Assessment of Resident Preferences for Meaningful Moments

Date: _____ **Information provided by**: ☐Resident ☐ Staff ☐ Family ☐Other

Background: About Me

Resident Name: _____

I prefer to be called: _____

Where I grew up: _____

Occupation/work: _____

My family/pets: _____

Favorite hobbies/interests: _____

Favorite food and/or drink: _____

Other things you should know about me:

_____

What is Meaningful to Me?

I feel good about myself when _____

I feel accomplished when _____

I feel a sense of joy when _____

I feel valued by others when _____

I like to make my own decisions about _____

I feel creative when _____

I like to help others by _____

Activities I avoid _____

Consider Common Themes

For example, personal qualities such as creative, helper, independent; prefers to be alone or in a group; etc.

Making It Happen: Creating Meaningful Moments

1. _____
2. _____
3. _____
4. _____
5. _____

Holmes, S. D., Scherr, S., O'Brien, E., Levy, S., Galik, E., & Resnick, B. (2025). The meaningful engagement assessment for residents with dementia in assisted living settings. *Journal of the American Medical Directors Association*, *26*(1), 105354.