciousness by a slamming door. Most of us wake up slowly. We stretch. We rub our eyes. We get a cup of coffee. This bird went from deep sleep to full panic in a fraction of a second.

Residents occasionally noticed the situation as well. Some would laugh about it. Others would ask if the bird was okay. One resident joked that the bird needed a later wake-up time. Another suggested that the bird was simply not a morning person. The more I observed the situation, the more I realized the bird's location was the real problem. The cage was positioned near an area with a lot of foot traffic. Staff members were constantly moving through the door. Residents passed by throughout the day. Deliveries came through. The poor bird never really had a chance to enjoy a peaceful morning.

Eventually, it became obvious that something needed to change. The solution seemed simple enough. Move the bird. Of course, in a healthcare community, nothing is ever quite as simple as

it sounds. Changing the location of a birdcage somehow became a topic of discussion throughout the building. Residents wanted to know where the bird was going. Staff members offered opinions about the best location. Some residents worried the bird might not like its new home. Others seemed excited about the move.

The day finally arrived. The bird and its cage were carefully relocated to a quieter area of the building. The new location had less traffic, fewer slamming doors, and a much calmer environment. It seemed like a much better place for a bird to live.

The best part was what happened afterward. The morning crashes stopped. No more startled wake-ups. No more birds falling from perches. No more daily surprises. The bird finally got the peaceful mornings it deserved.

Looking back now, it seems like a small story. After all, it was just a bird. Yet healthcare has a way of teaching you that the small things matter. Whether you are caring for residents, families, coworkers, or even a bird, paying attention to the environment can make a difference.

As Activity Directors, we spend much of our careers trying to create spaces where people feel comfortable, engaged, and safe. Sometimes that means organizing activities. Sometimes it means planning events. Sometimes it means solving problems nobody else notices. And occasionally it means helping a bird get a better night's sleep.

The funny thing is that I do not remember what activities were scheduled during those weeks. I do not remember what paperwork I was working on. I do not remember what meetings I attended. What I remember is the bird. I remember hearing the door slam. I remember hearing the startled commotion that followed. I remember the laughter from residents and staff who knew exactly what had happened.

Most of all, I remember feeling oddly proud when the problem was solved. Healthcare is full of stories like that. They are not major events. They do not appear in annual reports. They are not the moments people expect you to remember years later. Yet somehow they stay with you. They remind you that caring often happens in the details. It happens when we notice something that is not working and take the time to make it better.

Years later, whenever I hear a door slam unexpectedly, I still think about that bird in Pittsburgh. I picture it peacefully sitting on its perch, enjoying a quiet morning without interruption. Of all the lessons I expected to learn during my career, helping a bird avoid a rude awakening was certainly not one of them. Then again, healthcare has always been full of surprises.

Chapter 15

The Day the World Stopped

There are certain days in life that become permanent markers in our memory. You may forget what happened the day before or the day after, but some days stay with you forever. September 11, 2001, is one of those days for me.

At the time, I was working as an Activity Director in a dementia care community in Pittsburgh. Like most mornings, I arrived at work and settled into my routine. I walked through the office door, greeted staff members, reviewed my schedule, and began preparing for the day. My office had a set of windows that allowed me to look into a television lounge where residents often gathered throughout the day. It was a normal morning, or at least it seemed that way.

As I sat down at my desk, I happened to look up toward the television. What I saw initially did not register. I remember thinking that a movie must be playing. The images on the screen seemed too unbelievable to be real. In fact, my first thought was that whatever was on television was probably not appropriate for my residents to be watching. The scenes looked like something from a disaster movie, not something happening in real life.

Then I noticed something unusual. Staff members were gathering around the television. More staff members kept arriving. People were standing still. No one was talking very much. That was when I realized something was wrong.

At that point, breakfast was still being served. Residents were eating. Morning routines were continuing. Yet the atmosphere in the building had suddenly changed. I still did not fully understand what was happening. I left my office and walked toward the dining room. What I noticed immediately was that there were very few staff members in the room. That was unusual. Healthcare workers are constantly moving, assisting, serving meals, helping residents, and managing responsibilities. Yet many of the staff members seemed to have disappeared. I called out, trying to get someone's attention.

A nurse came toward me. I will never forget the look on his face. He seemed frantic, concerned, and almost shocked. I asked him what was happening. He looked at me and said, "Something really bad is happening in New York City. The Trade Towers have been hit."

At that moment, everything became real.

I remember finding a television and watching the coverage. Like millions of Americans, I stood there trying to make sense of what I was seeing. The images seemed impossible. Every report brought new information. Every update seemed worse than the one before. The entire country appeared to stop.

Inside our building, life had to continue. Residents still needed care. Meals still needed to be served. Medications still needed to be passed. Activities still needed to be adjusted. Families began calling. Staff members worried about loved ones. Everyone was trying to process what was happening while continuing to do their jobs. That may be one of the things people outside of healthcare never fully realize. Even on days when history is unfolding, healthcare workers still have responsibilities. Residents still need support. Life inside the building keeps moving.

Throughout the day, meetings were held among staff members. Administrators worked to keep everyone informed and calm. People gathered whenever they could to watch the news. Conversations happened in hallways, offices, and break rooms. Nobody seemed quite sure what to say. The usual topics of conversation disappeared. Nobody was talking about schedules, paperwork, activities, or weekend plans. Every conversation centered around what was happening in New York, Washington, and across the country.

I remember wanting to go home. Not because I did not want to work. I simply wanted to be with my family. Like many people, I felt uncertain and uneasy. There was another reason I was especially worried. My sister lived in Queens, New York. As the reports continued throughout the day, I found myself thinking about her constantly. Cell phone service was unreliable. Communication was difficult. Information seemed incomplete. I knew she lived in New York, and that was enough to make me anxious.

The hours felt long. Very long. The television coverage continued. The conversations continued. The uncertainty continued. Every time someone received new information, people gathered around to hear it. Every news update seemed to create more questions than answers. The entire day felt surreal. It was as if the world everyone knew that morning had changed by lunchtime.

Eventually, my shift ended. I drove home carrying the weight of everything I had seen and heard that day. Like so many Americans, I was struggling to process it all. When I finally walked through my front door, I was greeted by my wife. I remember feeling an immediate sense of comfort. The world outside felt uncertain, but home felt safe.

We spent the evening watching coverage and talking about what had happened. Like everyone else, we tried to understand something that seemed impossible to understand. We watched the stories unfold. We listened to reporters. We heard accounts from survivors, first responders, and families. The magnitude of the tragedy became clearer with each passing hour.

Years have passed since that day, but the memories remain vivid. I can still picture the television in the lounge. I can still remember the look on the nurse's face. I can still feel the uncertainty that filled the building as staff members tried to care for residents while processing a national tragedy.

What stands out to me now is how people came together. Staff members supported one another. Families checked on loved ones. Communities rallied around each other. Even in the midst of fear and uncertainty, people found ways to care. As an Activity Director, I spent much of my career helping people stay connected. September 11 reminded me just how important those

connections are. When difficult moments arrive, people need each other. They need family. They need friends. They need coworkers. They need community.

The world changed that day. I know it changed me. More than two decades later, I still remember walking into work expecting an ordinary day and discovering that history had other plans. Some memories fade over time. This one never has.

September 11, 2001, was the day the world seemed to stop. Yet even in the middle of uncertainty, healthcare workers continued caring for people. Residents continued needing support. Families continued checking on one another. And somehow, through one of the most difficult days our country has ever experienced, people found ways to keep moving forward. That is what I remember most. Even when the world felt shaken, people continued caring for one another. In healthcare, that is what we do. And on that unforgettable day, it mattered more than ever

Chapter 16

The Accidental Preacher

If you spend enough time working in healthcare, you eventually discover that your job description is more of a suggestion than an actual set of rules. Most people think an Activity Director spends their day organizing games, planning parties, arranging outings, and keeping residents engaged. While that is certainly true, there are also dozens of responsibilities that somehow find their way onto your plate. One of mine became leading Sunday worship services.

I grew up as a preacher's kid. My parents spent years serving churches, and church life was simply part of our family's routine. I spent countless hours sitting in pews, listening to sermons, watching my parents prepare messages, and observing how churches operated. At the time, I never imagined those experiences would become useful in my career as an Activity Director.

Then one Sunday, the scheduled clergy person did not show up. In healthcare, this happens more often than people realize. Volunteers get sick. Schedules change. Cars break down. Emergencies happen. Unfortunately, residents who are expecting worship services do not stop expecting them simply because a volunteer cannot make it. Someone looked at me and said, "Jeremy, you're a preacher's kid. You can do it." That was apparently all the qualification required.

The funny thing is that I was not particularly confident at first. Standing in front of a room of residents and leading a worship service felt very different from sitting in a church pew. I remember feeling nervous. My palms were sweaty. My voice probably shook. I worried about saying the wrong thing. I worried about forgetting what I wanted to say. Mostly, I worried about being compared to actual clergy. The residents, however, did not seem concerned. They were simply happy someone was willing to lead the service.

Over time, these opportunities happened more frequently. Whenever a volunteer could not make it or a clergy person canceled, people would start looking in my direction. Eventually, I became the backup plan. Then I became the backup plan's backup plan. Before long, I was leading services regularly.

As the years passed, my confidence began to grow. I became more comfortable standing in front of groups. I learned how to organize a service. I learned how to keep people engaged. Most importantly, I learned a valuable secret. My parents had old sermons. Lots of old sermons. Boxes of old sermons. Years and years of old sermons. Whenever I needed inspiration, I would call my parents and ask if they had something that might work. They always seemed to have exactly what I needed. Looking back, I may have been running one of the most successful sermon recycling programs in western Pennsylvania.

The residents loved it. The staff loved it. Family members were impressed. People would often comment on how comfortable I seemed leading services. Little did they know that years of sitting in church and having access to my parents' sermon collection had given me a significant advantage. At one point, I think some people began assuming I had attended seminary. I had not. I was simply a preacher's kid with access to good material.

Years later, my career took me from Pittsburgh to Philadelphia. I accepted a position in a large retirement community and quickly discovered that Sundays looked very different there. Activity Directors were often expected to work weekends because that was when many family members visited. The goal was to keep the community active, welcoming, and engaging for both residents and visitors.

The building where I worked did not have a reliable group of volunteers available every Sunday. Before long, worship services once again became part of my responsibilities. This time, however, I was much more comfortable. The nervous young Activity Director from Pittsburgh had disappeared. Now I had experience. Now I had confidence. Now I had what felt like an endless library of sermon material.

Sunday services started running like clockwork. Residents knew where to go. Staff knew what to expect. Family members often joined us. Some Sundays felt less like an activity program and more like a small church gathering. I genuinely enjoyed it. There was something meaningful about creating a space where residents could continue practicing a part of their faith tradition. Many of them had attended church their entire lives. Helping them maintain that connection felt important.

Of course, there were still humorous moments. Microphones occasionally stopped working. Residents occasionally fell asleep during the sermon. Some residents sang enthusiastically in keys that had never been discovered by musicians. Every once in a while, I would find myself wondering how an Activity Director from Pittsburgh had somehow become responsible for Sunday worship. Then there were the times when family members would compliment the service and ask where I had received my training. I always smiled because the answer was simple. I had spent years sitting in church listening to my parents and borrowing from their experience whenever I needed help.

One of the things I learned was that residents were not looking for perfection. They were looking for connection. They wanted familiar hymns. They wanted encouraging messages. They wanted an opportunity to gather together. Most importantly, they wanted someone willing to show up. Looking back, that is probably why the services worked. They were not about putting on a performance. They were about creating a meaningful experience.

What began as an emergency backup plan eventually became one of the most rewarding parts of my career. I never became a pastor. I never attended seminary. I never led a congregation every week. But for many years, whenever a volunteer failed to arrive or a clergy person canceled at the last minute, the preacher's kid stepped up.

Looking back now, I realize those services taught me many of the same lessons that activities taught me. People want connection. They want meaning. They want community. Whether through bingo, exercise groups, outings, parties, or worship services, my job was always about bringing people together. The methods changed, but the purpose remained the same.

It is funny how life works. Growing up, I never imagined that sitting through all those church services would become part of my professional toolkit. Yet years later, those experiences helped me serve hundreds of residents who simply wanted a place to worship on a Sunday morning. Sometimes the skills we need later in life are being developed long before we realize it.

The preacher's kid never expected to become the substitute preacher. But somehow, whenever the moment called for it, it always seemed to work out.

Chapter 17

Ralph Versus Bingo

This book is called *The Bingo Wars*, so it only seems fitting that one of the most memorable bingo stories of my career would involve a resident named Ralph.

I was working in a memory care community in Philadelphia. It was a fairly quiet afternoon, the kind of afternoon Activity Directors appreciate. The residents were gathered in a circle, the bingo cards were handed out, and my bingo numbers were set up on a rolling cart in front of me. Everything was ready to go. Residents were focused on their cards. Staff members were nearby. It looked like it was going to be a perfectly ordinary game of bingo.

Then there was Ralph.

Ralph was a small man with a huge personality. He loved music, especially the Rat Pack. If Frank Sinatra, Dean Martin, or Sammy Davis Jr. was playing, Ralph was happy. He could croon

along with the songs and knew many of the lyrics by heart. He was funny, charming, and often the source of entertainment without even trying. There was just one problem. Ralph hated bingo.

Now, not everyone loves bingo, and that is perfectly fine. In my career I met plenty of residents who preferred cards, music, exercise groups, discussions, or simply sitting with friends. Ralph, however, seemed to have a special dislike for bingo. To be honest, there were days when I was not entirely sure he liked me either.

One afternoon I was minding my own business, calling numbers as usual. The residents were marking their cards and everything was peaceful. Then suddenly, out of nowhere, Ralph charged.

I looked up and saw him moving directly toward me. Before I could fully process what was happening, he was headed straight for my bingo cart. The staff reacted quickly and intercepted him before he reached me. Had they not stepped in, I am fairly certain Ralph would have launched himself right over the cart. The entire room froze. Residents stopped marking their cards. Staff members moved into action. And there I stood holding a bingo microphone wondering what had just happened.

The funny thing was that nobody really knew. There was no obvious trigger. There had been no argument. No disagreement. No conflict. One moment I was calling bingo numbers and the next moment Ralph had apparently decided the game needed a dramatic ending.

Afterward, everyone settled down and life returned to normal. In memory care, unusual moments happen. Staff redirected Ralph and continued helping residents enjoy the afternoon. Still, it became clear that we needed a different plan when bingo was being played.

The solution seemed simple enough. Whenever bingo was taking place, Ralph would spend time in another area. Problem solved. At least that was what we thought.

The following week bingo rolled around again. Residents gathered. Cards were handed out. Numbers were ready to be called. Staff members made sure Ralph was spending time elsewhere in the community. Everything appeared to be under control.

There was only one detail nobody considered. The bingo game that day was being led by another Activity Assistant.

Apparently, Ralph did not care who was calling the numbers. He only cared that bingo existed.

Not long after the game began, word spread through the building. Ralph was on the move. Somehow, he had discovered that bingo was taking place. Before anyone could stop him, he headed directly toward the activity area. The poor Activity Assistant had no idea what was coming. One moment she was peacefully calling numbers. The next moment Ralph was making his way toward her with the same determination he had shown the week before.

Staff members stepped in once again before anything happened, but by then the mystery had deepened. It was not me. It was not personal. It was bingo.

For reasons nobody ever fully understood, Ralph had declared war on bingo.

Over the years I have worked with thousands of residents. I have seen people love bingo. I have seen people tolerate bingo. I have seen people sleep through bingo. I have seen people become fiercely competitive during bingo. Ralph remains the only person I ever met who appeared to treat bingo as a personal enemy.

The thing about memory care is that not everything has a clear explanation. Sometimes behaviors make sense. Sometimes they are connected to memories, emotions, or experiences. And sometimes you simply never know why something happened. Ralph never provided an explanation. There was no dramatic confession. There was no moment when he sat down and explained his position on bingo.

The mystery remains unsolved.

What I remember most now is not the disruption. It is Ralph himself. I remember his sense of humor. I remember him singing Rat Pack songs. I remember his personality. I remember how he could make an ordinary day unforgettable without even trying. Like many residents I have known over the years, Ralph had a way of making sure people remembered him.

Years later, when people ask me about memorable residents, Ralph is one of the first people who comes to mind. Not because of a care plan. Not because of a diagnosis. Not because of a difficult moment. I remember him because he was uniquely himself.

Healthcare is full of people like that. They leave footprints on your memory. Long after you forget schedules, paperwork, meetings, and daily routines, you remember the people. You remember their stories. You remember their personalities. You remember the moments that made you laugh.

And whenever I sit down to call a game of bingo, I occasionally think about Ralph. Somewhere deep in my memory, I can still see him charging toward that bingo cart with determination in his eyes. To this day, I have no idea what bingo ever did to him. But whatever it was, Ralph never forgave it.

Of all the bingo games I have led throughout my career, and there have been thousands of them, Ralph's reaction remains one of the most unforgettable. Most residents wanted to win bingo. Ralph seemed determined to defeat it. In a book called *The Bingo Wars*, I suppose every war needs its most determined opponent. For me, that opponent was Ralph.

Chapter 18

Welcome to the Villages

After spending years working in healthcare in Pittsburgh and Philadelphia, I eventually made a big decision. I packed up my belongings, left Pennsylvania behind, and moved to Florida. Like many people before me, I was heading south. Unlike most people, however, I was not retiring. I was moving to continue my career in senior living.

Not long after arriving, I accepted a position as an Activity Assistant in The Villages, Florida. For those who have never heard of The Villages, it is often called the capital of retirement living. It is a place unlike any other. There are golf carts everywhere. There are clubs for nearly every hobby imaginable. There are activities happening every day. If you can think of an interest, there is probably a group dedicated to it.

I was excited about my new job, but I quickly realized I had a lot to learn. Pennsylvania retirement communities had their own culture. Florida retirement communities had theirs. The Villages seemed to operate in an entirely different universe.

The funny thing is that I learned this lesson on my second day of work.

Most people spend their first few weeks learning policies, procedures, schedules, and names. I learned about The Villages by driving behind belly dancers.

There was a holiday golf cart parade taking place in one of the town squares. It was Thanksgiving season, and the entire community was celebrating. Residents and staff were preparing decorated golf carts for the event. The carts were covered in holiday decorations. There were lights, ribbons, garland, pumpkins, holiday signs, and enough festive spirit to power a small city.

As part of my job, I helped load residents onto golf carts and prepare them for the parade. We decorated the carts. We decorated the residents. We made sure everyone was comfortable and ready to participate. The excitement was contagious. Residents were smiling. Staff members were laughing. Everyone seemed eager to be part of the celebration.

I remember thinking how unique the entire experience felt. In Pennsylvania, I had organized bus trips, parties, concerts, and special events. Now I was preparing residents for a golf cart parade. Welcome to Florida.

When the parade finally began, I climbed into my assigned golf cart and got ready to drive. Residents waved to spectators. Music played throughout the square. Clubs and organizations lined up one after another. It felt like the entire community had come together to celebrate.

Then I noticed who was directly in front of us.

The Village Belly Dancers.

Now, I had only been employed there for two days.

Two days.

I was still learning names.

I was still figuring out where things were located.

I was still trying to understand the culture.

And suddenly, I found myself driving a golf cart full of residents directly behind a group of belly dancers.

As the parade moved through the square, the dancers performed for the crowd. Spectators cheered. Residents smiled. People waved. Meanwhile, I sat behind the wheel trying to process the fact that this was apparently a normal day in The Villages.

I remember laughing to myself because the situation perfectly captured everything I was beginning to learn about Florida retirement living. The Villages was active. The Villages was energetic. The Villages was full of surprises.

Most importantly, retirement did not look anything like I thought it would.

Back in Pennsylvania, many people imagined retirement as slowing down. In The Villages, people seemed determined to stay busy every minute of the day. They played sports. They joined clubs. They performed in shows. They attended events. They participated in parades. And apparently, they joined belly dancing groups.

As the parade continued, I found myself looking around at all the different organizations participating. There were clubs I had never heard of. Groups dedicated to hobbies I did not know existed. Volunteers. Entertainers. Performers. Community organizations. The sheer variety of opportunities amazed me.

The residents riding with me seemed completely unfazed by any of it.

To them, this was normal.

To me, it felt like I had entered an entirely new world.

That parade became my unofficial orientation to life in Florida. Nobody sat me down and explained the culture. Nobody handed me a manual. Instead, I learned by participating. I learned by observing. I learned by realizing that retirement communities could be vibrant, active, and full of life.

The belly dancers simply happened to be my first lesson.

Years later, I still smile when I think about that afternoon. Whenever people ask me what it was like moving from Philadelphia to Florida, that parade is one of the first stories that comes to mind. It perfectly captures the surprise, humor, and adjustment that came with relocating to a completely different environment.

The funny thing is that after spending enough time in Florida, I stopped being surprised by things like golf cart parades and belly dancing clubs. They became part of everyday life. But on that second day, everything felt new.

Looking back now, I realize that parade taught me something important. No matter how long you work in healthcare, there is always something new to learn. Every community has its own personality. Every group of residents has its own culture. Every location has its own traditions.

Sometimes those traditions involve bingo.

Sometimes they involve golf carts.

And sometimes, if you are lucky enough to work in The Villages, they involve spending your second day on the job driving behind a group of belly dancers while wondering what adventure might come next.

Chapter 19

The Glitter Incident

Early in my career, I learned a lesson that every Activity Director eventually discovers. Certain supplies should be treated with caution. Scissors are one. Permanent markers are another. And near the very top of the list is glitter.

At the time, however, I did not know this. I was still fairly new to the profession and was full of enthusiasm. I loved coming up with creative ideas. I wanted activities to be fun, colorful, and memorable. One day I decided to lead an art group that involved construction paper, Elmer's glue, and glitter. Looking back now, this combination should probably have required a permit and a risk assessment.

The idea seemed wonderful. Residents would create designs using glue and then sprinkle glitter over the glue to make beautiful artwork. It sounded simple. It sounded creative. It sounded like something people would enjoy. What could go wrong?

Everything.

The project started well enough. Residents were seated around tables. Everyone had supplies. The glue was flowing. People were smiling. The room was filled with conversation and creativity. As an Activity Director, these are the moments you hope for. Residents were engaged, socializing, and enjoying themselves. I stood back feeling pretty proud of myself. The activity was a success. Or so I thought.

Then the glitter came out.

If you have never opened multiple containers of glitter in a room full of people, let me paint the picture for you. Glitter does not stay where you put it. Glitter has its own agenda. Glitter ignores instructions. Glitter travels. Within minutes, there was glitter on the tables. Then there was glitter on the floor. Then there was glitter on the chairs. Then there was glitter on the residents. Then there was glitter on me. Somehow, there was even glitter in places that had never been near the activity.

I watched in horror as tiny sparkles spread across the room like a highly decorative natural disaster. At first, I tried to stay optimistic. Surely it would not be that difficult to clean up. Surely we could handle a little glitter. I was wrong. Very wrong.

When the activity ended, the room looked as though a craft store had exploded. The tables were covered in glitter. The floor sparkled. The chairs sparkled. Everything sparkled. Then housekeeping arrived.

I will never forget the look.

There are moments in life when someone does not need to say a word because their facial expression communicates everything. This was one of those moments. The housekeeper slowly surveyed the room. Her eyes moved from the floor to the tables and back again. Then she looked directly at me. Without saying much, she handed me a vacuum cleaner and walked away.

The message was clear.

This was my problem.

As I began cleaning, I discovered something important about glitter. It does not leave. At least not easily. You vacuum it. Some remains. You wipe it. More appears. You think you have cleaned everything. Then sunlight comes through a window and reveals another thousand pieces sparkling at you. For days afterward, I kept finding glitter. Every time I thought it was gone, I would discover more.

Residents would point it out. Staff would point it out. Housekeeping would definitely point it out.

Then I realized an even bigger problem. The residents had not been wearing activity aprons. The glitter was on their clothes. At first, I did not think much about it. Then I imagined family members doing laundry at home. Have you ever accidentally washed something covered in

glitter? The glitter does not stay on one piece of clothing. It spreads. Suddenly everything in the wash has glitter on it.

I can only imagine the surprise of family members opening dryers and finding sparkles on clothing that had never been near the activity room. Somewhere out there were family members probably wondering why their entire laundry load looked ready for a holiday parade.

The following days were filled with good natured teasing. Residents would see me coming and ask if we were using glitter again. Staff members would joke about checking their shoes before leaving work. Housekeeping never let me forget it. Years later, I still think they were finding glitter.

The funny thing is that despite the disaster, everyone enjoyed the activity. Residents had fun. They laughed. They created artwork they were proud of. The project accomplished exactly what it was supposed to accomplish. The only issue was that it also decorated half the building.

As Activity Directors, we learn many lessons through experience. Some lessons come from successful programs. Others come from mistakes. This lesson came from a bottle of glitter and a misplaced sense of confidence.

Looking back now, I laugh about it. At the time, however, I was convinced I would spend the rest of my career vacuuming. The experience taught me something important. Sometimes the activities that create the biggest mess also create the best memories. Residents did not remember the cleanup. They remembered the fun. They remembered creating something together. They remembered laughing.

I, on the other hand, remembered the cleanup.

To this day, whenever a new Activity Director tells me they are planning a glitter project, I smile and wish them luck. Then I quietly suggest activity aprons, extra table coverings, and a very good relationship with housekeeping. Because once glitter enters a building, it never truly leaves. It simply becomes part of the decor.

And somewhere deep in my memory, there is still a housekeeping employee handing me a vacuum cleaner and silently reminding me that every action has consequences. Even today, if I see a bottle of glitter sitting on a craft shelf, I become a little nervous. Some people see creativity. I see flashbacks. I see vacuum cleaners. I see housekeeping staff shaking their heads. Most of all, I see one young Activity Director learning a lesson not to be forgotten.

Glitter may be small, but its impact can be mighty.

Chapter 20

The One I Wish I Could Have Cloned

If you spend enough years working in healthcare, you eventually discover that finding great employees is just as rewarding as creating great activities. Every Activity Director knows that the success of a department is never about one person. It is about having people around you who genuinely care, work hard, and make everyone better. Every once in a while, someone comes along who makes you think, "If only I could clone this person."

I had the privilege of hiring someone just like that.

At the time, I was serving as an Activity Director, and we were looking for an Activity Assistant. Finding the right person was not always easy. The job required creativity, patience, flexibility, compassion, organization, and a willingness to jump into almost any situation. Some people loved the idea of the position until they discovered everything that was actually involved. It was much more than playing bingo and leading crafts.

My administrator had previously worked with individuals with developmental disabilities and encouraged me to interview an applicant she believed would be a wonderful fit. I trusted her judgment, and I decided to give the applicant an opportunity.

It turned out to be one of the best hiring decisions I ever made.

From the very beginning, she stood out. She was always on time. She followed directions. She came to work ready to help. If I asked her to do something, I never had to wonder whether it would get done. It simply happened. As an Activity Director, that kind of reliability is priceless.

The more we worked together, the more I appreciated everything she brought to the department. She treated residents with kindness and respect. She learned quickly. She worked hard without looking for recognition. She was dependable on busy days, stressful days, and the ordinary days in between. Every department dreams of having someone like that on the team.

There were many mornings when I found myself thinking the same thing.

"I wish I could clone her."

If I could have made five more employees exactly like her, I probably would have done it without hesitation.

Healthcare can be unpredictable. Schedules change. Emergencies happen. Plans fall apart. Having someone beside you who remains calm, dependable, and willing to help makes an incredible difference. She became the kind of coworker every Activity Director hopes to find.

Our residents benefited because of her dedication. They knew they could count on her. Families appreciated her kindness. Staff members enjoyed working with her. She became an important part of our department, and our programs were stronger because she was there.

Looking back, I realize she also reminded me of an important leadership lesson. Sometimes people simply need someone willing to believe in them. My administrator believed she deserved an opportunity. I am grateful I listened. Had I ignored that advice, I would have missed the chance to work alongside one of the finest Activity Assistants I have ever known.

Too often, we measure success by awards, budgets, or large events. Those things certainly matter, but some of the greatest successes happen quietly. They happen when the right person joins the team. They happen when trust develops. They happen when coworkers make each other better.

I only worked with her for about a year before moving on to another opportunity, but that year left a lasting impression on me. I have often wondered where life took her and hope she continued working in healthcare because she had a remarkable gift for it. Residents deserved someone like her, and any department fortunate enough to have her would have been better because of it.

As I look back over my career, I have planned hundreds of events, organized thousands of activities, and worked with countless residents. Yet one of the accomplishments I am most proud of has nothing to do with an activity at all. It was hiring someone who made the department stronger simply by showing up each day with a positive attitude and a willingness to serve.

Every leader hopes to leave behind something meaningful. Sometimes that legacy is not found in a program or an event. Sometimes it is found in the people you choose to invest in.

And if anyone ever invents a machine that can clone outstanding Activity Assistants, I already know the first person I would put in line.

Chapter 21

The Most Wonderful Time of the Year

Don't get me wrong. I absolutely love the holidays. Thanksgiving and Christmas have always been my favorite time of the year. I love the decorations, the music, the lights, the family traditions, and everything that comes with the season. But if you are an Activity Director, the holidays become something completely different. They are still wonderful, but they are also mentally exhausting, physically demanding, and sometimes just plain overwhelming.

For most people, the holiday season begins when they start hearing Christmas music on the radio or when they pull decorations out of the attic. For an Activity Director, the season starts about a week before Thanksgiving and doesn't truly end until a week after Christmas. By then, everyone else is relaxing with leftovers while you're wondering how you're going to pack away three dozen boxes of decorations.

The activities department is expected to create the holiday spirit for the entire community. Residents look forward to it. Families expect it. Staff members have ideas about it. Administrators have expectations about it. Somehow, the little office occupied by the activity department becomes the North Pole.

If you had walked into my office during the holidays, you probably would have wondered how I ever found anything. One corner was stacked with Christmas trees waiting to be assembled. Another corner was filled with lights that somehow became tangled overnight. There were boxes of ornaments, rolls of wrapping paper, bows, ribbons, wreaths, garland, extension cords, tape, scissors, glue guns, and enough holiday supplies to decorate a shopping mall. Somewhere in the middle of all that chaos was my desk, although finding it was sometimes part of the adventure.

Then there was the Santa suit.

Every Activity Director knows exactly what I'm talking about. At some point during December, someone always asks, "Who's going to be Santa?" Before long, that red suit is hanging in the office waiting for its annual appearance. If no volunteer steps forward, everyone starts looking at the Activity Director. Apparently, the job description includes "other duties as assigned," and somewhere in the fine print it says, "May occasionally become Santa Claus."

The decorating never seemed to end. Every hallway needed to feel festive. Every dining room needed centerpieces. Every bulletin board needed a holiday theme. Then came the annual decorating contests. One year it was Christmas trees. Another year it was wreaths. My personal favorite was wrapping office and resident doors with Christmas paper and decorating them for a contest.

If you have never wrapped a door with wrapping paper, let me assure you that it is much harder than it looks. Doors have handles, hinges, windows, and people who insist on opening them while you're trying to tape everything into place. More than once I watched hours of careful decorating come crashing down because someone simply wanted to walk through the door.

After enough years, I became surprisingly good at it. In fact, people started asking me for advice. Some even wanted me to decorate their doors for them. I suppose that is one of the unexpected skills you develop as an Activity Director. It is not listed in any college textbook, but somehow you become an expert at wrapping doors.

Then there was the music.

Oh, the music.

Now, I love Christmas music. I really do. But there is a difference between listening to "Jingle Bells" while shopping and leading "Jingle Bells" for the fifteenth time in two weeks. Residents loved singing Christmas carols, and I loved singing with them. The problem was that by the time I got home in the evening, I had already sung every Christmas song ever written.

Friends would invite me to holiday gatherings and excitedly announce, "Let's sing Christmas carols!"

Inside my head, I was quietly thinking, "Can we maybe sing something from July?"

Of course, I smiled and sang along anyway.

Holiday parties became their own production. There were cookie exchanges, tree lighting ceremonies, choir performances, visits from school children, visits from Santa, family dinners, employee celebrations, resident celebrations, New Year's parties, and enough special events to fill an entire calendar. Every event required planning, decorating, supplies, volunteers, setup, cleanup, and about a hundred little details that no one ever noticed unless something went wrong.

The funny thing is that people often assumed these events just happened naturally. Residents would walk into a beautifully decorated dining room, enjoy the music, eat the food, and head back to their apartments. They never saw the hours spent moving tables, hanging decorations, testing microphones, arranging centerpieces, or trying to untangle one more string of Christmas lights that had somehow tied itself into a knot over the past year.

Then, just when you think you've reached the finish line, Christmas ends.

Suddenly, everything has to come down.

Every ornament.

Every wreath.

Every strand of lights.

Every tree.

Every decoration.

The same office that had looked like Santa's workshop now looked like a shipping warehouse. Boxes had to be packed. Decorations had to be labeled. Lights had to be wrapped. Somehow, every decoration that fit neatly into a box the year before suddenly refused to fit back inside.

And then something else happened.

The building became quiet.

Really quiet.

For weeks, every hallway had been filled with lights, music, decorations, visitors, parties, and excitement. Then, almost overnight, it was all gone. The walls looked bare. The bulletin boards looked empty. The Christmas trees disappeared. The music stopped. It almost felt like the building had taken a deep breath after weeks of nonstop celebration.

That was always the hardest part for me. I loved the holidays so much that the quiet afterward almost felt like a letdown. Then I would open the activity calendar for January and realize that after Christmas comes...well...January.

Let's just say January does not have quite the same energy as December.

Looking back now, I realize the holidays taught me an important lesson about caring for myself. I had to learn that I could not pour everything I had into making the season magical for everyone else without taking care of myself too. Sometimes that meant sitting quietly in my office for a few minutes before the next event. Sometimes it meant taking a deep breath after hanging the hundredth decoration. Sometimes it simply meant reminding myself that perfection was not the goal. Joy was.

I still love the holidays. I probably always will. Even after all the decorating, all the planning, all the singing, and all the chaos, Thanksgiving and Christmas remain my favorite time of the year. They remind me why I loved being an Activity Director. They brought people together. They created memories. They filled buildings with laughter and hope.

And every time I hear "Jingle Bells," I still smile.

I just don't necessarily need to hear it fifteen times in one day.

Chapter 22

I Know What You Do

One of the greatest lessons I have learned during my career is that the people responsible for creating fun are often working the hardest. When everyone else is laughing, celebrating, and enjoying the moment, someone behind the scenes has been planning, organizing, setting up, solving problems, and making sure everything runs smoothly. Most people never see that part of the job. They simply enjoy the finished product.

I was reminded of this lesson during a vacation with my wife. We were on a cruise, enjoying a few days away from work. Like many people, I was impressed by everything happening on board. There were games by the pool, trivia contests, dance parties, comedy shows,

announcements, performances, and activities happening from morning until late at night. Everywhere you looked, someone was making sure guests were having a good time.

One afternoon I happened to see one of the cruise directors walking through the ship. She was smiling, greeting guests, answering questions, and making people feel welcome. She looked energetic and enthusiastic, just as you would expect someone in that role to look. Most passengers probably assumed she was having as much fun as everyone else.

I knew better.

As she walked by, I stopped her for just a moment. I smiled and said, "Take a minute and relax. I'm an Activity Director too."

She looked at me with a surprised expression.

Then she smiled.

It was not the polite smile she had probably given hundreds of guests that day. It was the smile of someone who suddenly realized the person standing in front of her actually understood what her day looked like. For just a brief moment, we spoke the same language.

I knew what her morning had probably been like. She had likely been up before most of the passengers. She had attended planning meetings, coordinated staff, checked schedules, handled last minute changes, answered questions, solved problems, and somehow still found the energy to stand in front of hundreds of people with a smile on her face.

That is what Activity Directors do.

Whether you work on a cruise ship, in a retirement community, an assisted living community, a nursing home, or anywhere else that brings people together, your job is to create experiences. The challenge is that people usually only see the experience itself. They rarely see everything that happened before it.

They do not see you setting up tables before sunrise.

They do not see you carrying boxes of supplies.

They do not see you testing microphones that refuse to cooperate.

They do not see you changing an entire day's schedule because an entertainer canceled at the last minute.

They simply arrive, have fun, and go home.

That is exactly how it should be.

The best Activity Directors make difficult work look effortless.

As we continued talking, I could almost see the relief on her face. We did not need a long conversation. We did not need to exchange career stories. We simply shared a quiet understanding that people in our profession rarely have to explain to one another.

We both knew what it meant to be "on" all day.

We both knew what it meant to smile even when we were tired.

We both knew what it meant to solve problems without letting anyone else know there had been a problem in the first place.

We both knew that while everyone else was relaxing, we were working to make relaxation possible.

It reminded me that Activity Directors are found in many different places. Some work in senior living communities. Some work with children. Some work in hospitals. Some work in resorts. Some work on cruise ships. The locations may be different, but the heart of the job is remarkably similar.

We create moments.

We create memories.

We create connection.

When guests remember an amazing vacation, they usually remember the fun. When residents remember a wonderful community, they remember the activities. When families remember a special event, they remember the smiles. Behind every one of those moments is someone who spent countless hours making it happen.

As I walked away from that conversation, I thought about all the Activity Directors I had worked beside throughout my career. I thought about the early mornings, the late nights, the weekends, the holidays, the last minute changes, and the countless details that nobody ever noticed. Those details were invisible to most people, but they were the reason everything appeared to run so smoothly.

I have often said that being an Activity Director is one of the most rewarding jobs in healthcare. It is also one of the most misunderstood. People sometimes think we simply play games all day. In reality, we plan, organize, coordinate, encourage, motivate, comfort, entertain, decorate, transport, solve problems, and somehow still find the energy to smile.

That brief conversation on the cruise ship lasted less than a minute, but it has stayed with me for years. It reminded me that there is a special bond between people who dedicate their careers to

creating joy for others. We may never work in the same building. We may never meet again. But we recognize each other almost instantly.

Sometimes all it takes is one sentence.

"I know what you do."

Sometimes the greatest encouragement we can offer another person is simply letting them know that someone sees their work, understands their effort, and appreciates everything they do behind the scenes. That day on the cruise ship, I hope I gave the cruise director that reminder.

The truth is, she gave me one too.

Chapter 23

The Super Team

Every Activity Director dreams of having the perfect assistant. Someone who understands the job before you have to explain it. Someone who can see a problem coming before it happens. Someone who knows how to throw a great party, keep residents smiling, and somehow remain calm when everything around them seems to be falling apart. During my years in Philadelphia, I had the opportunity to work with exactly that kind of person.

She had spent years as an Activity Director herself before joining our department as an Activity Assistant. That meant I never had to explain why details mattered. She already knew. She understood what it took to plan large events, coordinate volunteers, decorate rooms, calm nervous residents, and somehow smile through the chaos. From the first day we worked together, I knew we were going to make a great team. In fact, I often referred to us as the Super Team.

I was working in a large retirement community outside Philadelphia where expectations were always high. Residents expected memorable events. Families expected impressive celebrations. Administration expected every holiday and special occasion to be bigger and better than the last. There was never a shortage of ideas. There was simply a shortage of time. Having someone with years of experience beside me made all the difference. We trusted each other completely. I knew she would take care of the details, and she knew I would make sure the overall plan came together. We rarely had to explain things to each other because we were usually thinking the same way.

One of the biggest events during my time there came when the Philadelphia Eagles made an exciting playoff run. If you have never lived in the Philadelphia area during football season, it is difficult to describe the excitement. Eagles fans are passionate. Very passionate. The closer the team came to the Super Bowl, the more excitement filled the community. Our residents followed every game. Staff members wore Eagles gear. Families talked football during visits. Everywhere you went, people were saying the same thing. "Go Birds."

Administration wanted us to create a celebration worthy of the moment. This was not going to be a simple gathering with coffee and cookies. They wanted decorations. They wanted themed refreshments. They wanted excitement. They wanted a party our residents would never forget. Fortunately, I had the right partner. While I handled much of the planning, scheduling, paperwork, and coordination, my assistant worked her magic. She had an incredible eye for decorating and knew exactly how to transform ordinary spaces into festive celebrations. We divided responsibilities without ever really discussing them. We simply understood how each other worked.

The day of the playoff celebration finally arrived. The room looked incredible. Green decorations were everywhere. Balloons filled the room. Tables were decorated. Residents proudly wore Eagles shirts, hats, scarves, and anything else they could find in midnight green. The refreshments matched the theme perfectly. We had cakes decorated with Eagles colors. Cookies covered with green icing. Green punch. Green napkins. Green tablecloths. If something could be green, it probably was. Residents absolutely loved it. The party was full of laughter, cheering, football stories, and friendly predictions about the upcoming game. Looking around the room, you would never have guessed how many hours had gone into making everything happen.

That is the funny thing about being an Activity Director. If you do your job well, nobody notices the work. They simply enjoy the experience. By the time everything was cleaned up and put away, I was exhausted. That evening I went home, turned on the Eagles game, sat down in my favorite chair, and promptly fell asleep. I had spent so much energy getting everyone else ready for the game that I missed part of it myself.

Then came the biggest challenge of all. The Eagles were going to the Super Bowl. If you thought the playoff party had high expectations, the Super Bowl celebration was on an entirely different level. Suddenly everyone had ideas. Everyone had suggestions. Everyone had expectations. Administration wanted an unforgettable event. Residents were counting the days. Families were excited. The pressure was on. My assistant and I looked at each other and knew exactly what needed to happen. It was time to go back to work.

Once again, we transformed the community into Eagles headquarters. Decorations covered every available surface. More cakes were ordered. More cookies were decorated. More green drinks appeared. Football decorations filled the room. Music played. Residents talked football all afternoon. It felt less like a retirement community and more like Lincoln Financial Field. The party was a tremendous success. Residents had a wonderful time. Families enjoyed themselves. Administration was pleased. No one noticed the little problems that happened behind the scenes because my assistant and I quietly solved them before anyone else knew they existed. That is what great teams do.

Of course, there was one final detail. The Super Bowl itself. We had planned a pizza party for residents who wanted to stay together and watch the game. The assumption was that staff would be available to supervise the gathering while I finally enjoyed watching the game from home. Then reality arrived. It was Super Bowl Sunday in Philadelphia. Suddenly, people started calling off work. Quite a few people. Apparently, everyone had come down with a very convenient case of Eagles Fever.

Before long, it became obvious that there would not be enough staff to supervise the pizza party. As the Activity Director, the responsibility fell to me. My assistant had already worked beyond her scheduled hours preparing for the celebration, so asking her to stay even longer was simply not fair. So there I was watching one of the biggest football games in Philadelphia history, not from my living room, not with family, and not on my own couch. Instead, I was sitting in the television lounge surrounded by residents, making sure everyone had pizza, drinks, and a wonderful time.

You know what? It turned out to be pretty special. The residents cheered together. They celebrated together. They laughed together. For many of them, this became one of their favorite memories of living in our community. Watching their excitement reminded me why I chose this profession in the first place. Yes, I would have enjoyed being at home. Yes, I would have liked my own pizza and my own recliner. But there was something meaningful about helping residents experience such an exciting moment together.

The next morning we gathered for our daily stand up meeting. Everyone was talking about where they had watched the game, who they were with, what they had eaten, and how much fun they had. When it was my turn, I smiled and said, "I watched it with the residents." That was true. Would I have enjoyed sitting on my own couch with my own pizza? Absolutely. Would I change what happened? Not anymore.

Looking back, I realize those moments perfectly captured what it means to be an Activity Director. We work weekends. We work holidays. We work when everyone else is celebrating because our job is to help create those celebrations for others. I am not sharing this story because I want sympathy. I chose this profession because I loved it. I am sharing it because so much of what Activity Directors do happens quietly behind the scenes. People see the decorations, the parties, the music, and the smiles. They rarely see the planning meetings, the setup, the cleanup, the long hours, or the sacrifices that make those moments possible.

Every successful event I ever planned was the result of teamwork. During that unforgettable Eagles season, I was fortunate to have one of the best teammates an Activity Director could ever ask for. Together we created memories our residents never forgot. Looking back, I still think we made quite the Super Team. Even today, when I think about that Super Bowl season, I do not remember the stress nearly as much as I remember the teamwork. Great events come and go, but great teammates leave a lasting impact. I was fortunate enough to have both.

Chapter 24

What I Learned Along the Way

When I first began working in healthcare more than twenty five years ago, I thought my job was to lead activities. I believed I was there to organize bingo games, plan parties, decorate for the

holidays, lead exercise groups, organize outings, and help residents have fun. While all of those things were certainly part of my job, I eventually realized they were only the tools. The real work was always about caring for people.

As I look back over these stories, I see much more than funny moments and unforgettable experiences. I see people who shaped my life. I see residents who taught me patience, coworkers who taught me teamwork, families who taught me compassion, and experiences that taught me to laugh even when the day did not go according to plan.

I think about getting lost on a scenic drive in Lancaster and realizing that sometimes the best stories come from unexpected detours. I think about Ralph declaring war on bingo and reminding me that every resident has a story, even when we do not fully understand it. I think about glitter covering an activity room from floor to ceiling and learning that the biggest messes often create the best memories. I think about holiday celebrations that left me completely exhausted but filled an entire community with joy.

I remember leading Sunday worship services because the volunteer never arrived. At the time, I was simply trying to help. Looking back, I realize that God had been preparing me for those moments long before I ever became an Activity Director. Growing up as a preacher's kid had quietly given me the confidence to step forward when people needed someone.

I remember the bird that somehow found its way into the building and managed to entertain an entire community for a day. I remember the bird that startled awake every morning when a door slammed and the simple solution of moving its cage. Those stories may seem small, but they remind me that caring often happens in the little things. Sometimes making someone's day better begins with simply paying attention.

I remember the snowstorms in Pennsylvania, the hallway bingo games during COVID, and the cruise director who smiled for everyone else while carrying the invisible weight of creating joy. Those experiences reminded me that the people who care for others often need someone to care for them too.

I think about the incredible coworkers who stood beside me over the years. The assistant I wished I could clone. The Super Team that somehow pulled off one Eagles celebration after another. The housekeepers, nurses, social workers, dietary staff, maintenance teams, volunteers, and administrators who all played a part in creating communities that truly felt like home. Healthcare has never been a one person job. It has always been about people working together.

These stories also remind me that I have been incredibly blessed to experience healthcare in three very different places. Pittsburgh gave me my foundation. It was where I learned the profession, found my confidence, and discovered my passion for serving older adults. Philadelphia challenged me to grow as a leader. It pushed me to think bigger, plan larger events, and work alongside amazing teams of people. Then Florida gave me an entirely new perspective. It reminded me that retirement could be vibrant, active, joyful, and full of surprises. It also taught me that it is perfectly normal to spend your second day on the job driving behind a group of belly dancers.

The lesson that followed me from Pittsburgh to Philadelphia and now to Florida has remained the same. People matter. Every resident has a story worth hearing. Every coworker deserves appreciation. Every family is carrying something we may not fully understand. Every opportunity to encourage another person is a gift.

Perhaps the biggest lesson I learned, however, had nothing to do with activities.

It had everything to do with myself.

For many years, I poured my energy into caring for everyone else. I loved what I did, and I still do. But somewhere along the journey I began to realize that if I wanted to continue caring for others, I also needed to learn how to care for myself. That lesson did not come quickly. It took years. It took mistakes. It took burnout. It took reflection. It took learning that self care is not selfish. It is necessary.

As I continue my journey in healthcare, I do not think I will ever stop being an Activity Director. Whether it is my official job title or not, it has become part of who I am. I still find joy in bringing people together. I still enjoy creating moments that make people smile. I still believe that laughter is powerful, that connection matters, and that even a simple game of bingo can brighten someone's day.

The residents whose names appear in these pages have long since become part of my own story. So have the coworkers, families, and communities that welcomed me along the way. They shaped me far more than they will ever know. I hope, in some small way, I made a difference in their lives as well.

If there is one thing I hope you take away from this book, it is this: never underestimate the impact of caring for another person. A conversation, a smile, a party, a song, a worship service, a scenic drive, or even a simple game of bingo may seem ordinary in the moment. Years later, those ordinary moments often become the memories that matter most.

Thank you for allowing me to share these stories with you. They are funny, sometimes chaotic, occasionally unbelievable, but every one of them has helped shape the person I am today. They remind me that caring for others has been one of the greatest privileges of my life.

And if you ever find yourself leading a craft with glitter, getting lost on a scenic drive, decorating for Christmas, or calling bingo for a room full of determined residents, I hope you smile.

You are creating memories too.