

Congrats MI Culture Change Committee

Changing Institutional Culture & Language

Carmen Bowman, Regulator turned Educator

Using Regulations to Replace Institution with Home and Normal Life

EDU-CATERING
Catering Education for
Compliance and Culture Change
www.edu-catering.com
carmen@edu-catering.com 303-981-7228





Pioneers... CUT A NEW PATH

Pioneer Network 1997, Center for Innovation 2022

30+ years

We can change institutional culture

Transform a culture of *rigidity*
to one of **flexibility so that** team members (staff)
can honor **individuals' preferences,**
and **choice is maximized.**

Recognize and reject **learned helplessness.**

“Life is not programmable.”

Carter Catlett Williams

Principles, philosophy, values - **not programs.**
Programs are the mark of an institution.
 We “check out” when its another program.

LANGUAGE LEADS PRACTICE

Changing institutional culture can transform

- a facility/care center into a **home**
- a patient/resident into a **person**
- a schedule into a **choice**


Look at the language

Independent Living
 Assisted Living
 Long-term Care

Where did the LIVING go?

*What if we talked more about **the life people are living**
 than only the care they are receiving?*


KNOW EACH PERSON
A CORE VALUE OF CHANGING
INSTITUTIONAL CULTURE
(PIONEERNETWORK.NET)



PERHAM LIVING PERHAM, MN

Reducing Falls by Engaging with Life
cover courtesy Action Pact


F550 Resident rights



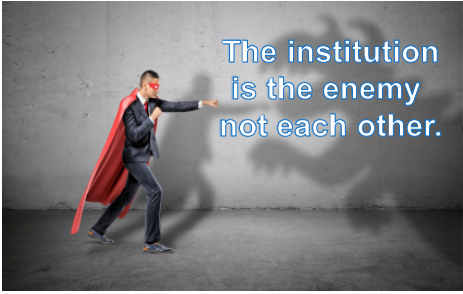
The facility must treat each resident with **respect and dignity** and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her **quality of life, recognizing each resident's individuality.**

CMS F550 Individuality recognized = **Know each person**

**USE REGULATIONS TO CHANGE
INSTITUTIONAL CULTURE**



Since the Nursing Home Reform Act of OBRA '87, regulations support non-institutional culture.



The institution
is the enemy
not each other.

WE MUST SLAY THE INSTITUTIONAL DRAGON. DR. BILL THOMAS

What's your individual, personal
morning schedule?

Please write it down...

How will it go for you if you don't get it?

CMS F550 Respect/dignity/quality of life recognizing individuality

**SEAMLESS
LIVING**

REDESIGNED WORK

Any early risers in the room?

ALL ELDERS ARE ENTITLED TO SELF-DETERMINATION WHEREVER THEY LIVE

A CORE VALUE OF CHANGING INSTITUTIONAL
CULTURE (PIONEERNETWORK.NET)

Nursing home nurse:
"You better not wake me up."

What if they do?

"I'll get aggressive or
depressed... or both."

Is that "a behavior"?

Communication/message/
unmet need/source of distress.

F561 Self-determination

- Right to **choose** activities, **schedules** (including sleeping and waking times), health care and providers of health care services consistent with his or her interests, assessments, plan of care and other applicable provisions of this part.

Tag F561 Self-determination = All elders/people are entitled to self-determination wherever they live

F561 Self-determination...

- Right to **make choices about aspects of his or her life** in the facility that are **significant to the resident**.

F561 Self-determination

- Right to choose activities, schedules (**including sleeping and waking times**), health care and providers of health care services consistent with his or her interests, assessments, plan of care and other applicable provisions of this part.
- When it comes to sleeping and waking... what is **true choice**?

NATURAL AWAKENING = TRUE CHOICE

The Privilege to Honor Sleep



INSTITUTIONAL CARE IS INEFFICIENT



HURRY UP AND ... WAIT

IS THIS SAFE?

Which would you rather have?

generic care

INDIVIDUALIZED CARE

Which are we to ensure?

INDIVIDUALIZED CARE

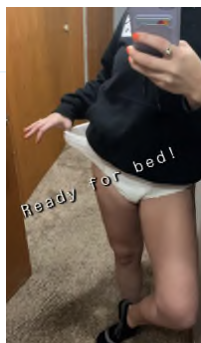
*Which regulation says so?

F550 Resident rights

The facility must treat each resident with respect and dignity and **care for each resident** in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's **individuality**.

Leave generic practice

**RESTORATIVE
SLEEP**



The Power to Tip Toe



Benefits to being well rested?



Tag 561 Self-determination Guidance

Choices about schedules and **ensuring that residents are able to get enough sleep is an important contributor to overall health and well-being.**

Facilities **must not** develop a schedule for care, such as waking or bathing schedules, for staff convenience and without the input of the residents.

Sleep = health per Tag 561.
We call ourselves *healthcare*....

Did you know?

Tag F600 Abuse
F600 Characteristics placing residents at risk for abuse:

**Policies operate in the interests
of the institution rather than residents.**

**“NO LONGER ARE THE
NEEDS OF THE INSTITUTION
TO COME BEFORE THE
NEEDS OF THE INDIVIDUAL.”**

WENDY LUSTBADER

PUT THE PERSON BEFORE THE TASK

A CORE VALUE OF CHANGING INSTITUTIONAL CULTURE (PIONEERNETWORK.NET)

Personalized Med Pass

Artifact 22. Medications are delivered according to each resident's individual daily rhythms such as waking and dining.

Which home would you want to live in?



The home where people **took up smoking so they could go outside?**



Christopher House Denver, CO
Where they ask you
"Would you like to dine
inside or outside?"

RISK TAKING IS A NORMAL PART OF LIFE

A CORE VALUE OF CHANGING INSTITUTIONAL CULTURE
(PIONEERNETWORK.NET)



Teresian House, Albany, NY

Quality Assurance Performance Improvement

§483.75(f)(6) **Clear expectations are set around safety, quality, rights, choice, and respect.**



←→
our future

Tag 550 Resident rights

- The right to be informed in advance, by the physician or other practitioner or professional, of the **risks and benefits of proposed care**, of treatment and treatment **alternatives or treatment options** and **to choose the alternative or option he or she prefers**.
- The right to **request, refuse, discontinue** treatment.

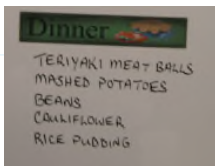
F803 MENUS & NUTRITIONAL ADEQUACY

7) Nothing in this paragraph should be construed to limit the resident's right to make **personal dietary choices**.

F550 Right to chose option preferred, refuse/request,
F803 Right to make personal dietary choices =
Risk taking is a normal part of life

F636 **Comprehensive** Assessment
F655 **Comprehensive** Care Plan





“Just mashed potatoes with lots of gravy please...”

Courtesy SuzyQ Menu Concepts



Who makes the decisions in a bureaucracy?
Who makes the decisions in a home?



A CORE VALUE OF CHANGING INSTITUTIONAL CULTURE (PIONEERNETWORK.NET)

**SHAPE AND USE THE POTENTIAL OF
THE ENVIRONMENT IN ALL ITS
ASPECTS: ORGANIZATIONAL**

Open Dining

- It's what everyone wants.
- Builds in time for excellent care.
- Easier than one may think.
- Change how you present it...



Tag F809 Frequency of Meals

- Each resident must receive and the facility must provide at least three meals daily, at regular times comparable to normal mealtimes in the community **or in accordance with resident needs, preferences, requests, and plan of care.**

Tag F809 Frequency of Meals

- There must be no more than 14 hours between a substantial evening meal and breakfast the following day, **except when a nourishing snack is served at bedtime, up to 16 hours may elapse between a substantial evening meal and breakfast the following day if a resident group agrees to this meal span.**
- MI Rule 803 may be increased to 14-3/4 hours.
- Doesn't matter because choice requirements now better complied with than ever before...



Tag F809 Frequency of Meals

- Suitable, nourishing alternative meals and snacks must be provided to residents who **want to eat at non-traditional times or outside of scheduled meal service times, consistent with the resident plan of care.**
- Open dining is an answer to meeting preferences.
- Who likes to eat early? Who doesn't eat breakfast at all?

Set Mealtimes = No Choice

MEALTIMES
BREAKFAST 7:00 AM
LUNCH 12:00 NOON
DINNER 5:00 PM



Open Dining = Choice



SHAPE AND USE THE POTENTIAL OF THE ENVIRONMENT IN ALL ITS ASPECTS: PHYSICAL

A CORE VALUE OF CHANGING INSTITUTIONAL CULTURE (PIONEERNETWORK.NET)

Tag F854 Environment

De-emphasizes the institutional character of the setting

= Shape and use the potential of the physical environment



Wheat Ridge Manor Wheat Ridge, CO



Rowan Community Denver, CO



Convivium

**SHAPE AND USE THE
POTENTIAL OF THE
ENVIRONMENT IN ALL
ITS ASPECTS:
PSYCHO/SOCIAL/SPIRITUAL**
A CORE VALUE OF CHANGING INSTITUTIONAL
CULTURE (PIONEERNETWORK.NET)





Conversations with Carmen
May 15, 2015 actionpace.com

- Baby Boomers rejecting the status quo
- Cohousing, Cooperatives, House sharing, Village
- Affinity Groups - **no bingo at the Artists Colony**
- **"Desire real, not make believe, sterile, artificial"**

If Bingo is the best we can do,
that's not really a compliment...



RESEARCH

"It is meaningful relationships and purposeful engagement, even at end of life, that defines aging well."

REGULATION

Tag F740 Provide **meaningful** activities which promote **engagement**, and **positive meaningful relationships** between **residents & staff, families, other residents** and the **community**.



*Power, Eheart, Racine, Karnik -- Aging Well in an Intentional Intergenerational Community: Meaningful relationships and purposeful engagement. Journal of Intergenerational Relationships, 2007



And we have a culture change core value for that...

**RELATIONSHIP IS THE
FUNDAMENTAL BUILDING BLOCK
OF A TRANSFORMED CULTURE**

A CORE VALUE OF CHANGING INSTITUTIONAL CULTURE
(PIONEERNETWORK.NET)



SHIFT from institution to **home**
SHIFT from group activities to **living life**
SHIFT from no relationship allowed to **build relationship**

And then there is Tag 675 Quality of Life

**Quality of life is a fundamental principle
that applies to all care and services
provided to facility residents.**

Calling all Animal
Lovers to a Meeting



Courtesy Uptown
Care Center Denver, CO

PHYSICIAN ORDER

"Michael must have his dog with him wherever he lives."

But wait, there's more: Tag F550 Resident rights

The facility **must**
protect and promote
the rights of the resident.



The resident's wishes and preferences must be considered in
the exercise of rights by the representative.

REFRAME TO THE PERSON

Westward Heights Outcomes

Westward Heights Outcomes on Vimeo

F550 Resident rights

The right to exercise rights

as a citizen/resident of the United States.

AmeriCANs

DO UNTO OTHERS AS YOU WOULD

HAVE THEM DO UNTO YOU.

A CORE VALUE OF CHANGING INSTITUTIONAL CULTURE

(PIONEERNETWORK.NET)

F550 Resident rights

The right to exercise rights

as a citizen/resident of the United States.

Because CMS thought of this long ago...surveyors **can** provide

INFORMATION TRANSFER

Support from many state survey agencies

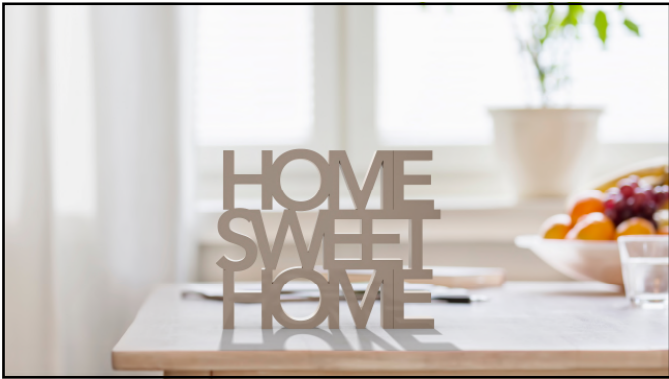
- OR surveyors on culture change committees/did not survey
- RI SSA Director was Culture Change Coalition President
- MO had a SSA Culture Change Coordinator position
- MO SSA memo re: Artifacts 2006 CMS Div. of Nursing Homes
- FL SSA sponsored compliance and CC training, 5 locations
- CO surveyor is a co-founder of culture change coalition
- Surveyors, how do you use your power? Introduce? Compliment?

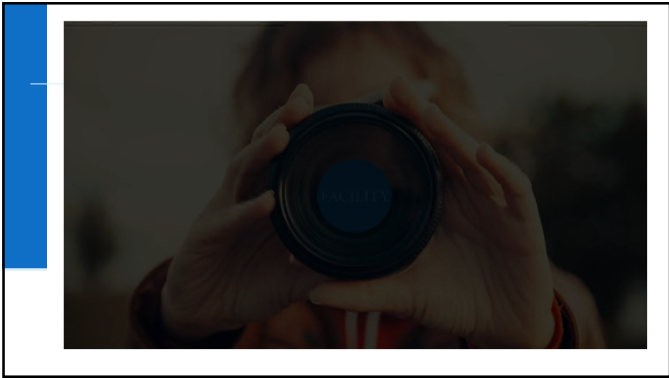
We ALL CAN ADVOCATE for...

Using Regulations to Reject & Replace Institution
with HOME and NORMAL LIFE

There's no place like...

FACILITY





MICHIGAN, YOU COULD BE DIFFERENT

WHAT IF YOU USED JOINT PROVIDER
SURVEYOR TO YOUR ADVANTAGE?

The definition of change

- v. change
- to make the form, nature, content, future course, etc. of (something) different from what it is or from what it would be if left alone;
- to change one's opinion;
- to transform;
- **to change the course of history.**

What if we made it a verb?

- to culture change,
- to change institutional culture,
- **to change the course of nursing home history in MI**

What could surveyors do to promote quality of life?

What could providers do to promote quality of life?

What could ombudsmen/others outside do to promote quality of life?

Changing language even in federal regulations

CMS Tag F550 Resident rights, Avoiding the use of labels for residents such as “**feeders**” or “**walkers**.”

Which reg?

What other labels are there?

Avoid labels

- diabetic, paraplegic
- Screamer, wetter... (so many)
- Room 202
- Diagnoses: the stroke, etc.
- Frequent faller

Person First Language

- Person who has ...
- Person who ... (describe)
- Avoid, use name
- Avoid, use name
- Person who is falling a lot



Person First Language

- Puts the person *before* the disability.
- Describes what a person *has*, not who a person *is*.
- A person with diabetes (replacing diabetic).
- Myopic?



**ONLY
ONE
LABEL
NEEDED
EVER**

THE MOST APPROPRIATE LABEL IS
USUALLY THE ONE PEOPLE'S PARENTS
HAVE GIVEN THEM.

To prescribe or to deprescribe...

Beware even more medical lingo

- "Prescribing social care"
- "Dose of exercise"
- "Social prescription"
- "Purpose pill"

Normal language

- **Recommend**
- **Suggest**
- **Preference**
- **Plan**

Promising Practices for Social Connectedness, Fall Prevention, and Improved Cognition:
Should Social Care Be Prescribed? Should Life Be Medicalized?

Carmen Bowman * and Weng Marc Lim *

<https://www.tandfonline.com/toc/waaa20/current>



Look through the of HOME

- **Neighborhood** (instead of unit/ward/station/floor)
- **Team** (instead of department)
- **Checking in with/check ins** (instead of rounds/rounding)
- **Approach/individualized approach** (instead of intervention)
- **Move in/move out** (instead of admit and discharge)
- **Needing bathroom** (instead of toilet, toileting)
- **Dining/culinary/food and nutrition** (instead of dietary)
- **Direct care/hands-on care givers** (instead of frontline/floor staff)

*They don't live in our facility,
we work in their home.*

Are we maybe *home health* professionals?

WHERE ARE YOU WHEN YOU HEAR...

ORDERS	DISCHARGED	NON-COMPLIANT
FRONTLINE	DEPARTMENT	MANAGE BEHAVIORS
REPEAT OFFENDER	UNIT	DIRECTOR
COMBATIVE	ALARM	RESTRAINT

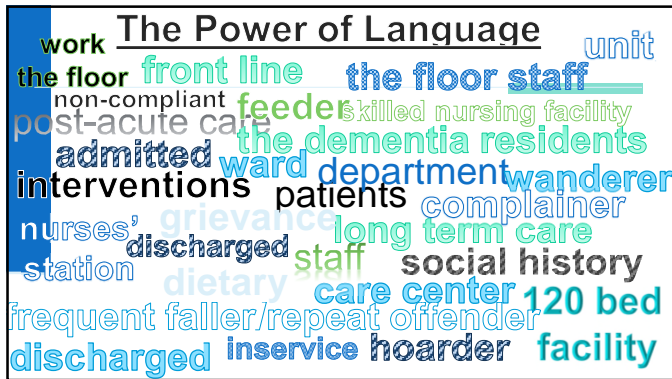
Military Language	Normal Language
■ Department	■ Team
■ Director	■ Coordinator/Team Lead
■ Unit	■ Neighborhood
■ Manage behaviors	■ We support/assist/help people
■ Compliance/non-compliant	■ The NH is compliant or not with regs, people make choices

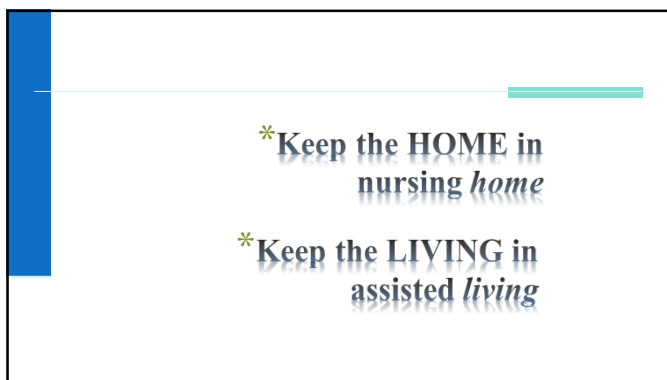
Always seek to nurture the healthy flow of the human spirit in all our policies and interactions and in all that we say and do.
Barry Barkan, Live Oak Project

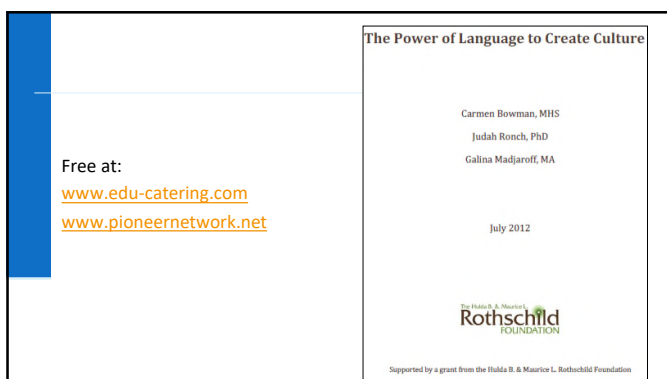
What if we called it,
The Nurturing Home
...what if?

The Power of Language

home hands-on
work with direct care givers team members
people [name] who needs help eating
person community neighborhood
approaches neighbors individual
move in/here for a stay nurturing home
culinary/dining services life history
education home to
team move out/go home 120 people







Artifacts of Culture Change 2.0 & Guidance

- Self-assessment tool
- Inspirational tool
- Educational tool
- Implementation tool
- Benchmarking tool

ARTIFACTS OF CULTURE CHANGE 2.0			
HOME NAME _____		DATE _____	
CITY _____		STATE/COUNTRY _____	
		CURRENT NUMBER OF RESIDENTS _____	
RESIDENT-DIRECTED LIFE	FULLY IMPLEMENTED	PARTIALLY IMPLEMENTED	NOT A CURRENT PRACTICE
For each item, check the column that represents your home.			
1. New residents and their families are welcomed by team members/managers, introduced to the home, and educated about the home's culture change philosophy of enhancing residents' control over their lives, rights, preferences available, and choice of schedules.	Fully Implemented	Partially Implemented	Not a current practice
2. The home offers at least one of the following styles of dining that provides for resident choice: Restaurant style where residents' orders are taken; Buffet style where residents help themselves or help team members and they wait/empty plates where food is served in bowls on dining tables where residents help themselves or receive assistance.	Fully Implemented	Partially Implemented	Not a current practice
3. Each meal is available for at least 2 hours, and residents can come and go when they choose. (Refer to CMS R300 frequency of meals, Alternate dining times)	Fully Implemented	Partially Implemented	Not a current practice
4. Residents are supported to prepare and/or serve food per their preferences and abilities in addition to having guests.	Fully Implemented	Partially Implemented	Not a current practice
5. Snack times are easily available for residents at all times without having to ask, i.e., in a stocked party refrigerator or snack bar open to CMS R300 -- Frequency of meals / snacks at bedtime.	Fully Implemented	Partially Implemented	Not a current practice
6. In addition to snacks distributed in R300, residents can order food from the kitchen 24 hours a day and team members are empowered to provide food upon	Fully Implemented	Partially Implemented	Not a current practice

Using Regulations to



How Activity/Recreation/Engagement/Community Life Professionals can save the World of LTC

New eResource
available at
edu-catering.com

80

Q and A/Encouragements

- Use the regulations to change institutional culture.
- Emphasize living life/normal life/quality of life.
- Let's talk more about the **life people are living** than only the care they are receiving.
- Consider shifting to normal non-institutional language – all of us.

For a free **Language Handout**,
email me carmen@edu-catering.com

EDU-CATERING
Catering Education for
Compliance and Culture Change
www.edu-catering.com
carmen@edu-catering.com 303-981-7228