How to . . . Celebrating Success
Karen H. Nichols, RN, NHA

• Learn More About Culture Change
• Explore Organizational Change
• Contemplate Leadership Transformation
• Explore the three “Rs” of Person-Centered Care: Renew the Spirit (with Personal Transformation); Reframe the Organization (with Organizational Redesign); and Renovate into HOME (Physical Redesign).
• Share what we have learned about creating a home environment from 12+ years of learning and growing, and the importance of celebrating successes along the way

It has been widely said that whatever many may say about the future, it is ours – not only that it may happen to us, but it is in part made by us.

~ Dr. Ethel Percy Andrus, 1884 - 1967
In 2006 there were

17,000 nursing homes in the US

Compared with 12,468 Golden Arches

In these facilities live 1.6 million people with another 900,000 in assisted living

They are cared for by 2.7 million employees – which is twice the number employed by Wal-Mart

And the baby boomer have not hit old age yet!

By 2030 3 million people will live in nursing homes (National Center for Health statistics)

Already 4.5 million people have Alzheimer’s

By 2025 that will double

By 2050 it will double again
America is becoming a “gerontocracy” and four outcomes are certain:
1. More of us will live longer than in any previous generation;
2. The epicenter of economic and political power will shift from the young to the old;
3. We will need to change our current mind set about how to spend our extra years of life; and
4. How we decide to behave as elders will, in all likelihood, become the most important challenge we will face in our lives.

• Unconsciously Incompetent
• Consciously Incompetent
• Consciously Competent
• Unconsciously Competent

We are talking today about deep Change
• The first thing you need to do is ask yourself . . . “Where do I need to change?”
• It’s Personal and Professional
These practices have existed for so long that they seem normal **BUT** they are practices that would rarely be found in our own homes.

• What are those practices??????

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  – Change all Three to be successful!

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Institutional Model

- Meals are prepared in a large institutional kitchen, often far away from the elders
- Meals are placed on trays with plastic lids with utensils in plastic bags
- Meals are transported in carts often sitting for long periods of time while the cart makes its journey from the kitchen to various floors or dining rooms to be handed out
- Dining takes place at set times in an often noisy and crowded dining room
- Little to no choice about what they eat
- Set meal times
- Food is less than impressive due to its journey

How we Changed

- Everything we do is intended to be home
- The kitchen area is open and part of the dining room
- Elders are stimulated by the rattle of pots and pans, the smells of the meals being prepared and the familiar activity of someone preparing the meal
- Meals are served on china
- Tables are set just like home
- Dining is conducted in a small and more intimate environment
- Elders can make choices regarding the foods they eat
- Elders dine in an environment with sights, sounds, and smells they can relate to
- Serving meals at times that meet the individual needs of elders
- Elders may assist with food and dining room preparation
Helplessness

- Self service of snacks, input on food, liberalized diets
- Self feeding is promoted by a more intimate and familiar environment
- Adding your own cream and sugar
- Making choices
- Filling salt and pepper shakers

Boredom

- Preparation of the meal
- Elders may assist with meal preparation, mixing batters, making sandwiches, tossing salad, preparing vegetables
- Preparation of the dining room
- Folding napkins, setting silverware, arranging centerpieces
- Cleaning up after the meal
- Clearing the table, wiping the table, helping with the dishes
- Special events selected by elders

Loneliness

- Combated by cultivating relationships around the dinner table
- Having unlimited use and access to the dining area and interacting with others doing the same
- Dining room is a natural congregating area
- Discussions of the upcoming meal, meals are remembered, shared dining experiences
- Reflecting on the meal that has been served
- Familiar circle of friends
- Dedicated staff
Stories from the cottages

• Elders feeding themselves that previously did not
• Familiar staff that can experiment with foods to find things elders will eat
• Tailor made meals for those that would not eat
• Colored plates = increased attention = better dining experience
• Elders comfortable eating outside of their rooms
• Growing Groceries!

99% of the ten of thousands of nursing homes in this country do not have front porches, door bells, family rooms, fireplaces, and backyards because they were built as institutions

Leadership is about YOU!

– Model the Way
– Inspire a Shared Vision
– Challenge the Process
– Enable Others to Act
– Encourage the Heart
• Model the Way
  – Walk it and Talk it all the time
    • Put it in front of people! It has to literally hit them in the face all the time
      – Quotes
      – Videos with pictures
      – My presence
      – Newsletters
      – LHB Boards – White Boards in hallways!
    • Use those opportunities to celebrate successes and to reward and recognize the behavior you are looking for in others!

• Inspire a Shared Vision
  – It takes multiple opportunities for people to grasp where you are trying to lead them
    • Recognize that everyone learns differently
    • Take LOTS of Pictures – Use Flip video camera!
    • Create a staff opportunity chart
    • Talk to people constantly

• Challenge the Process
  • This First! Teach communication skills
    – I statements, giving and receiving positive and negative feedback, conflict resolution
    – Recognition that as healthcare workers we are trained to look for a problem and solve it – we have to retrain our brains!
    – Ask what went well? Say tell me about . . . Look people in the eye, listen, clarify what you have heard
• Then . . .
  – Ask questions
  – Don’t accept the status quo
  – Push yourself and others out of their comfort zones
  – Create teams around things you would like to change  Example: permanent assignments
  – Take risks
  – Understand that this can NEVER stop!

• Enable Others to Act
  – See yourself as a servant – What can I do for you
  – Or a Brush Clearer – Clear Barriers for your staff!
  – Ask People – Do you have the tools and resources you need to do your job
  – Encourage people to take initiative – TELL your staff they will not get in trouble for trying – Inactivity is what will get them in trouble!
  – Don’t Own their problems for them
  – Be Patient!

• Encourage the Heart
  – Catch people doing well – thank them right then and there
  – For all you do, this buds for you!
  – Remind folks why we are in this, who is it about
  – Capture the “what’s in it for me” be sensitive to it
  – Share your heart — Write thank you notes
The champion is “someone in the organization who feels a moral or ethical duty to create an environment that is resident-directed, life-giving, and enriching.”

—Steve Shields, 2003

Inspires staff, residents, families to participate in the change, ultimately growing more champions

• Building Community
  – Include and Involve – Create High Involvement
  – Seek Meaning and Contribution
  – Share Decision Making
  – Create Opportunity for Learning and Growth
  – Celebrate Individual and Team Contributions

An elder is a person who is still growing, still a learner, still with potential and whose life continues to have within it promise for, and connection to the future. An elder is still in pursuit of happiness, joy, and pleasure, and her or his birthright to those remains intact. Moreover, an elder is a person who deserves respect and honor and whose work it is to synthesize wisdom from life experience and formulate this into a legacy for future generations.

—Barkan, 1977