Thank you to WY State Survey Agency and CMS for funding this CMP Grant

Implementing Culture Change throughout Wyoming;
Affecting Resident-Directed Living and Team Member Retention

New Year, New Words: “Get the Word Out”

Carmen Bowman, WY Grant Project Coordinator
Edu-Catering: Catering Education for Compliance and Culture Change
Person First Language

- People with disability diagnoses are people first.

- **Person first language** puts the person before the disability.

- **Person first language** describes what a person *has*, not who a person *is*. 
Person First Language

• Interesting example, we don’t refer to people as myopic. Instead, we say a person wears glasses.... follow this example!

• Diabetic or a person with diabetes? Diabetic is actually a label even though commonly used...

• Paraplegic or a person who has paraplegia?
Avoid labeling people - even in federal regulation

CMS Tag F550 Resident Rights, treated with respect and dignity:
• Avoiding the use of labels for residents such as “feeders” or “walkers.”

• *What labels have you heard?
• The downs, early riser, dyslexic (someone who sees letters backwards), max assist, a faller, non-compliant, crier, naughty, fall risk, 1:1, frequent complainer, needy, overinvolved

Other labels

• Screamer, wetter, isolator, hoarder, wanderer, frequent faller, repeat offender, complainer → person’s name, describe

• The quad, the Alzheimer’s, the CVA → avoid
• The “get ups,” the “put downs” → avoid
• The Alzheimer’s patient → avoid, person first
• The dementia residents → the people who have dementia
• 300B, Room 28 Bed A – avoid, learn names

• Memory Care – actually violates HIPAA
Dignifying our Language

• Patient → resident → **person, individual, neighbor, friend, community member**
• Elder? Only meant respectfully and ... some decide they don’t like it, some are younger...
• Patient-centered → (ignores person) person-centered
  • “Patients, residents. They are all people, first.” (Kathy Snow)
• Residents → “I hate that word. He was a person way before he became a resident in a nursing home.” Tony Hanlen, NHA RCR Rockies

The power of words, what would you prefer?

• Staff → **people who work here, team members, colleagues, associates, stakeholders**
  • Puts person in a role not a relationship
  • No staff at home
  • “My staff”
  • Beware: my residents, our residents – what does this use of language do?
• **Elder/Family/Employee partners – Eden Alternative – the term** partner immediately shows everyone is equal

• Department → **team**
• Inservice → **education**
• Dietary → **dining services**
Word association... get ready...

Even the term elderly has become ageist.

→ senior → older adults → people
If age is important, indicate it. Often it is not. People of all ages live in all kinds of settings.

Dignifying our Language

• Suffers with dementia
  → lives with dementia
  → has dementia
  → experiences life differently
  → changing cognition (Dr. Al Power)
Beware:
“We _let_ our residents sleep in. We _allow_ them to have a pet.”

This is called _pejorative_ language.

What’s the opposite of _pejorative_?

Consider instead:
“We _support_. We _honor_. We _encourage_”
Dignifying our Language

• Admitted, placed, put → “We helped Mom move to a nursing home,” new neighbor moved in

• Discharge, discharged → moving, moved, relocated

• Elope, escape → left the building

• Expired → died

• Intervention → approach, individualized approaches

Dignifying our Language

• Homelike → true home, feel at home, home

• Toilet/toileting → needs the bathroom, bathroom use, freshen up, restroom, etc.

• Ambulate (actually means to move/movement) → walk, move, propel wheelchair, say what is meant

• Combative → avoid, describe what exactly happened
Dignifying our Language

• Unit, wing, station, hall → neighborhood unless living in a household or house
• Lobby, common area → living room
• Front line workers → direct care givers, care givers, hands-on team members, descriptive/precise language, e.g., nurses, CNAs
• Work the floor → assist residents, say what they do, e.g., pass medications

Dignifying our Language

• Facility → home, community, name
• “X bed facility” → 110 person home, home to 110 people
• Beds → bedrooms, refer to the people living there
• Industry → field, profession
• Census → 100 people live here today
• Occupancy → 110 people could live here
Look at the word “therapy,” for instance. Why does everything have to be therapy once you live in a nursing home? If I liked to paint before I moved into the nursing home and I paint now that I’m there, why is my hobby now “art therapy?” I mean no insult to the wonderful folks who call themselves therapists and their work, their special training, or their skills. In fact, I’m a massage therapist myself. But in this context, “therapy” is another of those separating words.
Karen Schoeneman, *MayDay* article

Putting the label “therapy” on normal activity has become a tradition in nursing homes and other health care settings in order to establish the “professionalism” of those who do it. This is a case of “scientism” (Postman, 1993), a language trend toward elevating status of an action by appropriating medical terminology. People do things that are “therapeutic” all the time without therapists around because we feel better when we do them. When you go for a walk, for example, is that physical therapy or just exercise? Doing something you enjoy should not take on a stigma of having something wrong with you and that’s why you do it.
Dr. Judah Ronch, Psychologist
The Power of Language to Create Culture
Real life is not found in programs.

- What I see in the current culture is largely programmatic: a varied program of activities is offered, trips to restaurants, ice cream shops as well as places of historic interest, shopping trips and many in-house activities.
- With such a wealth of activities, what could be lacking?
- **What is lacking is real life. Real life is not found in programs. Real life is in the give and take of everyday life.** Our living in the apartment or touring bus screens us off of everyday life. We’re turned in on ourselves. What is there to talk about other than times past or the faulty air conditioning?

Beware of confusing programs with real life

- **Beware of confusing programs with real life.** Programs have their place but life in the wide world is not programmable. Life is filled with surprises, with hope as well as setbacks; with affirming as well as unsettling experiences.
- As shapers and leaders of a new culture we must be very clear that the culture we are building does not rest on programs but on knowing each person, valuing what each person has to give and enabling each to give his/her contribution. **Then we will be on the side of life.**
Normal Life/Normal language

• Pet therapy or enjoying animals?
• Art therapy or being creative?
• Physical therapy or walking?
• Therapeutic activities?

• Leisure, recreation, activity programming, activities → life engagement, community life, living life, engagement, meaningful engagement, a meaningful day, vibrant living, “what are you going to do today?”
*What if we focused on life and living?

Long term care, clinical care, person centered care

What is missing?

LIFE and LIVING

“It would be nice if when one move into a nursing home they asked you how you want to live instead of all that medical stuff.”

Person who moved into a nursing home

Sonya Barsness Consulting
sonya@sbcgerontology.com
www.beingheard.blog
Look at the language

Independent Living

Assisted Living

Long-term Care

Where did the LIVING go?

Resident-directed living

Self-directed living

The Power of Ageist Language
The Power of Normal Language

Rampant Normalcy
A premise of the culture change movement
Beware – do you express negative attitudes toward aging? If we, in the aging field do not speak positively of aging, who will?

Fundamental change begins in the human heart. If we really don’t believe that people are still people because they have a dementia, we will not care for them as persons, but as objects of medical maintenance. If we really don’t believe that elderhood can be a great age of enlightenment and societal participation, then we will continue to relate to elders as retirees on the golf course. Each of us must work deeply on our own journey of aging, transforming our traditional fears and uncertainties into a hopeful, joyful embrace of who we are and our new capacities for growth and giving.

Bill Keane – long-time culture change leader, quoted in Old Age in a New Age, Baker

Words make worlds (Drs. Judah Ronch and William Thomas)

- ...our entire industry has developed a language that is demeaning and depersonalizing both of the Elders we serve and the hands-on staff who care for them. What we know is that language can and does influence us. Language is a powerful tool. When used in a positive way, it can inspire people. When used negatively, it can hurt. But when it becomes a part of a culture and is simply mindless, that is, when we speak the words without understanding their impact, it is dangerous... When we awaken to the fact that this kind of language has seeped into our culture and is now actually driving our attitudes and beliefs, we can begin to change our language to shape a new culture (p. 82, 2007).

Nancy Fox, The Journey of a Lifetime: Leadership Pathways to Culture Change in Long-Term Care
Language Resources

Free resource available at
www.edu-catering.com
www.pioneernetwork.net

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

Archived CcC shows:
People First Language
Kathie Snow, author, advocate

The Power of Language to Change Culture
Judah Ronch, PhD
www.actionpact.com

More Language Resources

• MayDay, Commitment to a Changed Language, pioneernetwork.net
• Creating a New Language, edenalt.org
• The Case for Change, The Power of Language to Create Culture chapter, Health Professions Press, healthpropress.com
• Kathie Snow, disabilityisnatural.com
• Quality of Life: The Differences Between Deficient, Common and Culture Change Practices dignity and language, actionpact.com
Pushing through awkwardness creates a new norm

New language is awkward

What is one thing I need to change in my language?
What is one proposal I can make for language change in my workplace?

The Safety Pin Game

Pam Sprecher, Activity Coordinator Star Valley

Focused on avoiding 3 words: facility, toilet, staff. When heard, can get their pin. Prize at end of month.

Words affect how we feel.
I use “I love my job.” as password.
Imagine if you used, “I hate my job.”
Language/words changes our attitudes towards our friends living in the nursing home. Pam Sprecher
“Get the Word Out” Drawing

Artifact 133. The home uses non-institutional language in all documents (clinical charting, job descriptions, policies and procedures) and verbal interactions, and provides periodic training to all team members to remove institutional language.

When overheard using dignified words, name goes into jar for a drawing.

Also, tosses candy/chocolate when the normal/not institutional words are overheard during team member meetings.

Reward for words you want ...

Brittney Hull, Life Enrichment Coordinator The Veteran’s Home of WY Cottages in Buffalo

Wanted to reward for desired language. Made big deal of it. Then they made a big deal of it, “Hey Brittney... I love working in this home/community (rather than facility). Did it when they saw me coming and that’s okay!
Individual = person living in our home. Old terms Patient, resident.

Can also use: person, neighbor, or community member

Amanda Craft, Dining Manager Wyoming Retirement Center

Questions/Comments/Other words

The SUPERPOWER of Language to (either extend or) end Ageism...
Next Free Culture Change Training
EMPLOYEE COUNCIL & ENGAGEMENT
Fri. Aug. 27, 2021

Webinars are recorded and available after-the-fact

Jill Hult of Mountain Pacific sends to NHAs and DONs
Get on her mailing list
Or mine, carmen@edu-catering.com

Please save the dates/last Fridays 2 pm

Wyoming Culture Change Coalition
BIG GOALS for WYOMING NURSING HOMES

BIG GOAL #1
Every person working in a WY nursing home receives culture change training. PLEASE PASS ON THE LINKS TO LIVE AND RECORDED WEBINARS TO YOUR TEAMMATES, AND ANY RESIDENTS AND FAMILIES INTERESTED.

BIG GOAL #2
Every resident of a WY nursing home sleeps until they wake up. Natural awakening is a gift; uninterrupted, restorative sleep improves physical health, psychosocial wellbeing, quality of life.

JOIN the WY culture change movement.
JOIN the WY culture change coalition.
JOIN the WY Working Committee.
JOIN the planning team for each annual culture change conference.

Contact Carmen Bowman, Project Coordinator
carmen@edu-catering.com 303-981-7228
Seeking WY Nursing Homes

• Be a part of the culture change grant where you implement culture change practices and see what it does to team member retention and recruitment!

• Year 3 Begins April 2023
• Applications open now

Aug. 11, 2023 Culture Change Conference

Using Crises to Lead Transformation:

Leadership by all, Honoring Sleep, Engaging Families as Partners

9-10 Debrief living/working through a pandemic - finding hope & encouragement
10 – 10:15 Break
10:30 – 12 Leadership - by all - through crises
12-1 Lunch gifted by LeadingAge
1:00-2:30 Restorative Sleep
2:30-2:45 Break
3:00 – 4:00 Caring and Engaging Families as Partners

Free for as many team members as can come from WY nursing homes

REGISTER WITH ME carmen@edu-catering 303-971-7228
### Collect Ideas, Create Together, Have fun

<table>
<thead>
<tr>
<th>Old/Disrespectful/Institutional Language</th>
<th>New/Respectful/Non-institutional Normal Language</th>
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#### Take Aways

- Be cognizant of *institution-speak, institutional language*.
- Be proactive to call institutional/abnormal words out.
- Agree together to talk about it, remind each other.
- Consider a Word of the Month or Word of the Week.
- Discuss these words and meanings. What’s the ... Real Definition?
- “GET THE WORD OUT.” (Could be a play on words.)
- Emphasize **LIFE** more than CARE and choose words that reflect life/living/normalcy.