

Culture Change in Nursing Homes & Resident Quality of Life

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*Changing the Culture and Improving Quality:
Innovations in Long-Term Care*

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Goals of Culture Change

- Improved quality of life for residents
- Greater resident control & choice
- Continuity of social life & interests
 - Real community in nursing home
 - Individuality possible

General approaches

- Transforming physical spaces
 - Private and common spaces
- Transforming staff roles
- Transforming routines & programs
- Transforming philosophy

Examples: Physical plant

- Private rooms and bathrooms
- Kitchens, laundries, fireplaces
- Residential scale & materials
- Neighborhoods within NHs
(from hallways to households)
- Spas
- Removing nurse's stations
- Gardens

Fireplace at Big Fork Valley Communities, Big Fork MN



Picture by Lois Cutler, Ph.D.

Nursing Station at Perham Memorial Hospital & Home. Perham, MN



Picture by Lois Cutler, Ph.D.

Spa at Evergreen Health Center, Oshkosh, WI



Examples: staff

- Universal workers
- Permanent assignment
- Reorganizing shifts
- Empowering staff

Examples: Programs

- End of life approaches changes
- Bathing & other routines changes
- Individualized care
- “First person” care plans
- Residents on hiring committees
- New approaches to dining

Example: Philosophy

- Rampant normality
- Assume good quality of care but emphasize quality of life
- De-emphasize large-scale activities
- Family members part of community

Under the big tent . . .

- Eden Alternative
- Wellspring consortia
- Regenerative communities
- Green House ®
(Small-house nursing homes)
- Culture Change Agents

Measurable Good Quality of Life

- Comfort
 - Security
 - Relationships
 - Enjoyment
 - Meaningful activity
 - Functional capacity*
 - Autonomy
 - Dignity
 - Privacy
 - Individuality
 - Spiritual well-being
- *is as independent as he/she wants to be

What is the Green House ®

- Vision for radically different NF (Bill Thomas)
 - warm, smart, and green
- Physical plant transformed
 - Small scale; 7-10 residents in a house
 - Home with all its symbols
 - Private rooms & baths
 - Inviting indoor & outdoor shared spaces
 - Kitchen, hearth, patio

What is Green House, cont'd

- Philosophy transformed
 - Quality of care taken for granted
 - Quality of life not sacrificed
 - Elder development nurtured
 - Celebrate normal life
- Part of larger community

What is Green House, cont'd

- Organization & staff deployment transformed
 - Each Green House self-contained
 - Each Green House has dedicated direct care staff
 - Group of GHs together have NH license
 - Direct care staff are universal workers
 - Cooking, laundry, light housekeeping, personal care, elder development
 - Direct care staff do not report to nursing
 - All professional staff in visiting clinical support teams A
NHs, Green Houses:
 - GH meet regulatory expectations
 - GHs provide care within Medicaid reimbursement

First implementer: Methodist Senior Services of Mississippi

- 10 Residential Campuses in MS
 - Independent housing, Assisted Living, some NFs
- Flagship campus in Tupelo, MS
 - Corporate headquarters
 - 140-bed NF ready for physical renewal
 - Became 1st implementer of GH
 - Opened 4 10-person GHs in May-June 2003
 - \$\$ raised from Alzheimer's Assn so 2 GH's used for residents of locked dementia SCU
 - Needed to flesh out details of concept in operation
- As of November 2005: 112 residents in GH's
 - Medicare unit planned only for main campus.

Waiting For the Move



Picture by Lois Cutler, Ph.D.

New Home



Picture by Lois Cutler, Ph.D.

Welcome: Old & New Culture





Welcome:

**New Culture at
Personalized
Room Entrance**

Picture by Lois Cutler, Ph.D.

Shared Space - Old Culture



Pictures by Lois Cutler, Ph.D.

Private Space - New Culture



Picture by Lois Cutler, Ph.D.

Lounge - Old Culture



Picture by Lois Cutler, Ph.D.

Lounge - New Culture



Picture by Lois Cutler, Ph.D.

Dining - Old Culture



Picture by Lois Cutler, Ph.D.

Dining - New Culture



Picture by Lois Cutler, Ph.D.

Work Space – Old Culture



Picture by Lois Cutler, Ph.D.

Work Space - New Culture



Picture by Lois Cutler, Ph.D.

Technology - New Culture



Pictures by Lois Cutler, Ph.D.

Best friends



Picture by Judith Rabig, Ph.D.

Resident & feathered friend



Picture by Lois Cutler, Ph.D.

Bird back home



Picture by Lois Cutler, Ph.D.

Intensive Research (Commonwealth Fund)

- Quasi-experiment with 2 comparison groups
 - sample of residents remaining at Cedars NH
 - sample from Trinity Health Care, a NH of same owner in nearby city
- 4 waves of data collection
 - May-June 2003 (pre-move data)
 - 3 more times at 6 month intervals
- Respondents
 - Residents
 - Most involved family member

Hypotheses

- Residents: ↓
 - ↑ QOL, ↑ satisfaction, ↑ social engagement
 - health no worse than in conventional “medical model”
- Family caregivers
 - ↑ engaged with residents, ↑ satisfied, ↓ burden
- MDS-derived QIs expected to be as good or better than conventional “medical model”

Resident Outcomes

- Compared to the 2 control settings, GH residents reported a better quality of life and greater satisfaction.
- GH residents equaled or exceeded standard quality indicators

Family Outcomes

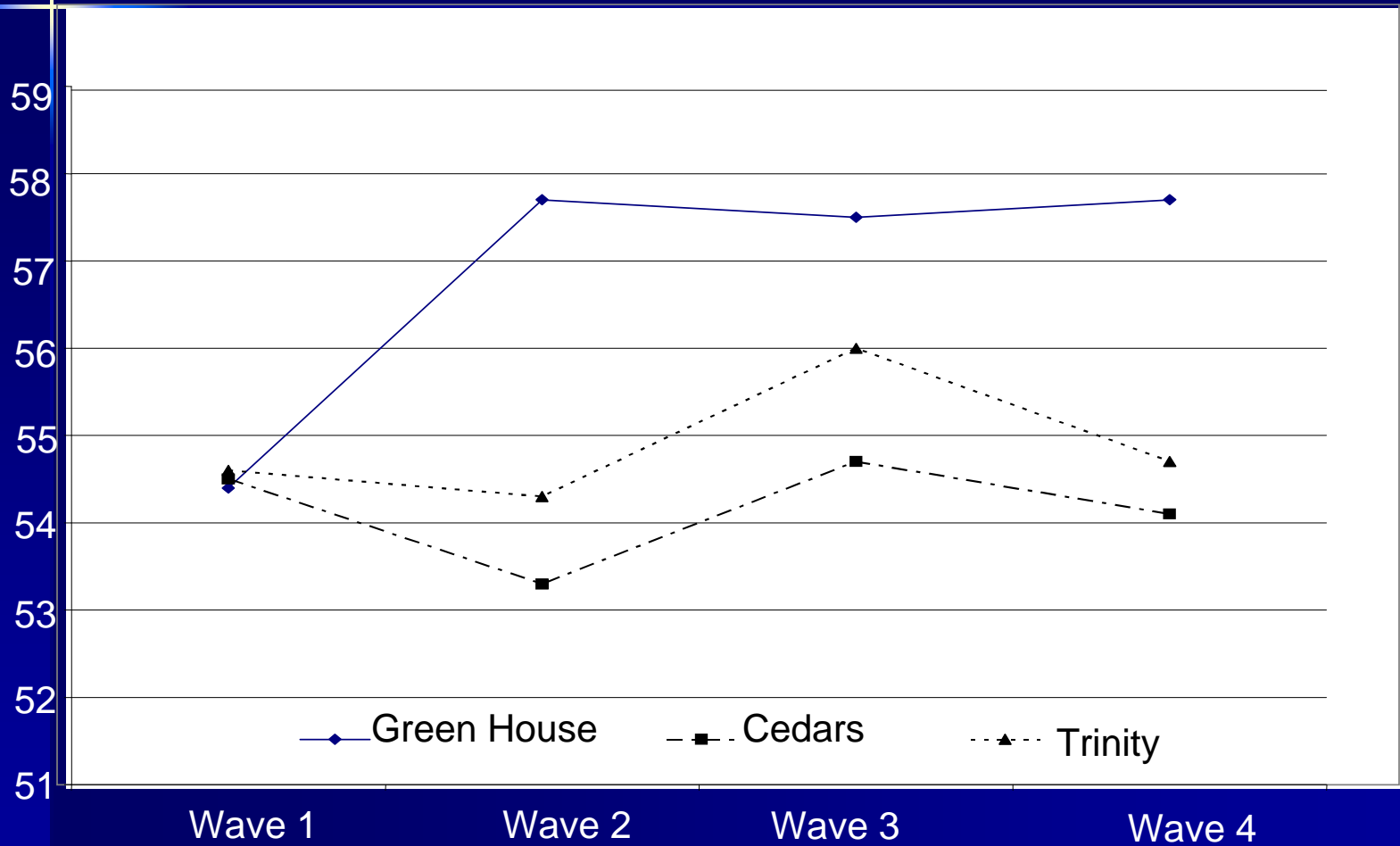
- Compared to the 2 control settings, GH family members reported greater satisfaction with their relative's care and life.
- They also reported greater satisfaction with how they as family members were treated.

Staff outcomes

- Compared to 2 control settings, frontline staff :
 - felt more empowered to assist residents.
 - knew residents better
 - experienced greater intrinsic job satisfaction
 - were more likely to remain in job
- Qualitative data detailed satisfying elements of jobs and challenges

Staff intrinsic satisfaction

(15 Items- range 15-60)



What's happening now

- National Green House Project
 - 7 other NH projects in operation
 - more on drawing board
- Small-house nursing homes
 - Otterbein Avalon communities in residential neighborhoods
 - High rise models

Expansion & sustaining

- Drivers of expansion
 - Consumer preference
 - Replacement of old NH stock
 - Competition from Assisted Living
- Needed for sustaining
 - Continuous training
 - Vigilance against institution creep
- Regulatory review/interpretation
- Re-inventing key staff roles

Presbyterian Villages of Michigan—the Village of Reford (1 of 2 Green Houses ®)



Picture by Lois Cutler, Ph.D.



**Small-house
Nursing Home
in the Avalon
by Otterbein
Perrysburg
neighborhood,
Perrysburg,
OH**

Picture by Judith Rabig, Ph.D.

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