Culture Change and Trends in Long-term Care

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Long-term Care...So Much More Than Just Nursing Homes!
The PERSON is the Core!

What is Culture Change?

“Culture change” is the common name given to the national movement for the transformation of older adult services, based on **person-directed values and practices** where the voices of elders and those working most closely with them are solicited, respected and honored. Core person-directed values are relationship, choice, dignity, respect, self-determination and purposeful living.

(Pioneer Network)
We started like this...

And ended up like this!

Where did we go wrong?!
It’s Time to Circle Back to This!
The Government Agrees...Actually, They’re Requiring It!

What does the First Amendment say? ...The First Amendment (Amendment I) to the United States Constitution prohibits the making of any law...impeding the free exercise of religion, abridging the freedom of speech, infringing on freedom of the press, interfering with the right to peaceably assemble, and prohibiting the petitioning for government redress of grievances.

In layman’s terms—you have the right to say what you want, pray when you want, get together with friends over poker and pizza, and gripe up the chain of command when you’re mad.
Guess What?

Elders and those with mental handicaps have those rights too!
As of November 28, 2016, the person takes the forefront in the regulations.

CMS (Center for Medicare and Medicaid Services) issued 700+ pages of NEW regulations for skilled nursing with person-centered care at the heart!

That means even the government recognizes the fact that it's time to get back to basics.
How Do We Begin Giving Those Rights Back?

1. Talk the Talk!

- Feeder (since when did I turn into a fish?!)
- Ambulation (when is the last time you “ambulated” around town?)
- Diaper (I’m NOTa baby)
- Bib (still not a baby)
- Toileting (have you ever “toileted” yourself? !)
- “Behavior” (never good)

And the big “F” word..............................
“FACILITY”
2. Get the Food Right!

What Do You Want for Your Last Meal?
Food is More than Something to Keep You from Starving!

Restaurant industry in the US
- $799 billion: Restaurant industry sales.
- 1 million+: Restaurant locations in the United States.

Gas station convenient stores
- 1.2 million dollars/store
- 144,341 stores in the US

What does that translate into? People like to eat GOOD food, of THEIR choosing, including SNACKS 😊

Time for us to get on board!
Real Food First

- Foods with naturally pureed consistency…
  - Mashed potatoes, puddings, yogurt, applesauce

- Garden grown or locally grown as 1st choice in the kitchen…even better if the residents get to participate in growing, picking, peeling, and preparing it!

- Foods with natural fibers (e.g., ditch the laxatives dude!)…
  - Lettuce, celery, broccoli, cabbage, apples, pears, asparagus, bran…roughage in the digestive system. Fabulous for gastro mobility!

- Foods with natural hydrative qualities…
  - Cucumbers, tomatoes, radishes, grapefruit, iceberg lettuce…just to name a few (www.health.com).
Medically-Indicated Diets

- **Diabetic** (Released Feb. 2016 from American Diabetes Association...Liberal diet plans are preferable to therapeutic diets - more food choices benefit nutritional needs and glycemic control.)

- **Low sodium** (typical 2g Na+ diet only shown to reduce systolic HTN by 5mmHG, and diastolic by 2.5mmHG)—you can be off more than that with the wrong BP cuff!

**New Thought**—should only be used when benefit to the individual resident has been documented [and it should be continually reassessed]

- **Low cholesterol/low fat/cardiac diet** (only reduce lipids by 10-15%)...aggressive pharmacological use of statins, etc. = 30-40%
Altered Consistency Diets

Why do we give someone an altered consistency diet? 

Can you say “cruel and unusual torture?!”

- Inconsistent research available on effectiveness of altered diets vs. choking and aspiration pneumonia and regular diets
- Increase in need for assistance (think Parkinsonian tremors and pureed eggs...good luck with that man!)
- Dissatisfaction with food quality and taste = reduced nutritional intake = dehydration and WEIGHT LOSS 😞 Can’t we just give them a shake?!
  - Decreased enjoyment of eating = reduced socialization, increased depression
3. Let Them Sleep In!

Stop and think for a minute... how do YOU feel when you haven’t had enough sleep?

- Bright-eyed and bushy-tailed?
- Groggy?
- Just plain ugly?
Poor Sleep as a Potential Causal Factor in Aggression and Violence

• “Clinical studies have revealed that sleep problems can be a causal factor in the development of aggression and violence.”

• “Studies show that treatment of sleep disturbances reduces aggressiveness and problematic behavior.”

• “It is of great importance to identify the individuals at risk, since recognition and adequate treatment of their sleep problems may reduce aggressive and violent incidents.”

Kamphuis, J. et al, Sleep Medicine, April 2012, Vol: 13, Issue 4, Pages 327–334
Clinically-based, evidenced-based practices for Reducing Falls

- Study done by Empira researcher Sue Ann Gundermann, RN, BA, MA
- We completed a three year PIPP Fall Prevention program in 2011 to investigate and identify the root causes of resident falls in 16 skilled nursing facilities
- Empira awarded 3-year MN DHS PIPP grant, began 10/1/08
- Project implemented best practices from evidence based studies
- Goal: Reduce CMS QI/QMs; Falls, Depression & Anxiety,
- Decline in LL ADL, Decline in movement
- Reduction Goal: 5% first year, 15% second year, 20% third
The Results...

- Prevalence of Falls (number of residents who have fallen) - decreased by 31%
- Incidence of Depression - decreased 20%
- Incidence Worsened ADLs - decreased 17%
- Incidence Worsened Room Move - decreased 12%
- Falls per 1000 resident days (number of falls that occurred) - decreased by 14%
- Recurrent Falls - double digits to single digit
Which led to this study for Natural Wakening…

- Empira awarded a 3-year DHS grant, began 10/1/11
- ~ A project implementing best practices from evidence based, scientific research studies
- ~ 2 Primary Goals: Undisturbed sleep at night, Awake and engaged during the day
- ~ Reduce baseline average for 4 selected CMS QI/QMs: Depression, Behaviors, Pain Long Term, Use of Antipsychotics, Pressure Ulcers
- ~ Reduction Goal: 2.5% baseline → 2nd yr; 5% baseline → 3rd yr
- • 23 SNFs, 4 companies participate in the “Restorative Sleep Vitality Program” (RSVP)
Signs of Sleep Deprivation

Sleep Requirements: Signs & Symptoms of Sleep Deprivation

Adult humans require an average of 7 - 8 hours of uninterrupted sleep each night. When this requirement is not met, all or some of the following symptoms can appear:

- Excessive tiredness during the day
- Decreased alertness
- Memory loss
- Disorganized, incorrect thinking
- Problems with processing things that you see and/or hear
- Increased irritability
- Loss of emotional control, e.g. anger management
- Increased behavioral expressions of discontent – loss of social appropriateness – the “short wick” symptom
So the Question Remains... **What Gives Me the Right to Dictate YOUR schedule??**

The only people who we are entitled to dictate when they sleep and get up are 1. toddlers and teens 2. prisoners

PS...most of the folks we care for are retired. When you finally get there, do you want me waking YOU up??
4. Remember, not everybody likes BINGO or coloring books!

**QUESTION #1**—how do you spend YOUR day?

**QUESTION #2**—where do you find YOUR purpose?

**QUESTION #3**—why should all that stop just because you’re living somewhere else?
Goal of “Activities”?

Not to just Pass the time, but rather to add meaning to your day and to your life.
Entertained vs. Engaged
Out With the Old...

- Recreation therapist
- Restorative therapist
- Art therapist
- Social therapist
- Music therapist
- Activity director

When is the last YOU had “social therapy?!”
In With the New...

Eden Alternative Greenhouses... first one in Missouri to open Spring 2017!
- REAL gardening...and eating what you grow!
- Individualized music...a very special connection via iPods and MP3s
- Happy hour...don’t worry, they’re not underage!
- Writing clubs, reading clubs, coffee clubs...
- Outdoor recreation
- Connect with local libraries for book exchanges
- Wolfner Talking Books for the vision impaired

What do YOU like to do? What do you wish you had more time for?
And the Secret Weapon...KIDS!

- Boy scouts
- Girl scouts
- Employee’s kids
- Family days
- Local schools and daycares
- Teen Challenge
- Sports teams

*Remember, it takes a village to raise a child...and that goes both ways!*
What’s Out There?

Second Wind
Music & Memory
Surf therapy
(if you can dream it, it’s probably out there!)
One Success Story...
Learning More About Culture Change

- Missouri Leading Way—Sam Plaster, DHSS State Culture Change Coordinator
- MC5
- Pioneer Network
- Artifacts of Culture Change
- QIPMO
Getting Involved in Culture Change

- 14 Regions across the state... 3 close to us!
  - Cape Girardeau
  - Poplar Bluff
  - Farmington

- Annual Culture Change Conference, May 2-4, 2017

- FREE meetings, FREE CEUs for administrators, activity professionals, social workers.

- Not-for-profit, educational, open to anyone!

www.momc5.com
Long-term Care…
Where We’re Struggling

- **STAFFING**
- Proper Home Placement…Mental health meets dementia meets rehab…a mixed bag
- **STAFFING**
- Regulations and rules without respite
- **STAFFING**
- Connectivity of community understanding
What’s Ahead…

- Even MORE focus and respect on the individual!
- Language, possibilities, and choice changes for those who live and work in long-term care.
- Changing the status quo—not my routine but yours.
- More than just the mundane opportunities for things to do.
- Community education for families.
- Cohesiveness and connectivity across the health-care spectrum from doctor to dietician.
Resources

- Center for Medicare and Medicaid Services (CMS). www.cms.org
- MC5. www.momc5.com
- Pioneer Network. https://www.pioneernetwork.net/
  - Dining Practice Standards.
  - Artifacts of Culture Change.