

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

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

1

Wyoming Retirement Center

Basin

Marla Taylor-Thomas, Culture Change Project Lead

Joined even later than mid-way Year 1 and completed all of Year 2

2

Practices Chosen

1. Snacks readily available
2. Other team members lead/involved with activities
3. Outdoor preferences on care plan
4. Community meetings
5. Mailboxes
6. Language shift

3

4. Snacks/drinks are easily available for residents at all times without having to ask, i.e., in a stocked pantry, refrigerator or snack bar. (Refer to CMS F809 – Frequency of meals / snacks at bedtime)

4



The Snack Attack Snack Bar

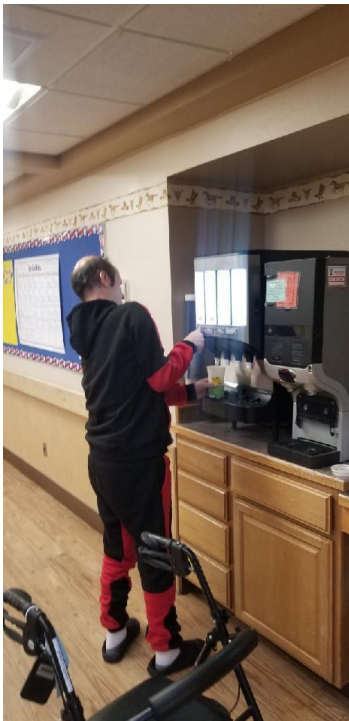
"Makes me happier than a fat cat."

"Saves time. A little bit of a mess but would take it over the time to get all those options and lots of residents happy to have it."

Nutrition Tip posted

Graham crackers – melt in mouth = pureed consistency

5



Infection control appropriate
Researched right machines
Replumed
Community members now
asking for ice machines –
researching

Foundation of Youth?
Hydration Station on runs/bikes
No name/title/label

6

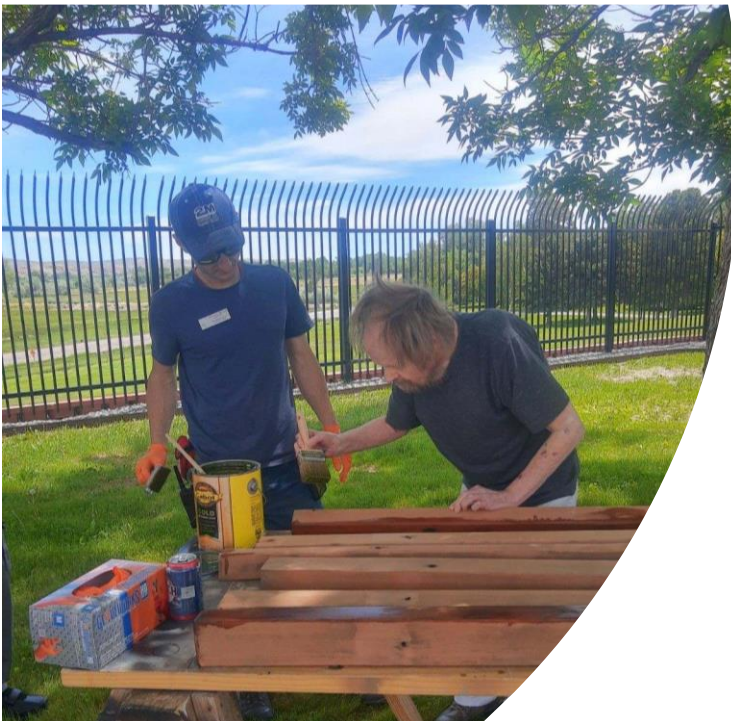


127. Team members other than activities/recreation regularly engage residents individually or by leading groups of interest to residents.

2/2/22 Day

All team members filled in when lacked restorative team

7



Nate Miller
Maintenance
Manager

Projects

8



9



10



11



"He was glowing. You *have* to keep doing this. I haven't seen him like this for a long time." Wife of WRC community member involved in project

12



More life outside

Outside preferences on care plan



13



14

Mailboxes



15

ndent Activities in Pockets	-Independent Activities - In Room Pockets	-Independent Activities - In Room Pockets
Black Jack	16 10-Bowling	17 10- Word Games
via Service Games Activities	12 ¹⁵ - Trivia 1 ³⁰ - Dave & Gordy Music	12 ¹⁵ - Trivia 2- Gift Shop
reative Writing	23 10- Community Council Community Council	24 10-BINGO
via Service GO Activities	12 ¹⁵ - Trivia 2- Gift Shop	12 ¹⁵ - Trivia 2- Bowling
-BINGO	30 10-Bowling	31 10-Coffee Shop
Trivia Service Gift Activities	12 ¹⁵ - Trivia 1 ³⁰ - Dave & Gordy Music	12 ¹⁵ - Trivia 2- Gift Shop

Community Council

(was Resident Council)

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.

Resident Preferences Form became Tell Us about You
Grievance Form to Concern Form

16

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



17

Community Meetings

- Discovered community members really appreciate having team members able to connect
- Tried varying agendas
- Paused due to covid
- Working on ways to increase interaction

18

Wyoming Retirement Center

Artifacts pre-project tallies

- Fully Implemented 40%
- Partially Implemented 34%
- Not implemented yet 26%

Artifacts post-project tallies

- Fully Implemented **59%**
- Partially Implemented **21%**
- Not implemented yet **20%**

19

Outcomes

Community members extremely pleased with:

- Getting own mail
- Getting own snacks
- Getting own drinks/coffee

20

Life Care Center of Casper

Life Care of Casper joined mid-year of Year 1
Oct. 2021 – March 2023

21



Meaning and Purpose/Volunteerism

Artifact 37. The home engages residents in volunteerism according to each resident's individual preference.



22



Community Member
(resident) leads
Exercise video clip

23

Class offered
explaining volunteer
opportunities



24

- Artifact 4. Residents are supported to prepare and/or serve food per their preferences and abilities (in addition to cooking groups).



Dining Volunteer Opportunities

Please perform hand hygiene & wear gloves prior to and in between each task

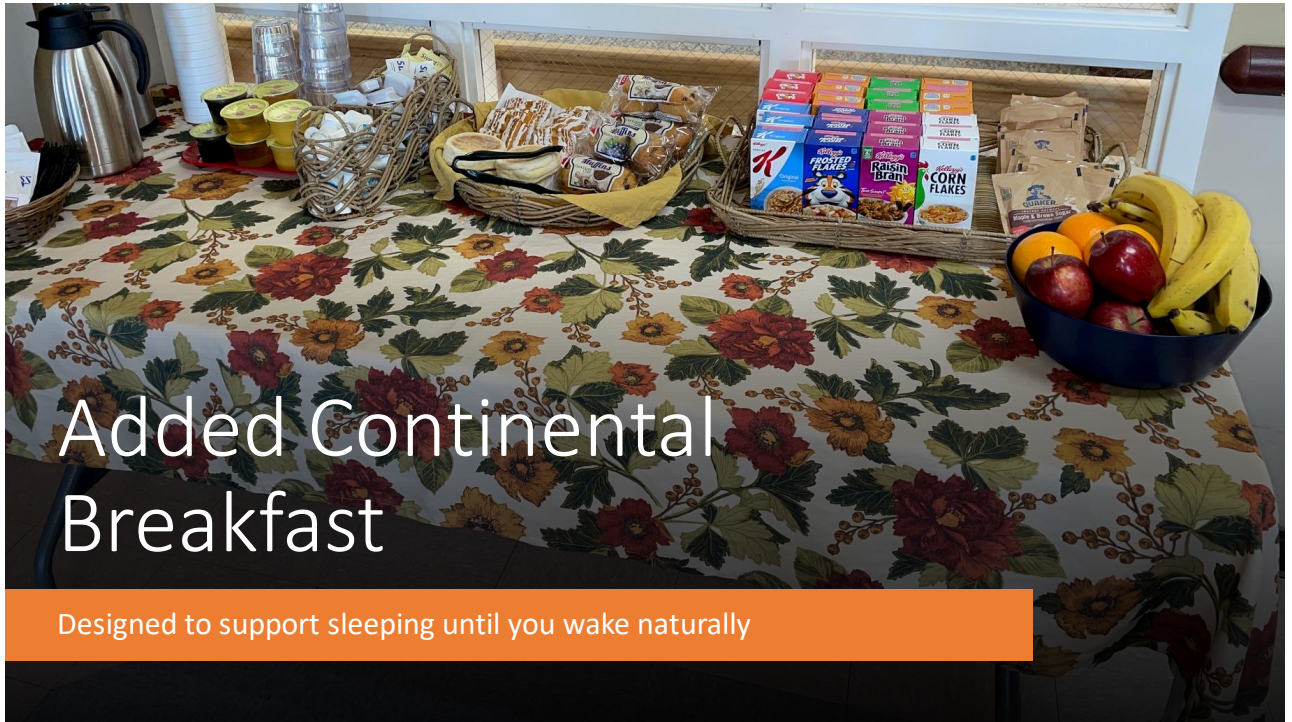
- Scoop dessert into cups or place dessert on plates.
- Roll silverware.
- Make PB&J sandwiches.
- Put sandwiches into baggies for snacks.
- Put fruit into cups or on plates.
- Set dining room.
- Wipe down tables.
- Fold napkins.

25

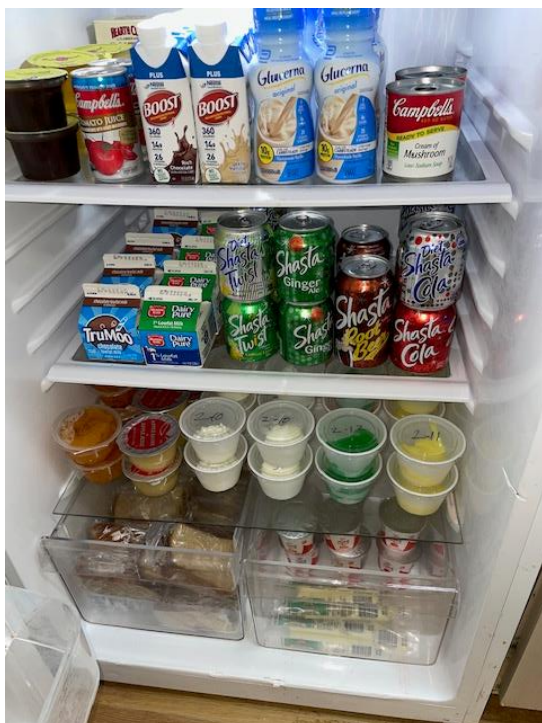
- Now Admin./then DON Stacey Caldwell admitted, "We're not taking advantage of our open dining. We just make people do what we think they should. We don't ask the person what they want. We're totally institutional still."
- Artifact 3. Each meal is available for at least 2 hours, and residents can come and go when they choose. (Refer to CMS F809 Frequency of meals, Alternate dining times)



26



27



Artifact 6. In addition to snacks (described in #5), residents can order food from the kitchen 24 hours a day, and team members are empowered to provide food upon resident request.



28

- Artifact 18. The home **supports each resident's natural awakening** rather than waking residents on a set schedule. (Refer to CMS F561 Self-determination)

ADON Cherie Marsh really took this on:

- “Preferences are not schedules.”
- “This is not a facility this is their home.”
- Quiet Hours “There are sleeping people here.”

29

“Have you toileted yourself today?”

Cherie ADON “absolutely ridiculous.”

30

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.*



31



32



33

Mailboxes

Artifact 71. Resident rooms have mailboxes at the room entry or in a central mail location.



34

68. Institutional, over-the-door call lights have been replaced with alternatives such as porch lights at the side of resident room doors or a silent communication system.



35

Artifact 28. Individual memorials/remembrances are held at the home to honor individual residents upon death.



Artifact 29. Meaningful rituals are in place for residents and team members to recognize and process death, e.g., bedside memorial, chimes announcing a procession out the front door, special book for memories.



36

- **105. All residents have a team member assigned to them to serve as a “troubleshooter.” Assigned team members are responsible for 1 or 2 residents ensuring ongoing coordination of care and services across teams/departments, and response to residents’ needs, preferences, and requests.***
 - Inspired us to resurrect Guardian Angels to be more about the person, not the room
- **Artifact 112. The home has a standing culture change task force/committee/team with a broad representation of residents/family members, supervisory and direct care team members from various shifts, administration, and nursing leadership.**

37

Outcomes

Artifacts pre-project

- Fully Implemented **25%**
- Partially Implemented **49%**
- Not implemented yet **25%**

Artifacts post-project

- Fully Implemented **33% +8%**
- Partially Implemented **47%**
- Not implemented yet **20%**

38

Outcomes

Turnover pre-project

- Overall **73%**
- CNAs **106%**
- RNs **100%**
- LPNs **50%**

Turnover post-project

- Overall **59%**
- CNAs **72%**
- RNs **67%**
- LPNs **47%**

Westward Heights

Participated in Year 2 of the Culture Change Project

April 2022-March 2023

How it started

- Observed that team is so stressed.

41

“Just start talking about it”

- Why do we wake residents? Meds. Breakfast.
- Asked evening shift team members: What do you do if resident doesn't want to go to bed? I just reapproach them and ask again later.
- What if they say no still? Let the nurse know.
- Let's say 5 residents don't want to go to bed. Upset. Why? Because that's my job. Impression is that evening shift didn't do their job.
- CNA: It's my job b/c its 7 pm. I only have 2 hours to “put these residents down” and finish charting, etc.

42

Ask Why and Why not?

- 20-some years been doing this and never looked at this...
- “Will help with retention, will help with our stress. Not: I have to get everybody up or dining room mad at me. The institutional way creates problems.”

43

How to begin

Started with one neighborhood

- Lots of communication
- They start asking why also, why are we doing this?
- “Challenge the way it is.”

44

Personalized medication times

Review of meds

- Medications, in general, were discontinued.
- Pharmacist involvement has become proactive.
- Fewer pills for the person.
- Calcium, some vitamins not assimilated in older age.
- Moved timing of meds so as to not interfere with sleep at night nor in the morning.

45

Relaxed, flexible med pass

- Learn patterns
- Honor patterns

46

What is your professional worldview?

Outdated Nurse Worldview

- The outdated, typical, traditional, institutional nurse “worldview” is “I wake you up, at this time.”

47

Natural and well received

- It is working.
- Residents and families loving it. Its natural now. Natural now for us to ask, “Would you like your meds earlier or later?” Its natural now but we never, NEVER asked this ever before...

48

A NEW NORM

SHIFT

- RESIDENT tells new nurse that the timing of the medications is not working for her because you just woke me up! Asks nurse to please change med time. Nurse has to ask if this is okay!

49

Shorter med passes

SAVE TIME

- The more organized meds are, the less time it takes.
- Give at their preferred time. No arguments.
- Med aides have more time with residents.
- Many want at bedtime instead of meals b/c they get so full.

50

AMAZING OUTCOMES

- No more bowel and bladder records.
- No more sleep records.
- Night shift loves it.
- Residents well rested.
- More peaceful, quieter.
- Less stress for residents.
- Less stress for CNAs.
- Families appreciate our new focus on honoring sleep. We are more aware.

51

What about skin?

SKIN IMPROVED

- Scared about skin and pressure ulcers.
- Worried if we don't turn, and "check and change every two hours" will get skin breakdown.
- Actually surprised, skin issues decreased and skin improved.

52

Better on the budget

Fewer staff needed

- Since not waking residents in the morning, need fewer team members.
- Had 1 nurse and 4 CNAs. Now 1 nurses and 3 CNAs on nights (12-hour night shifts).
- Reduced med aides. 5 hours/day reduction.
- Everything is more relaxed.
- So much more manageable.
- Don't need the overtime.

53

This is person-directed

Improved quality of life

- No more "I have to go get someone up."
- A person with dementia wakes up better, is well rested. Its so nice for them to not be woken up. "Its so nice, only one time a night do I check on her now and I don't get the look that she wants to kill me." Awake during evening movie. Now 9-10 coming, was 1-2.
- Less napping/falling asleep at breakfast/more engaged during day

54

“Time to check on the resident and not just on the clock.”

Monica Davis RN, MDS Coordinator

Westward Heights, Lander, WY

55

Sleep Hygiene

- Learned in nursing school
- What is it?

Sleep Preferences

- What do you need for a good night's sleep?

56

Choice in Breakfast

- Offering a cold breakfast outside of the hot breakfast time.
- We never even asked if someone wanted to eat/was hungry.
- We train people to go to mealtime and snacks and then they gain weight, 20 pounds and then need an “intervention” to get back to baseline and that is a trigger on MDS because of weight loss!
- Most if late lunch might skip lunch and eat supper.

57



58

Convivium



Outcomes

- Retention Rate annual: 86% last 12 months; 12 months prior was 69%
- Retention Rate quarterly:
- Bonuses 68,000 to ZERO
- Decreased overtime from 160-200 hours to 120 hours

59

Westward Heights Artifacts Tallies

Artifacts pre-project tallies

- Fully Implemented 51%
- Partially Implemented 30%
- Not implemented yet 19%

Artifacts post-project tallies

- Fully Implemented %
- Partially Implemented %
- Not implemented yet %

60

Westward Heights Turnover

Turnover pre-project

- Overall 36%
- CNAs 57%
- RNs 38%
- LPNs 0%

Turnover post-project

- **Overall %**
- **CNAs %**
- RNs %
- LPNs %

61

Artifacts of Culture Change 2.0

1. **Artifact 3. Each meal is available for at least 2 hours, and residents can come and go when they choose. (Refer to CMS F809 Frequency of meals, Alternate dining times)**
2. **Artifact 18. The home supports each resident's natural awakening rather than waking residents on a set schedule. (Refer to CMS F561 Self-determination)**
3. **Artifact 22. Medications are delivered according to each resident's individual daily rhythms such as waking and dining (rather than assigned clock times).**
4. **Artifact 19. Each resident's preferences for a good night's sleep are known and provided such as preferred light level, pillows, blankets, and desired bed clothes.**

62

Ideas/Questions

PLEASE SHARE IN THE CHAT

KNOWLEDGE BEFORE:

KNOWLEDGE AFTER:

63

Consider a Word of the Month

Institutional words

- Facility
- Patient/resident
- Feeder, hoarder, wanderer, isolator, screamer, complainer, frequent faller
- Resident Council
- Sleep hygiene

Normal words to consider

- Home, community, name of the home
- Person/neighbor, community member
- No label. "Label jars not people." The only label one needs is the one their parents gave them."
- Community Council
- Preferences for a good night's sleep

64

**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.

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.

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

65

Seeking 2 more 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!**

66

Register with me

**FRI. AUG. 11, 2023 CULTURE CHANGE
CONFERENCE 9:00 – 4:00**

**LANGUAGE/RESTORATIVE SLEEP/ENGAGING
FAMILIES/LEADERSHIP BY ALL**

THE INN AT LANDER

67

Next free culture change education:
Fri. Apr. 28, 2023 2:00 pm MT
**Artifacts of Culture Change 2.0
Overview and Resident-Directed Life
(Section 1 of 5)**

Webinars are recorded and available after-
the-fact

All info is sent out from Jill Hult
of Mountain Pacific – Thank you Jill!

Please get on her list or my list.



68