

Stirring Up the Wind – Get Motivated and Get Started on Your Culture Change Journey without Breaking the Budget

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History of Health Systems, Inc.



- ▶ 2010 – 62 skilled homes
- ▶ All homes in Missouri
- ▶ Homes had very little exposure to Culture Change and person-centered practices
- ▶ A few were giving more choices with meals or trying to do open dining
- ▶ Director of Culture Change Hired November 2010

Beginning of our Journey...

- ▶ Asked to form a Culture Change Team
- ▶ Started with Artifacts of Culture Change



Artifacts of Culture Change

Home Name _____ Date _____

City _____ State _____ Current number of residents _____

Ownership: For Profit Non-Profit Government

Care Practice Artifacts	
1. Percentage of residents who are offered any of the following styles of dining: <ul style="list-style-type: none"> • restaurant style where staff take resident orders; • buffet style where residents help themselves or tell staff what they want; • family style where food is served in bowls on dining tables where residents help themselves or staff assist them; • open dining where meal is available for at least 2 hour time period and residents can come when they choose; and • 24 hour dining where residents can order food from the kitchen 24 hours a day. 	<input type="checkbox"/> 100 – 81 % (5 points) <input type="checkbox"/> 80 – 61% (4 points) <input type="checkbox"/> 60 – 41% (3 points) <input type="checkbox"/> 40 – 21% (2 points) <input type="checkbox"/> 20 – 1% (1 point) <input type="checkbox"/> 0 (0 points)
2. Snacks/drinks available at all times to all residents at no additional cost, i.e., in a stocked pantry, refrigerator or snack bar.	<input type="checkbox"/> All residents (5 points) <input type="checkbox"/> Some (3 points) <input type="checkbox"/> None (0 points)
3. Baked goods are baked on resident living areas.	<input type="checkbox"/> All days of the week (5 points) <input type="checkbox"/> 2-5 days/week (3 points) <input type="checkbox"/> < 2 days/week (0 points)
4. Home celebrates residents' individual birthdays rather than, or in addition to, celebrating resident birthdays in a group each month.	<input type="checkbox"/> Yes (5 points) <input type="checkbox"/> No (0 points)
5. Home offers aromatherapy to residents by staff or volunteers.	<input type="checkbox"/> Yes (5 points) <input type="checkbox"/> No (0 points)
6. Home offers massage to residents by staff or volunteers.	<input type="checkbox"/> Yes (5 points) <input type="checkbox"/> No (0 points)



Edu-Catering: Catering Education for Compliance and Culture Change

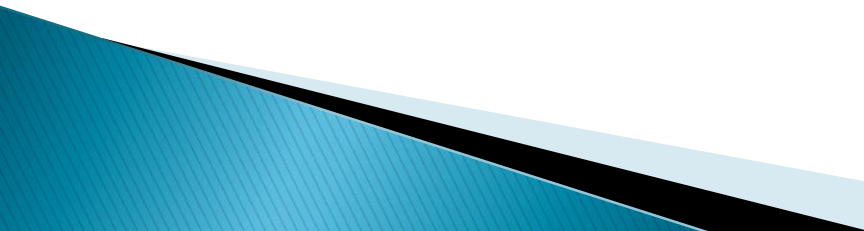
7. Home has dog(s) and/or cat(s).	<input type="checkbox"/> At least one dog or one cat lives on premises (5 points) <input type="checkbox"/> The only animals in the building are when staff bring them during work hours (3 points) <input type="checkbox"/> The only animals in the building are those brought in for special activities or by families (1 point) <input type="checkbox"/> None (0 points)
8. Home permits residents to bring own dog and/or cat to live with them in the home.	<input type="checkbox"/> Yes (5 points) <input type="checkbox"/> No (0 points)
9. Walking times/bedtimes chosen by residents.	<input type="checkbox"/> All residents (5 points) <input type="checkbox"/> Some (3 points) <input type="checkbox"/> None (0 points)
10. Bathing without a Battle techniques are used with residents.	<input type="checkbox"/> All (5 points) <input type="checkbox"/> Some (3 points) <input type="checkbox"/> None (0 points)
11. Residents can get a bath/shower as often as they would like.	<input type="checkbox"/> Yes (5 points) <input type="checkbox"/> No (0 points)
12. Home arranges for someone to be with a dying resident at all times (unless they prefer to be alone) - family, friends, volunteers or staff.	<input type="checkbox"/> Yes (5 points) <input type="checkbox"/> No (0 points)
13. Memorial/remembrances are held for individual residents upon death.	<input type="checkbox"/> Yes (5 points) <input type="checkbox"/> No (0 points)
14. "I" format care plans, in the voice of the resident and in the first person, are used.	<input type="checkbox"/> All care plans (5 points) <input type="checkbox"/> Some (3 points) <input type="checkbox"/> None (0 points)

Care Practice Artifacts Subtotal: Out of a total 70 points, you scored _____.

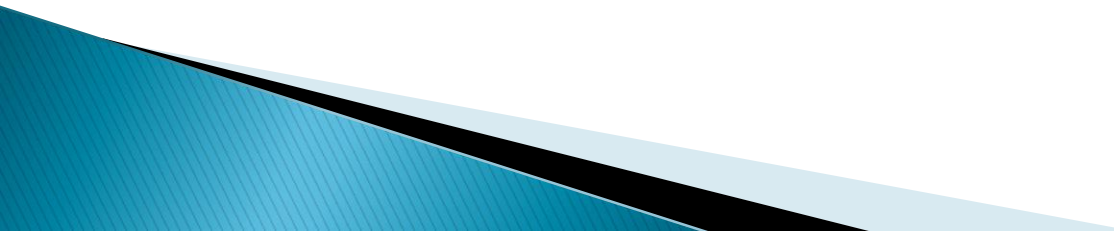


Edu-Catering: Catering Education for Compliance and Culture Change

Artifacts of Culture Change

- All homes filled out tool – encouraged to do it as a team process, not just one person
 - Choose 1 to 3 areas where scores are lower to work on as a team.
 - Set goals and timelines
 - Report to Director of Culture Change
- 

Areas of Improvement:

- ▶ 10 – Bathing Without a Battle
 - ▶ 40 – Overhead Paging Turned Off
 - ▶ 13 – Memorials for Individual Resident
 - ▶ 4 – Individual Birthdays
 - ▶ 1 – Expanded Dining
 - ▶ 2 – Snacks Available
 - ▶ 60 – Activities Led by Other Departments
 - ▶ 51 – Learning Circles
 - ▶ 14 – “I” Care Plans
 - ▶ 37 – Raised Gardens
- 



Health Systems, Inc. homes have averaged a 63 point increase in the total Artifacts of Culture Change score in the past 4 years!

Group Exercise

What is it?



Working as a TEAM:

- ▶ Brainstorming POWER – ideas, strategies, problem solving, solutions
- ▶ Not just top down – “You WILL DO it THIS WAY” mentality
- ▶ Involvement OTHER THAN Managers
- ▶ Gives a voice to many – models Culture Change principles
- ▶ Helps spread Culture Change and practices to other staff



Culture Change Team Report

Home Name:

Date:

Person Completing Report:

Current Team Members: (Names and positions)

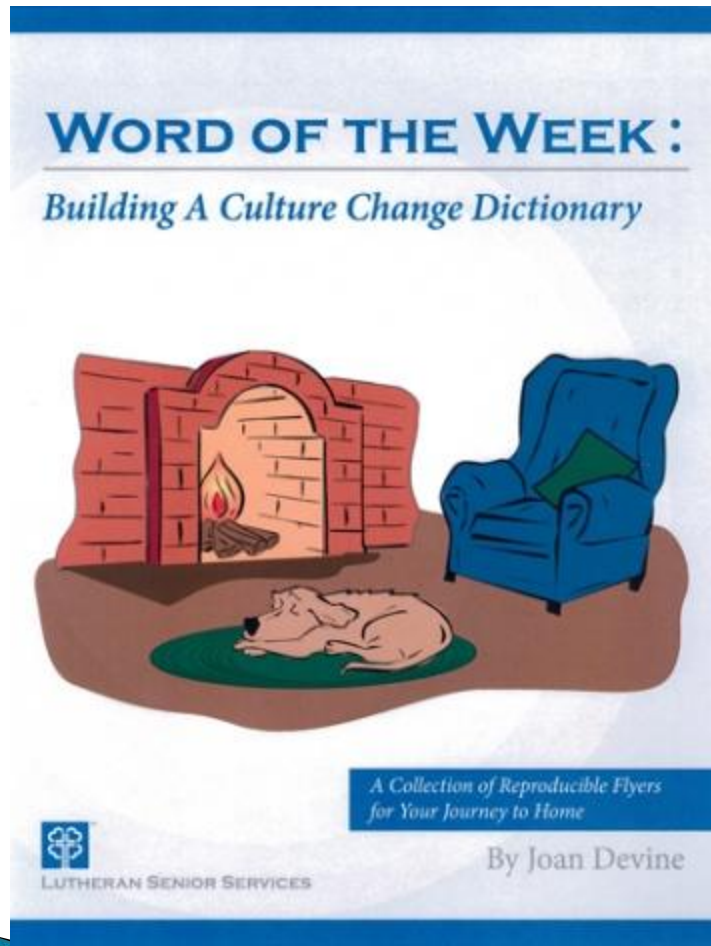
Culture Change Goals:

Progress/Changes made:

Assistance Needed:

Comments or Questions:

Also in the beginning...



Can be ordered
from Action Pact
at
<http://actionpact.com/index.php/product/word-of-the-week>

Cost is \$35.00

WORD OF THE WEEK :

Building A Culture Change Dictionary

Week 1 - January 3, 2011



OUT WITH THE OLD

Feeder

One who is fed by another; in other contexts, a reference to livestock that is being fattened for market.

IN WITH THE NEW

Person Who Needs Assistance with Dining

A human being who needs someone to contribute to the fulfillment of needs related to eating.

Wow – it seemed so natural to use the term “feeder”. If we had only really thought about what we were saying. Now we know better.



Our Journey Continues...

Some of the latest free of low cost tools we have used to continue to promote and grow in our Culture Change/Person-Centered Care Journey:

- Value of the Month
- “Selfie Tips”
- Engaging Staff In Individualized Care Starter Toolkit
- Hand In Hand
- Advancing Excellence – Person Centered Care Goal

Value of the Month:

*Guiding us on our
Culture Change Journey*



January 2012

VALUE #1: Know Each Person

It seems like knowing each person should be easy when it comes to “knowing” the residents, right? Well, we do regularly assess their medical history, social history, likes and dislikes as far as activities and maybe food preferences, but do we really KNOW them? Are these assessments just stuck in a chart and not shared with all of the staff? Is there a way we can know our residents better?

Knowing the person doesn't just refer to knowing the resident, as in “the person with dementia”. You also need to know everyone who is on your team; your fellow co-workers, volunteers and families. If you are going to really be a team, you have got to know each other. Look for creative activities to come to help you with this value!



Idea Box:

It used to be the case that customer service staff were taught to introduce themselves to their customers. Rarely do you ever hear wait staff or other customer service professionals tell us their name anymore.

Make sure YOU introduce yourself – to your residents, families, volunteers, new staff members, visitors, EVERYONE you come into contact with in your home. I have found when I am the customer and ask people their name and then use it, I get better service and have perhaps begun a relationship.



“Selfie Tips” is a project by MOLANE and MC5. Person Centered Care Tips are sent out monthly. There will be a total of 12 PCC Tips.

www.MOMC5.com



Tip 1: “Where’s the Focus?”

Just as a “selfie” is all about YOUR SELF, Person-Centered Care is all about the PERSON! So why are we looking at Person-Centered Care?

The first value of the Pioneer Network is “Know Each Person”, and this is also the root of Person-Centered Care. ***It is vital to know your residents... Why?***

- *They feel respected and valued.*
- *Having strong bonds with caregivers builds trust.*
- *They are more at ease getting care from people they know.*
- *Being able to make choices keeps them engaged and feeling vital.*
- *You can support choices when you know people well.*



Tip #2

My Life! My Choice!!

As we take a "selfie" and examine ourselves, we see the things that are important and unique to us. We have a favorite color, a hairstyle we prefer, and favorite foods we love to eat. We make many choices each day that make us satisfied or happy.

Advancing Excellence has developed the Person Centered Care tracking tool, to take a deeper look into the preferences and choices of our residents. This tool takes the MDS 3.0, Section F, "Customary Routines and Preferences," and goes a step further. For example, we now not only ask Mrs. Jones if it is important to her to choose her own bedtime, but we find out if she has been satisfied with choosing her own bedtime here at our home over the past several weeks. This gives us the opportunity to make sure we are honoring the choices and preferences that our residents have identified.

Action items:

- Download the Person Centered Care Tracking Tool at <https://www.nhqualitycampaign.org/goaldetail.aspx?g=pcc#tab2>



Tip #3

Care Conferences: *Developing a portrait of the person*

Care Conferences are the ultimate “selfie!” The conference is an opportunity to really examine the person and their preferences and needs. If we are discussing the PERSON, it is important for them to be at the meeting and share their wishes. It is also essential to include those who know the person best – the direct care staff and family members. A care conference isn't just a time to meet requirements; it is a chance to learn about the person and how to adapt care to meet their individual needs.

Action items:

- Review your current process:
 - Are you including the resident? If not, how can you make sure they participate?
 - Does direct care staff attend? If not, make it possible for them to attend. Invite them to come, provide backup for them to get away, and help them know what to contribute.
 - Are family members participating? Is the conference held at a time convenient for them to attend? Can you Skype call or conference call them to include them if they live far away?



Tip #4

Consistent Staffing

Think of yourself in a new and unfamiliar situation, surrounded by unfamiliar faces. Imagine this happens almost every day. It feels like starting out in a new high school over and over again. Who are all these other people? How will I remember their names? There are so many strangers--what do they really know about me? Now, imagine you also have dementia.

With Consistent Assignments in person-centered care, staff and management place value on a stable team of individuals committed to “knowing the resident” and building care on a foundation of relationships. Staff, as well as residents and families benefit, as they get to know and depend on one another to work fluidly and flexibly support the unique strengths of each elder. The opportunities consistent staffing offers include:

- It makes it easier for residents and families to “share the care” with only a few staff members.
- Creates strong bonds and builds trust. It becomes easier for staff to collect and build upon the resident’s Life Story.
- Staff members are more in tune to slight changes in health, behavior or relationships that may affect well-being such as a medication interaction or UTI.
- Consistent staff is better able to share care tips and approaches that work well with the older adults.
- Families are more open to discussing sensitive issues, share useful concerns or make suggestions to staff they see regularly and get to know over time.
- Familiar staff fosters empathy between staff and residents who know each other well.
- More humor, relaxed atmosphere of care and staff and resident activity engagement are often visible hallmarks in communities that foster consistent staffing.
- Lower turnover, lower error rates and increased work satisfaction are linked by some data on consistent assignment.



Tip #5

The Power of Huddles:
*Making sure we all see the
same picture*

What is a huddle?

As in football, a caregiver huddle gathers to briefly exchange information, share observations and develop strategy. Use huddles to pass insights about what really helps each resident feel comfortable and understood, so that all caregivers are equipped to provide the best person centered care.

Shift Huddles

CNAs and nurses meet at shift changes to discuss quality of life and care risks and opportunities they noted for specific residents. CNAs from the outgoing shift lead the discussions of the residents in their care, followed by nurses' contributions, and preferably other departments. Conducted while standing, or walking room-to-room, a huddle takes 15 minutes or less while management provides caregiver coverage during the huddle.

Why huddle?

A huddle may also be called as a "time out" during a shift, to put heads together on a new challenge or to exchange helpful information.

Huddles encourage everyone to share vital information, compare relevant observations and problem-solve. Successful huddles build teamwork, identify potential problems and improve the care provided by the team.

You may discuss how well a person who is at risk of pressure ulcers ate and drank, and discuss any positioning issues. You could review the interactions and activity participation of someone who has seemed depressed. A

Engaging Staff in Individualizing Care Starter Toolkit

[Introduction](#) | [Four Foundational Practices](#) | [Webinar Series](#) | [Maximizing MDS, QIS, and QAPI Toolkit Content](#) | [The How of Change](#) | [It Takes a Team](#)



Introduction

This Toolkit is a product of the Pioneer Network's National Learning Collaborative on *Using the MDS as an Engine for High Quality Individualized Care*, made possible with the support of The Retirement Research Foundation. The Collaborative incubated B&F Consulting's method for engaging staff in individualizing care to improve outcomes for residents. The method first puts in place four foundational organizational practices – consistent assignment, huddles, involving CNAs in care planning, and Quality Improvement (QI) closest to the resident. These practices create a forum for regular communication, critical thinking, and problem solving among and with staff closest to the residents.

Forty-nine nursing homes incubated these practices through fifteen month learning collaboratives convened and facilitated by five Culture Change Coalitions and four nursing home corporations. The incubating homes strengthened these practices by applying them to high priority clinical areas, and found that with huddles and consistent assignment they were able to improve outcomes by adapting to residents' customary routines. As they saw the benefits in clinical outcomes and honed their foundational practices, the incubators were able to build on small scale adjustments to expand their flexibility in dining, morning routines, and night time care. The homes found that the practices together – engaging staff in individualizing care - accelerated improvement in clinical, human resource, and organizational outcomes.

Four Foundational Practices

B&F's method puts four organizational practices in place as the foundation for deep change: (1) consistent assignment; (2) huddles; (3) involving CNAs in care planning; and (4) QI closest to the resident. Making change successfully requires frequent, timely, accurate information sharing and problem solving among staff. With these four foundational practices in place other changes have the support they need to succeed.

These four practices, used together, are foundational because they encourage and provide a forum for learning and sharing deep knowledge of residents. They serve both as communication vehicles and relationship building tools. These practices support staff in developing deep relationships with residents and

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HOT TOPICS

Culture Change in Action Webinars NOW ON-DEMAND!

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The banner features a large speech bubble with a red and yellow border. Inside the bubble, the words 'HOT TOPICS' are written in white, bold, sans-serif font. Below the bubble, the text 'Culture Change in Action Webinars NOW ON-DEMAND!' is written in white and yellow. At the bottom, there is a blue button with the text 'Click Here' in white.

Implementation, each topic area in the Toolkit includes a tip sheet, an exercise to generate conversation among staff, and a video or audio clip to support that conversation. The exercises are designed to give people a personal experience and to open conversation on the topic. The media clips and tip sheets provide how-to information from practitioners.

The toolkit has three sections reflecting the three steps used by the incubator homes:

Step One: Foundational Organizational Practices

- Consistent assignment
- Huddles
- Involving CNAs in care planning
- QI huddles closest to the resident

Step Two: Clinical Applications

- Promoting mobility, reducing falls and alarms
- A good welcome: the first 24 hours
- Reducing off-label use of antipsychotic medications by engaging staff in individualizing care to alleviate resident distress

Step Three: Operationalizing Individualized Care

- Individualizing mornings
- Flexible dining services
- Individualized night time routines

Quick Organizational Self-Assessment

Use this Quick Organizational Self-Assessment to discuss with your team where you are in your implementation of the practices used by the incubator homes, and to identify what you want to work on as you get started.

The 12 webinars provide additional in-depth information on these practices, and are available for a fee for five on demand viewings of each webinar. To purchase viewings of one or more of the webinars, go to the [Pioneer Network store](#).

This toolkit is a resource for nursing homes seeking to take full advantage of the resident assessment and care planning process in combination with their emerging Quality Assurance & Performance Improvement (QAPI) activities. QAPI emphasizes high involvement from staff closest to the issue being addressed, and stresses the importance of using individualized care as a means to better outcomes. The four organizational practices incubated in this collaborative are foundational to any nursing home's effort to engage staff in individualizing care for performance improvement.

The How of Change

Huddles

- ▶ Shift huddles
- ▶ New Resident Huddles
- ▶ QI Huddles
- ▶ “Everyone Stands Up Together”



<http://pioneernetwork.net/Providers/StarterToolkit/Step1>

Tip #6

Me in My New Home



Just as a “selfie” is about YOU, Person-Centered Care is all about the PERSON! Think of yourself in an unfamiliar situation. Finding the bathrooms and where to get a cup of coffee or a bite to eat is likely a top

priority. And by the way... who are all these people and how will I remember their names?

In person-centered care, staff actively listen and observe so they can adapt to each resident's initial needs regardless of cognitive abilities. This is vital **when a person first moves into a new community... Why?** Because they most likely feel vulnerable, out of place and confused. To help you can:

- **Build trust with the person and their family before move-in. Collect detailed Life Story information and share with staff. Learn family members' names.**
- **Organize and decorate their room before move-in with comforting and familiar items, pictures, linens. Involve the person in rearranging or further decorating to their liking.**
- **Place upon their pillow a laminated welcome card with names of care giving staff and a few facts such as where their money will be kept, how they will get their medications and when their family will next visit. Add a welcome wagon gift based on their Life Story or likes.**
- **Introduce yourself perhaps by sharing a treat. Persons are at ease getting care from people they know. Check in with them often and offer tours, snacks, drinks.**
- **Support their right to be sad or angry. Validate feelings, acknowledge how difficult**

A Good Welcome: The First 24 Hours

- ▶ Focus on Customary Routines
- ▶ Establish a Welcome Committee
- ▶ Personalized Welcome
- ▶ Get Information Ahead of Time
- ▶ Share info with staff and Get info from staff
- ▶ Do what you say you will do
- ▶ Comfort, Comfort, Comfort
- ▶ Encourage Personalizing Room
- ▶ Provide info in chewable chunk
- ▶ Have a checklist
- ▶ Evaluate Orders initiated in the hospital
- ▶ Work on Improving Transitions



<http://pioneernetwork.net/Providers/StarterToolkit/Step2/First24TipSheet>



Tip #7

Don't call me "Honey!"

Have you listened to yourself?

Using person-centered language impacts your life and those around you. The right words will:

- Build relationships,
- Create positive emotions,
- Improve self-esteem, and
- Enhance physical abilities.

Do words hurt?

Language that is not person-centered makes life unpleasant for all:

- Labels (*such as "feeder" or "complainer" or "the Parkinson's"*) turn people into objects.
- Baby talk (*speaking in a high voice*) shows disrespect for that person.
- Terms of endearment (*"Honey" or "Sweetie"*) without consent, takes away a person's dignity.
- Using collective/plural nouns (*"Should we take a shower?"*) demeans that person.
- Asking pseudo-questions (*"You want to go to bed now, don't you?!"*) insults that person.

Which words make a happy home?	
USE	NOT
Home, our Community	Facility
Move in or out	Admit or discharge
Neighborhood	Unit or wing
Caregivers, Care Partners	Front-line staff



ADVANCING EXCELLENCE

IN AMERICA'S NURSING HOMES

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PERSON-CENTERED CARE

FOLLOW THESE SEVEN SIMPLE STEPS TO SUCCESS

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EXPLORE A DIFFERENT GOAL



EXPLORE GOAL



IDENTIFY BASELINE



EXAMINE PROCESS



CREATE IMPROVEMENT



LEADERSHIP & STAKEHOLDERS



MONITOR & SUSTAIN



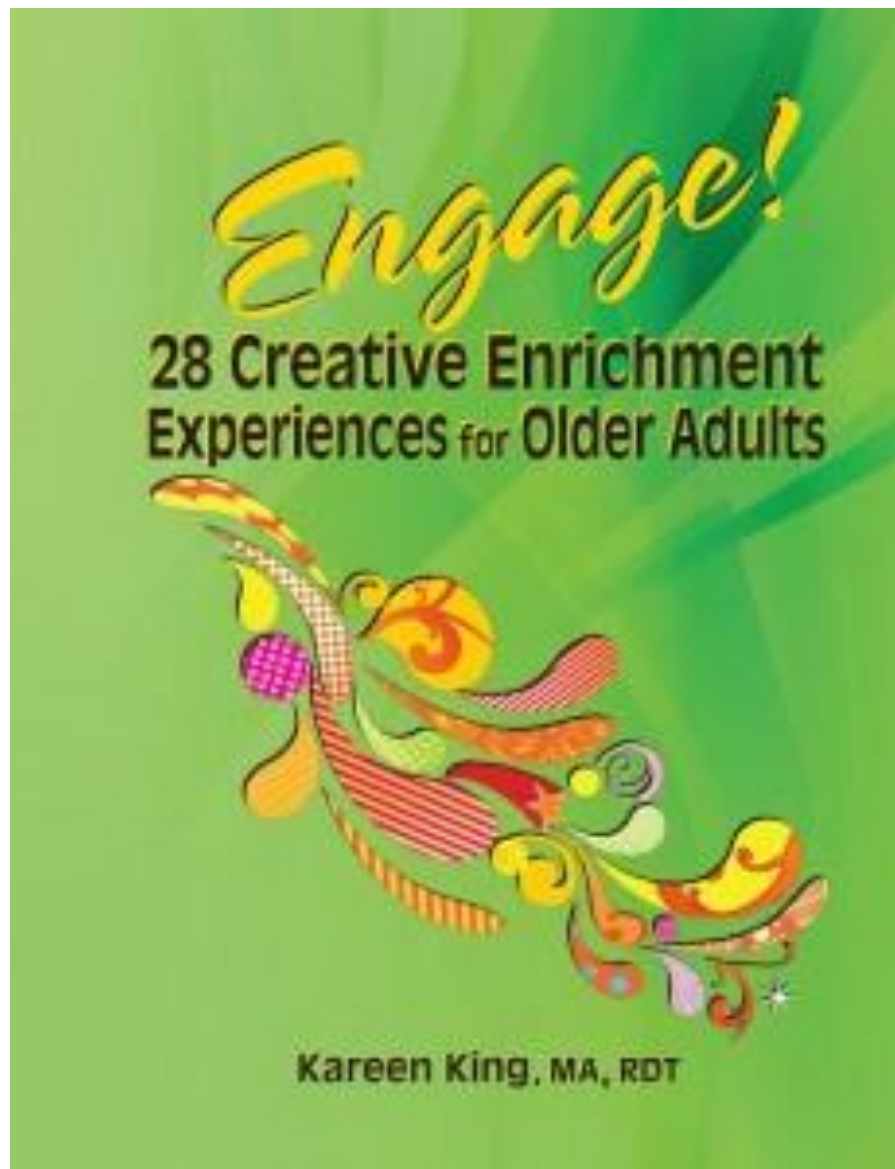
CELEBRATE SUCCESS

RESOURCES

EXPLORE GOAL



<http://musicandmemory.org/>



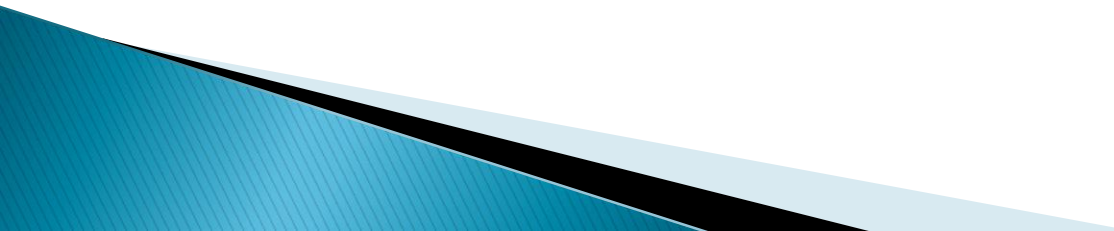
<http://www.thegoldenexperience.com/>

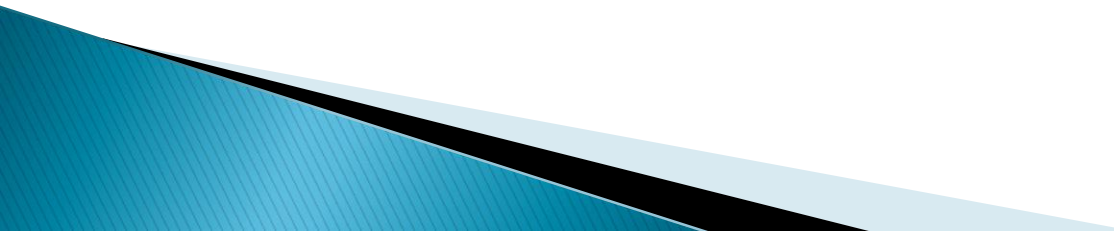
Cost \$29.95

Homes report their outcomes:

- ▶ Better environment for residents to live in.
- ▶ Our residents have more choice
- ▶ Relationships enhanced between residents and employees
- ▶ Happier, more satisfied residents and less complaints
- ▶ Behaviors and antipsychotic meds are reduced
- ▶ Word of mouth in community/positive marketing
- ▶ Residents have more control of the everyday lives
- ▶ Choices make people happy 😊

Advice from HSI Homes:

- ▶ Be aware that change happens slowly. Many people are resistive to change of any kind. Just keep on pursuing your goals!
 - ▶ Important to pick the right team members – must be positive.
 - ▶ DO NOT be afraid of change. The things you implement will eventually work out. The lives of the residents will be better for it.
 - ▶ Take small steps, one thing at a time and your goals will be more attainable.
- 

- ▶ Keep an open mind. The ideas of others often opens doors you didn't even think of. Consider all input as a means to benefit those living in your home.
 - ▶ Think of ways to create an environment that you would like for one of your loved ones to live in.
 - ▶ Listen to your residents.
 - ▶ Think outside the box.
 - ▶ Stay committed. Believe in it.
- 

QUESTIONS???

