STATE WIDE

New York StateWide Senior Action Council, Inc.

VIRTUAL RESIDENT/FAMILY ACTION COUNCIL
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Culture Change

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Culture Change
"Creating Home within the Nursing Home"

PIONEER NETWORK (www.pioneernetwork.net)

- The Culture Change movement emphasizes dignity, choice, and self-determination for residents.

- The essence of culture change is about transforming philosophies and management style so that ageing is no longer synonymous with decline and illness.

- The principles of culture change are founded in a new way of caring that is based on *choice, creativity, and flexibility.* The future of culture change lies in the commitment to improve resident and staff quality of life through *empowerment."*

WHAT IS CULTURE CHANGE?

- The "culture change" movement move nursing homes from "institution" to "homes" for residents through both physical changes and policy changes.

- It embraces the *person-centered/directed concept,* while also supporting the *improvement of work conditions* for staff.

WHAT IS CULTURE CHANGE?

- The nursing home is a community in which individuals value and respect each other and help each other, as would family members.

- Staff are members of the community, the family.

- Care is directed by and centered on the resident.

HOW WOULD YOU DESCRIBE YOUR NURSING HOME?

WHY CULTURE CHANGE?

- Culture change has been associated with higher levels of quality of resident care and life and greater family satisfaction

- Improved the nursing home's competitive position

- Improved occupancy rate

WHY CULTURE CHANGE?

- Improved operational costs*

- Reduced prescription use, especially with regard to anxiolytics and antidepressants

- Fewer falls

- Weight gain

- *Culture Change in Nursing Homes: How Far Have We Come? Findings From The Commonwealth Fund 2007 National Survey of Nursing Homes | Commonwealth Fund

WHY CULTURE CHANGE?

- Greater resident satisfaction,

- Fewer nosocomial infections, and

- Decreased employee turnover.

KEY PRINCIPLES OF THE CULTURE CHANGE MOVEMENT

1. Resident-directed care and activities (different from resident-centered);

2. Home environment;

3. Fostering close relationships with staff, family, residents, and community;

KEY PRINCIPLES OF THE CULTURE CHANGE MOVEMENT

4. Staff empowerment;

5. Collaborative and decentralized management; and

6. Measurement-based continuous quality improvement

RESIDENTS DIRECT THEIR CARE AND ACTIVITIES: Empowerment and Self-Determination

- Choosing whether to take a bath or shower

- Choosing when to take a bath or shower

- Choosing when to get up

- Choosing when and what to eat

ENABLING RESIDENTS TO DIRECT THEIR CARE AND ACTIVITIES:
Empowerment and Self-Determination

- Choosing to stay up late to read a book

- Choosing activities to participate in

- Choosing their own daily schedule

- Being involved in facility policies and decisions

- Taking risks such as going outside for a walk

CULTURE CHANGE:HOME ENVIRONMENT

- Residents live in small group living areas, e.g., neighborhood, household, small house, Green House, which include full kitchen, dining area and living room.

- Residents live in either private rooms or privacy-enhanced, shared rooms where residents' living space is separated by a partial wall (not a privacy curtain).

HOME ENVIRONMENT

- The home has no nurses' stations; team members work in areas accessible to residents and families.

- The home has eliminated, or never used, medication carts.

- Residents are welcome to decorate their walls according to their preferences (such as with removable hooks/strips).

- Lighting throughout resident use areas is sufficient, according to the residents.

HOME ENVIRONMENT

- Institutional, over-the-door call lights have been replaced with alternatives such as porch lights at the side of resident room doors or a silent communication system.

- Team members communicate with each other without using overhead paging.

- The home supports the right of residents to have a refrigerator in their room.

RELATIONSHIPS WITH STAFF, FAMILY, RESIDENTS, AND COMMUNITY

- According to the residents' preferences, the home invites outside groups to meet in the home, with residents welcome to attend.

- The home works with residents to accommodate their preferences to be actively engaged in community life outside the home, such as clubs, volunteering at schools, animal shelters, homeless shelters.

RELATIONSHIPS WITH STAFF, FAMILY, RESIDENTS, AND COMMUNITY

- Residents have opportunities to engage in events outside the home, such as fairs, parades, voting, concerts, and ball games.
- The home actively solicits the views of family members and treats them as care partners instead of visitors in working together to accommodate the resident's preferences.
- Community meetings are held on a routine basis, at least weekly, bringing residents, team members and families together as a community.

STAFF EMPOWERMENT

- Empowering staff to respond to residents' needs and desires;
  - Are they nurse assistants or resident assistants?
  - Consistent assignment
  - Give staff a chance to participate in managing their work schedules
  - Cross training: housekeeping, nursing, food service, and activities to serve a variety of resident needs.
- Promoting collaborative decision making.

Artifacts of Culture Change 5: Examples of WORKPLACE PRACTICE Artifacts

- RNs, LPNs, and CNAs consistently work with the same residents
- CNAs self-schedule
- Staff not required to wear a uniform or "scrubs"
- Nursing home pays for outside conferences and workshops for CNAs
- Career ladder, job development opportunities
- Day care on site

CULTURE CHANGE AND DEMENTIA

- **Person-directed care is appropriate for all residents, even those with some type of dementia, such as Alzheimer's disease.**

- The nursing (resident) assistant who consistently works with a resident with dementia knows what the resident wants by the resident's body language, behavior, and/or information provided by the family.

CULTURE CHANGE AND DEMENTIA

- For example, a person with dementia may not be able to understand that she needs to be clean and, by her words and actions, refuses a bath or shower.

- A well-trained direct care worker, who knows the person, will have the knowledge, skills, flexibility, and equipment to find new and better ways to pleasantly assist her with washing.

Empowerment and Self-Determination: The Resident with Dementia

- Activities should be ones they want to go to

- Showering or bathing without a battle

- Support the resident to do things for themselves rather than doing it for them.

- Do things the way they want as long as it does not compromise their safety or well-being.

Empowerment and Self-Determination: The Resident with Dementia

- Take the time to explain.

- Adapt tasks to allow the resident to continue to be independent.

- Offer choices in food the resident prefers

Resident Care in a Culture Change Nursing Home

A resident in a culture change nursing home would have:

A home-like environment (pets; plants; food available 24/7)

Choice as to:

• When to get up and go to bed

• When, where and what to eat

• How often and where to bathe

• Keeping a pet

The same staff providing and organizing their care:

• Staff and resident together deciding the care

• A care plan that is in the resident's (e.g. "I") voice

Families welcome and participating in care

Click to View Information about Nursing Home Comparisons at the Pioneer Network

Learn more about Continuum of Person-Directed Culture

Moving From Traditional to Person-directed Care

Traditional Care	Person-directed Care
Residents are told when to wake up, go to bed, eat, and bathe, based on institutional schedules and set routines.	Residents wake up, go to bed, eat, and bathe when they choose to. Staff alter their work routines to honor residents' preferences.
Residents frequently have different care staff. The staff do not know the residents well, so they are not familiar with their preferences. Studies find that residents often feel unknown, insecure, or scared.	The same staff take care of the same resident; they know each other and good relationships develop. This motivates staff to provide better quality care. Studies show that residents feel more secure, content, and happy.
Management makes most of the decisions, often without consulting the residents, families, or direct-care staff.	Management seeks input from residents, families, and staff before making decisions that affect their daily lives. Management also trains and supports staff to enable residents to make decisions.

WHAT DO YOU THINK NEEDS TO CHANGE AND CAN CHANGE?

ASSESS YOUR HOME (Pioneer Network)

Does your home offer at least one of the following styles of dining that provide for resident choice:

- **Restaurant style where residents' orders are taken;**

- **Buffet style where residents help themselves or tell team members what they want;**

- **Family style where food is served in bowls on dining tables where residents help themselves or receive assistance.**

ASSESS YOUR HOME

- Is each meal available for at least two hours; can residents come and go when they choose?

- Are snacks/drinks easily available for residents at all times without having to ask, i.e., in a stocked pantry, refrigerator or snack bar?

ASSESS YOUR HOME

- **In addition to snacks, can residents order food from the kitchen 24 hours a day, and are team members empowered to provide food upon resident request?**

- **Before commercial supplements are used, are "real foods" offered such as smoothies, shakes, malts?**

ASSESS YOUR HOME

- **Does the home support each resident's natural awakening rather than waking residents on a set schedule?**

- **Are each resident's preferences for a good night's sleep known and provided such as preferred light level, pillows, blankets, and desired bed clothes?**

ASSESS YOUR HOME

- **Is each resident's daily preferred bedtime (which may vary) known and honored?**

- **Is resident's preference for method of bathing is known and honored (bath, shower, bed bath)?**

ASSESS YOUR HOME

- **Are resident preferences for frequency of bathing/showering and time of day known and honored?**

- **Can residents determine their own daily schedules and make spontaneous requests and changes? Are resident schedule preferences integrated into team member schedules?**

ASSESS YOUR HOME

- **Do residents participate in the task force/committee/team making decisions about décor (living rooms, outdoor areas, bathing rooms, etc.) and purchasing (food and drink items, linens, furniture, etc.)?**

- **Do residents participate in the task force/committee/team making decisions about food, menu planning, dining ambiance?**

- **Do residents participate in the task force/committee/team making decisions regarding daily things to do that offer meaningful engagement and purpose, events, how to celebrate holidays?**

ASSESS YOUR HOME

- **Do residents participate in the task force/committee/team making decisions about hiring team members?**

- **Are residents and families kept informed of policy changes and decisions that affect residents?**

- **Does the home attempt to understand expressions and preferences of individuals who cannot communicate verbally and put the information in the care plan?**

ASSESS YOUR HOME

- **Do care planning meetings accommodate resident/family availability (timing, teleconference)?**

- **Does your home provide the comprehensive care plan to you in an understandable format?**

HOW TO ENCOURAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *FAMILY/RESIDENT COUNCILS*

- Invite a speaker to explain culture change and resident/family directed care

- Invite the administrator to join.

- Discuss how Culture Change has led to improvements to residents and facility.

HOW TO ENCOUAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *FAMILY/RESIDENT COUNCILS*

- Make a list of what can be done to make the facility more **home like:**

  - Honor residents' choices:

    - when to wake up or go to bed when they want

    - When to eat

    - What to eat

    - Take risks (if understand the consequences)

HOW TO ENCOUAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *FAMILY/RESIDENT COUNCILS*

- Take bath or shower

- When to take bath or shower

- Participate in activities they want to

- Ask residents about the lighting: is it sufficient?

- Host events with family members, residents and staff to sit and talk

HOW TO ENCOUAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *FAMILY/RESIDENT COUNCILS*

- Provide more dining choices: buffet-style, menus, expanded hours)

- Encourage residents to decorate their rooms with personal furniture and items

HOW TO ENCOUAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *FAMILY/RESIDENT COUNCILS*

- Make a list of what can be done to encourage **independence**

  - Encourage residents to participate in care plan meetings

  - If residents want to take certain risks, accept their decision if they are competent and they understand the possible consequences: balance safety with autonomy

HOW TO ENCOUAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *FAMILY/RESIDENT COUNCILS*

- Ensure that resident councils are resident-directed (help if requested)

- Make a list of how residents/family can **participate in facility policy and staffing**

  - Include a resident/family when interviewing new staff

HOW TO ENCOUAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *FAMILY/RESIDENT COUNCILS*

- Include a resident/family in staff training
- Include a resident/family in policy discussions or solving problems that arise in the home

HOW TO ENCOURAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *INDIVIDUAL ADVOCACY*

YOUR JOB IS TO:

- Tell the staff what your loved one needs to feel they are in a home-like environment

- Tell staff your loved one's history, their history, lifestyle, culture

HOW TO ENCOURAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *INDIVIDUAL ADVOCACY*

- Tell staff your loved one's likes, dislikes, hobbies and interests

- Tell staff what your loved one was like before she entered the facility and what she liked to do at home

- Tell staff the favorite pass times of your loved one

HOW TO ENCOURAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *INDIVIDUAL ADVOCACY*

- Tell staff what foods your loved one prefers

- Tell staff whether your loved one likes baths or showers and when she like to take it

- Tell staff what brings meaning and purpose to your loved one, e.g., community service, volunteerism, and individual pursuits

HOW TO ENCOURAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *INDIVIDUAL ADVOCACY*

- Discuss what can be done to help maintain independence for your loved one

- Remember the home has to balance preferences with safety and autonomy. How will they do that?

  - Being able to take risks that the home may be uncomfortable with?

    - Taking a walk?

HOW TO ENCOURAGE CULTURE CHANGE IN YOUR NURSING HOME THROUGH *INDIVIDUAL ADVOCACY*

- Going to the bathroom alone?
- Smoking

RESOURCES

- **Consumer Voice fact sheet:** culture-change-in-nursing-homes-fact-sheet-final_(1).pdf (theconsumervoice.org)

- Layout 1 (pioneernetwork.net)

- Beyond the Medical Model: The Culture Change Revolution in Long-Term Care (osu.edu)

RESOURCES

- [Issue of the Month: Changing the Culture of Nursing Homes | Commonwealth Fund](#)

- [Culture Change in Nursing Homes: How Far Have We Come? Findings From The Commonwealth Fund 2007 National Survey of Nursing Homes | Commonwealth Fund](#)

- [10-No-Cost-CC-Ideas-FINAL.pdf (theconsumervoice.org)](#)

RESOURCES

- **Culture Change in Nursing Homes: How Far Have We Come? Findings From The Commonwealth Fund 2007 National Survey of Nursing Homes | Commonwealth Fund**

- **ttps://www.commonwealthfund.org/publications/other-publication/2006/apr/transforming-long-term-care-giving-residents-place-callSelf Assessment for Nursing Homes - Pioneer Network**

- **Culture Change in Nursing Homes.pub (theconsumervoice.org)**

RESOURCES

- www.PioneerNetwork.net

- http://edenalt.com/edentols.htm

- GUIDE TO NURSING HOME CULTURE CHANGE (ncsl.org)

- factsheet_understanding_and_supporting_a_person_with_dementia.pdf (alzheimers.org.uk)