

Changing The Culture of LTC Symposium Sept. 8, 2010 Athens, GA

Initials	Before	After	Grade	Comments (if any)						
CRS	8	9	A+	If feels great to be on our way to C.C. Thank you so much for the leadership,						
				resources and call to networking ACTION!!						
CAA	3	7 1/2	A	But needs to be repeated, so I can get to 9!						
LA	3	7	A							
SB	3	7	A	Excellent						
AR	4	7	A	Looking forward to obtaining more info & change						
BJ	6	8	A	I learned a lot about Culture Changes in Long Term Care. I would like to know much,						
				much more. The seminar was excellent, educational and a must to know.						
VR	2	9	A							
VB	3	10	A	This was a very good workshop, I am new to this type of work.						
				So it has really helped me.						
KB	2	8	B+							
JH	6	10	A+	What a great symposium. We are planning on implementing many of these great						
				practices in our inservices to facility and staff.						
DM	7	9	A	I am excited to be a part of this kind of movement. I began as a CAN (companion)						
				in 1983. I now serve as reginal nurse for a chain of nursing centers.						
RM	3	8	A	Excellent Presentation!						
MD	5	10	A							
PJD	6	9	A+	Excellent! Thank you for prioritng such an interesting and motivatiing program!						
SBW	8	10	A+							
EAM	6	8	A+							
G	3	8	A+	Well planned and organized. Each speaker was very interesting.						
RVC	4	8								
MTB	6	9	A	Only suggestion: Table set up was very uncomfortable hard to see speaker, etc.....						
				The rest was AWESOME, thank you!!						
ASC	8	9	A							
LES	6	8	A							
PS	7	8	A							
JAA	7	8	A							
AG	7	8	A							
MLB	3	8	A+							
LP	3	8	A+							

ABA	4	9	A	Thanks a lot for the invite. I learned a lot and I am more inspired to work with my Elders in our home. Inspired to start in my little ways some culture change.
KB	5	8	A	One of the BEST meetings I have attended! Reignited my HEART for my passion as a professional in LTC. Thank You! Thank You!
DS	5	10	A	Would definitely like to make a culture change at our facility.
VB	3	10	A	Loved all the info. I received and heard. This was an eye opening experience. I'm excited about getting started with more changes in dietary.
TDK	3	10	A+	We needed this....nurses go into healthcare because they care & now maybe the focus will be put to the person or resident.
KM	4	9	A	Great Day!!!!
CBA	5	9	A	
RPM	3	9	A	Good Job!!
JC	2	7	A+	Great Day! I learned a great deal. I am very motivated to go back and make changes. One of the best seminars I have attended.
MR	2	7		Excellent and informative training. I really enjoyed this training. Need to have more than twice during year.
RS	4	8	B	
CE	2	8	A	
EU	3	8	A+	Thanks for the lunch and this workshop. Culture change - yes! Now to make this all happen in the mountains.
DM	3	9	A	Great Training!
RL	3	8	A	
LS			A-	Great new information to help advance practice in LTC. The information was excellent. But 2 hours of lecture is torture!(without a break
PS	6	8	A	AHA Moment: To know is not enough- there has to be some action
KB	6	8	A	
VB	0	10	A	
RS			A	This was Great!
JP	5		A	We may be at the point of dividing the "Culture Change" into different modules, Examples: Some attendees were 1st timers and others had heard the same message several times before. This was valuable for all that attended.
MM	4	10	A	Good class. I did not fall asleep, that means it was some good speakers!
JKD	2		A	
AMD	6	7	A	

CEW	4	8								
CCM	6	8	A	Excellent						
LCB	2	8	A+	When you talked about not having any "say" or "control" about your life, I thought of the movie, "The Changeling".						
CTR	7	9	A	Every presentee, person here, experience were thoughtful, meaningful and absolutely delightful!						
	6	8	A	More education on concrete ways to implement Culture Change.						
AW	3	7	A							
	2	7	A+	Well planned and organized. Speakers very, very knowledgeable.						
JTK	5	10	A+	Safety is not involved in any info.						
AH	5	6	B							
EG	4	10	A							
LB	2	8	A	Thank you <u>so</u> much! What an eye opener.						
CMS	1	6	A+							
EB	2	6	A	Very informative- especially for someone who isn't knowledgeable						
DC	6	9	A							
CM	7	9								
SKS	7	10	A	I really enjoyed and learned a lot.						
MGH	2		A+	Very enlightening. Made me think of how I could help bring Culture Change of Georgia.						
KG	6									
CRH	5	8	A							
LP				AHA Moment: Culture change impacts everything in our lives!!						

AHA Moments from Athens Symposium (All information is typed just as written)

- MS The Needs of people with mental illness are very similar to, if not those of older adults: Patience want opportunities to grow relate to others, give, receive, etc..
- BJ Care= helping a person grow culture
- GE "Behavior is not a problem it is residents way to communicate"
- KB 1) No one should die alone. 2) Coming here to LIVE. 3) "Make me feel important" treat ever everyone as
- PH 1) Make me feel important. Listen to people. 2) Bonding/attactment value
- LS The one reason culture change is here to stay is as good as a facility is or maybe, most individuals wouldn't want to live there.

- RM "Behavior is not a problem -- the environment is" --Rose M. Fagar
- JH Make me feel important -- Karen Nichols
- CH The resident (person who is the focus of our care) belongs on our organizational chart
- CH Asking residents and families what they want their care to include upon admission and throughout life at this home so that they are the directors of their care
- DB 1) People/consumers in control of their lives. 2)An elder is growing in each of us.
3) Change the language first.
- KO Karen's revelation that her work with elders helped with childcare demonstrated that we are all connected and need for love, connection and inclusion is universal and lifelong.
- JD That it is possible to provide high quality care (medical, physical, environmental) in ways which do not tear down, but build up, the individual person's whole being.
- RL How "UN HOME - LIKE" Assisted living facilities traditionally have been.
- SBF It's so easy to start taking small steps towards independence -- why doesn't everyone do it ?
- AN Agree that values are easier to espouse than to practice, but why are there not more "Brushy Creeks"?
Is it due to nursing home Lobby resistance?
- KB Risk taking is a part of living. Breaking routine is O.K.
- MD Even the smallest changes in language and your environment make the biggest changes in the residents life.
- BS The cottage idea. Combining staff housekeeper, certified nursing assistant and cooks
- LA Cross training of staff -- for better unit of community
- LS A facility should be a place to live not die and would you want to be a resident of your facility?
- TC Combining the cook, housekeeping and certified nursing assistant in one 4, 3, 1.
- No nam That certified nursing assistant are so difficult to get good service from because they too are lacking culture growth.
- Dawn That people who are "drooping" in nursing homes are essentially shutting down and protecting themselves I had not thought of it in those terms before. How true
- JG Making the experience of death a special ceremony.
- KS The thought of taking care of 78 million baby boomers strongly encourages me to make a significant change for my facilities.
- JD Do you practice your mission and do staff fit?
- LB We can improve the health of individuals in LTC drastically by improving their environment.
- MB Re-name my facility to be less institutionalized and post staff at each hallway
- EBM Make second wind dementia kit to help staff realize effects of dementia/aging like we use our disability exercise to help the identify with persons with disabilities

- MC "Behavior is not a problem, it is a way to communicate.
- MH Values - know each person, each person makes a difference , etc.....
- MT Slumping is a self - defense mechanism to escape what is happening around them.
- CE We "Could" always put the "should" person before the task - Ex: Take that resident to breakfast, etc....
- No nam How important it is for skilled workers to be aware of what the client needs to be an unique individual in a nursing home.
- CH Identifying the 3 absolutes one cannot live without and how easy they are to provide to residents, but aren't ever considered. If you be something different, you must do something different.
- SS The circle organizational chart was my most aha moment.
- FY I need to make a better difference in the lives of those my company serves and I need to be leading everyone forward.
- RS Facility have and "Angel List" of volunteers who will be with a resident who is alone during his/her last hours.
- DB "No one dies alone"
- JA Angels List -- No one dies alone.
- SH Nursing homes no longer have to hold the "stigma" of Nursing homes.
- CVR Learning about the cottages started that helped seniors live more independent, than staying in a nursing home environment. Wow there should be more facilities be more facilities created all over. Too limited.
- SS Change is good.
- PD Culture change doesn't need a special architect or design concept to create the facility-- you just need passion and determination.
- No nam Self-managed "campanion" teams.
- No nam A "normal" environment promotes dignity, personal growth, well being and decreases confusion and inappropriate care.
- AV I would say that it is the repeated reference by each speaker, I think, the need to reach consumer: in making culture change. All speakers have emphasized the need for providers, nurses, the aging services network, etc... To get in touch with their inner consumer (future aged person)
- MB How I can educate consumers to expect more!
- RM "Seniors come to life when life has meaning"
- No nam Relationships are the heart of life.
- RC Ombudsman as a possible career option to bridge academic, providers, and consumers and promote LTC culture change.

- JC I am so impressed with ghe whole day. It really makes me feel like we are doinmg everything wrong.
New Model -- is ah -ha moment.
- No nam I'm moving to SC so I can go to the cottages. GA is behind on the movement
- TK Build a new nursing home with the cottage style theme. Make Karen be administrator so we can get the support we need to do GREAT things!!
- SW As care provideres we should raise our expectations above average/standards to achieve a successful environment that increase the quality of life for our consumers/residents
- DMc The idea of honoring a resident at death by having them go through front door with dignity rather than out the back door.
- KE Why isn't hospice and palliative care part of helping with culture change? No mention. Especially taking about death ritual -- hospice brings that in. why don't nursing homes incorporate
- EBM This whole day has technically been an "Ah-Ha" moment. I have never really been exposed to long-term care, so a lot of the issues discussed were truly eye-opening.
- HG I was completely oblivious that this movement exists. I've never worked with LT care, so the culture change movement as a whose was eye-opening.
- BH Behaviors are a way of communication. Using HSK/Laudry Positions to create more cert. nursing assitant positions. This is an attaninable goal.
- MM Building community include CNAssitant family member working together.
- EG Culture change is not a destination but a journey.
You should continue to look for new ways to accomplish things--tasks
- WBJ The challenge of being a caregiver without the tools for knowledge.
- No nam Resident centered activity..... The nursing home Christmas party. The practice or activity should be close to how it would be at home..... - Residents help decorate tree and facility.
--Residents should receive their presents on Christmas Day or Eve and not 3 weeks before Christmas
- No nam The values of change. The 5 things for people to be loved.
- MR if people don't fit in the envirnoment have to change those people. Have to all get on same bus
- No nam Karen discussing how she got her institution to go to cottage and catering to her elders
- DMc Relating residents rooms to living in a tent -- should be more home like environment.
Normal setting not institutional setting/enviroment.
- KB One first steps can be to change our language (CNAssistant=companions, facility= home, etc.)
- VB Family kitchen for residents and family to fix meals. And residents to be able to help perepare the meal
- DS Change the language of terms used in long term care such as feeders or wanders
- No nam Naming cottages: guest cottage, vintage cottage.
- LP Have neighborhoods-- not halls such as "A" "B" "C". Give the neighborhoods names

- AD The 3 parts to change in an organization/home.
- AC **What you see in your home is a mirror, reflecting back your leadership**
- BMW Gonna use it in the office as part of our FISH project.
- VR **Cross training to all associates.**
- WBJ The ideal of staff being crossed trained to be able to cover all areas of services
- AB **A life at the nursing home is not a passage to death**
- JB "Dignity and Control" 1) Resident now called Care Partners
2) CNAssistants now called Companions(Life progression partners)
- JS **I have been a LTC Admin. For 27 years, worked at my facility for 26 yrs. I realized that the title of my main residents closet friend are companions not cert. aides.**
- CS "You get what you do" look around. Why people may be "slumping" (to "sit and hold the hand of sluper until you feel thir state of being in your leadership) WOW!
- No nam **Realize GA needs to keep pushing for person centered care-- that is possible, e.g. NHs (cottages) in SC**
- AD All things are possible.
- BW **Learning about culture change occuring in skilled nursing facilities.**
- Melina Creating work group around the processes that you want changed
- Vanessa **Slumping--a matter of self protection**
- LH Name some things that I woul not compromise on because it helps me maintain my senses/ self and even if I grew old.
- Bootsie **Cert. aides--1-4 ratio --cook--housekeeper**
- CP Must start with values of organization! No change is focused unless it is change to support/ model, reflect values important to the organization! WOW! What a way to start
- SW **Behaviors are a form of communicating**
- CM Ringing the chime when a resident dies and give other residents and staff the opportunity to pay their respect for the last time. Cureent traditional culture will perceive this as deprissing for residents to see someone die and, therefore, the resident's body is taken the back door
- CBA **1) Having onimola the facility 2) Having family members to come in a specify day to give patients meals 3) Nameing the Health for A-B-C to flower names.**
(So of the wording may not be correct due to the handwriting not being clear.
- EU No more paying, so that when someone dies - chimes 3x and say the name. Those who wqnt can come to celebrate the life of the resident--staff, family and residents.
- Jean **Resident decision making and resident's participation in helping in the kitchen.**
You have to walk the talk as being a leader.
- No nam In addition to culture change impacking seniors providers across the continuation we need to support

families (informal caregivers to provide person centered supports)

No nam "Institutional Dependency" can be presented thru culture change and it doesn't have to be expensive!

We need to rationalize th way care is provided.

KMc To know is not good enough.

MS That culture change works from economic standpoint. That "Reggie" isn't a barrier. Please consider that it's not just elders, it also people with disabilities. Many elders have disabilities too. Let's partner!
