Instrumenting Culture Change in Affordable Housing
Conference Call January 26, 2010

Participants: David Sprowl, Denise Bowell, Julie Peterson, David Brainin, Steve Post, Susan Hutchison, Colleen Bloom, Kim McRae, Walter Coffey

<mark>NEXT CALL: Tuesday, February 16, 2pm EST</mark>

Welcome & Introductions

The previous minutes were reviewed. Kim pointed out that in the beginning of the Artifacts document, there are explanations for each category used in the tool and asked for all to review them as we may want to do the same for the AH instrument. (Refer to end of minutes – Categories from Artifacts with BRIEF explanations listed).

We were reminded about our language/vocabulary: Instrument/Category/Elements. Kim and Walter suggested the group glance through the "Quality First Self Study" to see if there may be some ideas from that document.

Part I: Work on Categories

LEADERSHIP (Colleen Bloom, Jason Pincus, David Sprowl)
The group with the Leadership Category presented their information. We had a good dialogue about the term "leadership" and what should be connected with that Category. For AH "leadership" needs to be broader. Also about being "Empowered" – making connections to expand their engagement to expand range of resources. Inspirational leadership, open door, customer satisfaction more broadly, resident engagement builds a sense of community, continuity, residents/staff/families in community network of their peers to create community.

We discussed "average number of staff" (maybe 4-5% of resident population, so a community with 200 residents may have an average of 8-10 FTEs).

Regarding leadership (and maybe for the other categories as well), we discussed the need for *background* and maybe some *principles* for the category. For example, leaders are throughout the org in any position, staff need to be empowered to respond, etc.

This developed into an interesting dialogue about some appropriate categories for AH. Kim and Walter shared with the group categories that Steve Shields and LaVrene Norton used in the Household model. These include: Organizational Structure (decentralized self-led teams), Physical Environment (reflects home), Home & Resident Directed Life (Service), Financial Sustainability, and Values-Driven Leadership.

We moved into a spontaneous discussion on language. Home, neighborhood, apt/unit, community. What do we mean by HOME if it's outside of their "unit?" Most agreed that more were starting to call the facility a *community*. Some said halls (of apt buildings) were referred to as *neighborhoods*. Community is not "home." (People hate the phrase "THE HOME!") The apt/unit is the "home." Some residents named their building as a "neighborhood" (like a "subdivision). New move-ins: "Welcome to the neighborhood." "In our community" not "In our building." How does "external" community fit in. External community is opportunity to broaden the reach outside of the "building" or the community of buildings.
Building = Community
Floors/Halls/Wings = Neighborhood
Apartment/Unit = HOME
LSS – concerted effort to use that (?)

(#48 – CNAs attend resident care conferences.)
We discussed the Service Coordinators (SCs) were the closest staff parallel to CNAs
They are focused on engaging the residents and connecting them to services.

(#49 – Residents or family members serve on home quality assessment and assurance committee.)
Another spontaneous dialogue emerged from the Quality Assessment (QA) idea. We discussed resident satisfaction surveys (when/how/to whom review results, etc.), open door policies, customer service focus, etc. Tenant relations piece in MOR – can include info. How to show that management is listening. How does resident council "relate" to the survey – do the residents sit on the committee to write it? Are all responses shared with the residents? (Someone said they would share theirs with the group?)

(#50 – Residents have an assigned staff member who serves as a "buddy," case coordinator, Guardian Angel, etc. to check with the resident regularly and follow up on any concerns. This is in addition to any assigned social service staff.)
There are "Buddy" checks ie safety checks/floor checks. How are these handled – resident-driven? How does resident initiation package fit in here. House Rules – some are very specific and formalized. Engagement and Empowerment. Getting to Know You. Celebrating Diversity. Social Nature of Living in Community.
Conflict resolution training for residents/staff. Social engagement via planned activities and resident-driven activities, use of house rules – building a sense of community key. Julie mentioned a tool to incorporate resident to resident complaints – for complains about other residents. Management is not always empowered.

(#51 – Learning Circles or equivalents are used regularly in staff and resident meetings in order to give each person the opportunity to share their opinions/ideas.)
This is an unfamiliar concept in AH. After it was explained learning circles are looked at as a great concept and interesting opportunity.
(Information on Learning Circles/How to Do is on website)

(#52 – Community Meetings are held on a regular basis bringing staff, residents and families together as a community.)
Most have community meetings.
Social engagement is about resident-driven activities.

ENVIRONMENT (Denise Bowell, Gail Matillo)
The group began a discussion on the Elements identified by this group. We agreed with their observations. We discussed use of paint – in most residents do not get to choose their paint as apts/units have to be "ready" for the next person to come along. It has to be available by "x" date. They are supposed to repaint every 5 years. It's worth putting "out there" how to let residents choose their own paint colors.
The important of Lighting was discussed.
Emergency Call Systems (any loud overhead paging?)
REAC (regulatory)

(25. Home has no rule prohibiting, and residents are welcome, to decorate their rooms any way they wish including using nails, tape, screws, etc.)
Start allowing residents to put up a border or wall paper? Let resident pick the color of paint for their apartment home?

(26. Home makes available extra lighting source in resident room if requested by resident such as floor lamps, reading lamps.)
We cannot start providing lamps but we could look at our fixed lighting fixtures to ensure they provide the most light possible.

(35. Home warms towels for resident bathing.) Not applicable to affordable housing

(39. Pager/radio/telephone call system is used where resident calls register on staff's pagers/radios/telephones and staff.) Have emergency call systems monitored 24/7.

We discussed the following as potential Categories for AH:

- **Values Driven Leadership**
  Julie said that many aren't comfortable with the term "leadership"
  There is confusion about it/they are "tired" of that term/overused
  *glossary will define what we mean – every staff leader is leader, we're all leaders, lead by example, you don't need a title to be a leader…
  Empowerment in housing
  Don't worry too much about staff sizing

- **Work Place Practices**
  (include organizational structure, staff relations, staff who are empowered, learning circles, training, etc.)
  Relationships with residents, staff scheduling, when staff available, staff dev/training/recognition/evaluation, uniforms, job dev, career ladder (growing skills and judgment, overcoming silo thinking…
  Organization structure may be only 3 people
  Stand alone/multi-site/regional
  40 unit – 1 site person with pt. maint.
  Steve Post mentions that it depends on what each provides (meals? Kitchens?)

- **Physical Environment (not Environmental)**

- **Home & Resident Directed Life (not Care Practice)**
  Community & Resident-Directed Life
  "Care Practice" is odd "category" for AH; it's more about customer service;
  (Resident Relations? Resident Support?, Customer Service)
  Admin, Service Coordination, Activities, Maintenance, Chaplains, Wellness staff, Food Service
  Supporting residents as they age in place
  Susan: Look at it from Customer Service point of view – how our daily practices affect people we are serving
  "CC" is so skilled nursing oriented that we have to think differently

- ???

- Outcomes to include???

The group will think about these for the next call.

Part II: Additions/Deletions

Not ready for this yet

BUT note that we discussed creating a *glossary* to define the terms we use
adding *appendix* with examples
background and maybe some *principles* for the category

Part III: Pilot Evaluation Tool
      (Timeline)

Kim and Walter will prepare a draft for discussion during the next call.

Added to Minutes (Not covered in the call)
Taken from the "Development of the Artifacts of Culture Change Tool"
Information on CATEGORIES from ARTIFACTS:

<u>Leadership</u>
Recognizes it takes the willingness to change policies, systems and practices
Vision
Transfer of knowledge into practice

<u>Workplace Practice</u>
Management practices that affect a culture of retention
(???What is the turnover of staff in AH???)

<u>Care Practice</u>
Ways to restore to elders as much control, choice and normalcy as possible

<u>Environment</u>
Create a meaningful relationship b/t the person and her/his living environment
(home vs homelessness)

<u>Family and Community</u>
Embrace and draw family members into a shared partnership of supporting and caring for the resident

<u>Regulation and Government</u>
Regulatory piece and connection