

CULTURE CHANGE MODELS IN MICHIGAN LONG TERM CARE COMMUNITIES

Presented by:

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MAPCC (Michigan Alliance for Person Centered Care
Communities).

3rd Annual Certificate of Need Seminar

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PRESENTATION OVERVIEW

1. MAPCC mission/purpose statement
2. History of Long Term Care
3. History of Culture Change in Michigan
4. Current Culture Change Models utilized in Michigan Long Term Care Communities

MAPCC (Michigan Alliance for Person Centered Care Communities).

MAPCC is the statewide culture change coalition group meeting every other month with a mission/vision...

Through partnerships and shared learning, MAPCC promotes an array of adult long-term care support and services that create strong communities deeply rooted in dignity and respect; rich with relationships and opportunities for self determination and personal growth for all.

Overview of the History of Long Term Care

Prior to approximately 1930; most frail elders were cared for by their family members at home. At this time in history it was common to be born, live and die all within the same community.

In the United States during the 1930-1940's the country began to change with industrialization and increased mobility, thus the extended family began to disperse. At this same time in history many advances in the field of medicine were taking place and people were living longer, but in a frailer condition.

Because of the medical advances that were occurring, hospitals were being held in high esteem – they were viewed as progressive and positive. So when the United States was faced with an increasing population of frail elders with no one to care for them, we borrowed from the hospital medical model of care and created nursing homes...essentially "little versions of hospitals."

History of Long Term Care (cont'd)

1965- Medicare – government funding system is created for short term care for the elderly.

1966 – Medicaid – Government funding system introduced meant to be health insurance for those in need.

1975 – Conditions of Participation is created which are rules and regulations for facilities receiving Medicare and or Medicaid funds.

1978 – PA 369 – Mandating building requirements for facilities receiving Medicare/Medicaid funds

History of Long Term Care (cont'd)

1986 – Diagnosis Related Groups (DRG's) are created as a system of payment where reimbursement was determined by the diagnosis. This resulted in being a motivator for hospitals to release elders "sicker and quicker" as this would increase their profitability resulting in a higher acuity for the nursing homes.

1987 – Omnibus Budget Reconciliation Act – (OBRA) introduced to change the focus from rules and regulations to positive elder outcomes.

1992 – Minimum Data Set (MDS) – A federally mandated clinical assessment process is developed that must be completed on every resident who receives Medicare and or Medicaid funding.

History of Long Term Care (cont'd)

1996 – Prospective Payment System (PPS) is introduced as a payment system dependant on a diagnosis a defined by a RUG score (Resource Utilization Group) which comes from MDS information.

2002 – CMS (Centers for Medicare and Medicaid) permits states to use CMP (Civil Monetary Penalties) for culture change efforts.

2003 – CMS clarifies regulations using resident-centered care principles

2006 – CMS acknowledges changes in the survey process related to culture change.

2008 – National Symposium on Culture Change and Environmental issues takes place co-sponsored by CMS and the Pioneer Network.

HISTORY OF LONG TERM CARE (cont'd)

2009 – Implementation of new interpretive guidelines are created by CMS as a result of the 2008 symposium.

2010 – Plans for another symposium take place this time focusing on the dining process – again intended to result in additional interpretive guidelines.

Next ????????

History of Culture Change in Michigan...

1995 – Dr. William Thomas (founder of the Eden Alternative) comes to Michigan, sponsored by CQIP (Continuous Quality Improvement Process) and OSA (Offices of Services to the Aging) staff present hear him speak. From this event a formal commitment is made to aide in bringing culture change to Michigan. The arrangement is made for an initial Eden training to take place for 40 hand selected people at Higgins Lake.

1998 – January – initial three day Eden Associate training takes place and from the training a formal commitment is made to work together to aide the culture change movement in the state. Howard Scheafer and Beth Bacon view nursing home regulations and find nothing present from stopping culture change in moving forward. A document is created on their findings. New curriculum created with 1st training taking place in March of 1999 at Higgins Lake. 40 participants present.

History of Culture Change in Michigan (cont'd)

1999 – OSA able to convince DCMH (Department of Community Mental Health) for \$10,000,000.00 dollars to have nursing homes complete a grant/application and submit to OSA for culture change training purposes focusing on physical plant renovations.

2000 – the name BEAM (Bringing the Eden Alternative to Michigan) surfaces. The state recognizes that the grassroots movement is growing and more people begin to gather to discuss the culture change efforts in Michigan.

2000 – with the monies supplied through MDCH, BEAM recognized the need to become a formal organization. Cean Eppelheimer was hired as Coordinator and completed all background information to assist the group in moving forward.

2001 – Certified Eden Associate trainings continue throughout the state and this year BEAM officially becomes a 501c3 (first of its kind in the country) with Jack Steiner and Marla DeVries joining the staff respectfully. New office location is determined in Lansing area.

History of Culture Change in Michigan (cont'd)

2003 – Grant monies are used up with additional trainings becoming more of a challenge to schedule. Second wave of monies was anticipated but budgetary constraints proved otherwise.

2004 – summer – FIDS (Facility Innovative Design) program begins round one. This is a CON initiative, governor job initiative program in which long term care communities would submit a proposal/application for new and or existing site construction to change the physical environments of the long term care community. Organizations granted monies (\$5.00 per bed, per day for up to 20 years) if they also committed to a culture change model. This program serves as the continuation of the culture change movement in Michigan.

2004-05 two rounds of FIDS applications accepted.

2004 – BEAM merged with MPRO (Michigan Review Peer Organization)

History of Culture Change in Michigan (cont'd)

2009 – MAPCC Michigan Alliance for Person Centered Care Communities is formed.

2009- MAPCC is now viewed as the state wide culture change coalition and is recognized by the Pioneer Network.

NEXT?????

Culture Change Models in Michigan Long Term Care Communities

- The Eden Alternative
- LEAP –Learn, Empower, Achieve and Produce
- Coaching Model
- Greenhouse Model
- Household Model
- Borgess Garden Model
- Trinity Senior Living Communities –Sanctuary™ Model

The Eden Alternative

- Founded in 1991 by Dr. William Thomas
- One of the fastest growing culture change models
- Currently has approximately 250 registered homes, 42 in Michigan.
- Focuses on creating a human habitat where life revolves around children, plants and animals, thus creating a human habitat and aiding in eliminating the three emotional plagues of loneliness, helplessness and boredom.
- Founded on ten (10) guiding principles
- Non profit organization with a virtual home office staff based in Wimberley, Texas.
- Supported by Eden Mentors and Educators and over 10,000 Eden Associates from across the globe.
- Education founded in face to face, webinar and conference calls
- Host of an international conference every two years. 6th International Conference to be held in Grand Rapids, Michigan in late May/early June of 2012.
- Eden website: www.edenalt.org

LEAP – Learn, Empower, Achieve, Produce

- Leap is a comprehensive workforce development program that empowers staff, increases retention and promotes staff–resident relationships through a model of person centered care.
- Primary focus is to develop nurses and aides by equipping them with the tools to build positive relationships, foster capable work teams, develop effective communication techniques, feel valued and effective and release “hidden talents.”
- Created in 1999 through a partnership between the Mather Lifeways Institute on Aging and the Life Services Network of Illinois.
- At the end of the two-day trainings, participants become Certified Leap Specialist.
- 13 communities in Michigan currently participate in the LEAP model

Coaching Model

- The PHI Coaching Model Approach is a suite of training and organizational development consulting services, offered to employers within the eldercare/disability market.
- Services assist employers in building within their staff, the skills essential to create a relationship-centered culture.
- PHI focuses on improving the communication and problem solving skills of direct care and professional staff within the organization.
- These skills are the foundation of building healthy relationships amongst staff and those they assist.
- The skills taught are also critical when moving towards a household, individualized caregiving, and decentralized decision making.
- A two-day coaching class and other trainings are offered to aide managers and supervisors to better lead in a constructive, positive, respectful way.
- Coaching skills include listening, self awareness, self management, presenting the problem, giving constructive feedback and participatory problem solving.
- Currently there are four communities in Michigan utilizing the Coaching Model.

The Greenhouse Model

- Greenhouses are small, self contained dwellings for groups of 6-10 elders who require skilled nursing care.
- Greenhouses are designed to look like a private home or apartment in the surrounding community.
- Greenhouses are a radical departure from the traditional skilled nursing homes and assisted living facilities.
- Greenhouse residences alter facility size, interior design, staffing patterns and methods of delivering skilled professional services.
- Greenhouses were developed by Dr. William Thomas and rooted in the Eden Alternative principles of care.
- Greenhouse focus is to serve as a place where elders can receive assistance and support with activities of daily living and clinical care, without assistance and care becoming the focus of their existence.
- Shahbaz is the title given to the certified nursing aide who is the primary care partner in the Greenhouse. Shahbaz are cross trained in all areas of care.
- Currently there are four Greenhouse Communities in Michigan.

The Household Model

- The Household model dismantles the institutional nursing home through the redefinition of staff roles and the organization hierarchy and physical plant design.
- Households typically serve 14-20 elders in a person-centered home that includes a kitchen, living room and dining room that embrace residential details in scale, layout, and finishes.
- Households can be created through existing nursing home space.
- Attributes of household models include a sense of community yet recognizing the need for privacy.
- Household model creation and education/training sessions are guided through the services of LaVrene Norton, Executive Leader of Action pact in Milwaukee, Wisconsin.
- Currently there is one community in Michigan participating in the household model.

Borgess Gardens – Signature Small House Models

- Borgess Gardens is a skilled nursing and rehabilitation center situated on a 9.65 acre of land in Kalamazoo, Michigan
- Currently there are two free standing residential cottages with ten persons living in each.
- Borgess Gardens embraces the Eden Alternative philosophy of care as its foundation and has been an Eden registered home for years.
- Through the implementation of the Eden principles the cottages seeks to create a natural, vibrant living and working environment for residents, and staff, a habitat of healing where people can come and continue to learn and grow.
- In addition to the Eden philosophy, Borgess Gardens aspires to create a supportive setting in which residents maintain personal control and privacy while leading person directed lives that celebrate their lifelong routines and desires.
- Education in culture change at this community includes a three day Eden Alternative Associate training.

The Portage Point Cottages – Signature Small Household Model

- Located in Hancock, Michigan
- Contact information includes:
 - Elaine Archambeau, Executive Director
500 Campus Drive
Hancock, MI 49930-1188
906-483-1188

Trinity Senior Living Communities Sanctuary™ Model

- The Trinity Senior Living Communities Sanctuary™ Model is a covenant of care for elders which grew out of the Trinity Mission, their Catholic heritage and the Eden Alternative philosophy of care.
- Sanctuary is a small, consistent community of elders and staff who live, work and grow together. Daily life in a Sanctuary is directed by the wants and needs of the elders and staff, rather than the institutional schedule. A Sanctuary is focused on normal, everyday living filled with meaning and purpose.
- All Trinity Senior Living Associates receive Sanctuary Education Experiences immersing them into the Model's philosophy.
- The Sanctuary education Experience includes Eden Alternative education as well as a strong emphasis placed on the Five Sanctuary Elements and Trinity Health Guiding Behaviors.
- Through education provided by internal/external culture change leaders, ongoing support, coaching and mentoring is provided to associates.

QUESTIONS?

Contact us:

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Old Age In a New Age

Closing Reflection