The National Long-Term Care Ombudsman Resource Center

OMBUDSMAN ADVOCACY AND CULTURE CHANGE:

ACHIEVING RESIDENT-DIRECTED CARE IN DAILY ADVOCACY

JANUARY 10, 2012
Your Daily Routine

Think about your morning routine…

- What do you do first?
- What is your favorite part of your morning?
- What do you do on a daily basis that provides you with comfort, joy, a sense of identity, purpose, and/or security?
Underlying Question

How do we organize our systems around the people who *live & work* in nursing homes to *enhance* *quality of life*?
Culture Change: Philosophy and Practice

- Culture change is a transformation in philosophy and practice to de-institutionalize care and create a resident-directed approach in all aspects of life in long-term care.

- Culture change includes changing how Ombudsmen communicate with residents, families and providers.

- Supporting resident-directed care is important and meaningful at every level including collaboration in coalitions and daily advocacy.
Culture Change Practices

- Culture Change is more than environment improvements
- Environmental
  - Remove nurses station
  - Use dinnerware and cloth napkins rather than trays
  - Introduce plants and pets (including resident pets)
  - Create smaller neighborhoods of 10-15 residents rather than “wings”
- Resident-Directed Care and System Change
  - Enable resident choice in all aspects of care and facility decisions
    - Individualized care plans, include resident in hiring process and community dietary decisions, implement consistent staff assignment
### Resident-Centered Language ("person-first")

<table>
<thead>
<tr>
<th>Institutional Language</th>
<th>Resident-Centered Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nourishment</td>
<td>Snack</td>
</tr>
<tr>
<td>Bibs</td>
<td>Napkin, Clothing protector</td>
</tr>
<tr>
<td>Diapers, Pull-ups</td>
<td>Briefs, Panties, Attends, Brand names</td>
</tr>
<tr>
<td>Dietary services, Food service</td>
<td>Dining services</td>
</tr>
<tr>
<td>Ward, Unit</td>
<td>Village, Neighborhood</td>
</tr>
<tr>
<td>Nurses' station</td>
<td>Work area, Den, Support room, Desk</td>
</tr>
<tr>
<td>Patient</td>
<td>Resident, Client, Neighbor, Friend</td>
</tr>
<tr>
<td>Residents known by diagnosis</td>
<td>Their name -- Learn it!</td>
</tr>
<tr>
<td>Wanderers</td>
<td>People who like to walk</td>
</tr>
<tr>
<td>100-bed facility</td>
<td>100 people live in this home</td>
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</tbody>
</table>
“Our nation has been conducting investigations, passing new laws and issuing new regulations relative to nursing homes at a rapid rate during the past few years.

All of this activity will be of little avail unless our communities are organized in such a manner that new laws and new regulations are utilized to deal with the individual complaints of older persons who are living in nursing homes.

The individual in the nursing home is powerless. If the laws and regulations are not being applied to her or to him, they might just as well not have been passed or issued.”

Commissioner Flemming (AoA-TAM- 76-24)
# Ombudsmen, OBRA and Culture Change

## Older Americans Act
- Support community efforts to improve long-term care
- Advocate for quality care and rights of residents at the individual and systemic level
- Resolve problems by representing the interest of the resident
- Act on residents’ behalf in response to action or inaction by providers, public agencies and others that may adversely affect the resident

## Culture Change
- Provide information to residents, families and providers regarding culture change and resident-directed care
- Promote resident-directed care and culture change during complaint resolution
- Collaborate with others for widespread change and promote culture change as systems advocacy
<table>
<thead>
<tr>
<th>OBRA</th>
<th>Culture Change/ Pioneer Principle</th>
</tr>
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<tbody>
<tr>
<td>• Right to the highest practicable physical, mental, and psychosocial well-being of each resident</td>
<td>• Respond to spirit, as well as mind and body</td>
</tr>
<tr>
<td>• Right to be treated with consideration, respect and dignity</td>
<td>• Know each person</td>
</tr>
<tr>
<td>• Right to self-determination and choice</td>
<td>• Relationship is the fundamental building block of a transformed culture</td>
</tr>
<tr>
<td></td>
<td>• All elders are entitled to self-determination wherever they live</td>
</tr>
</tbody>
</table>
# Ombudsmen, OBRA and Culture Change

## OBRA
- Right to participate in community activities
- Right to be informed, participate in care planning and make decisions regarding care
- Right to receive appropriate and adequate care

## Culture Change/Pioneer Principle
- Community is the antidote to institutionalization
- Put person before the task
- Know each person
- Promote the growth and development of all
“Ombudsmen who have embarked on culture change initiatives have found that the effort needs to be comprehensive and long-term and yet needs to be approached in a manageable step by step process.”

NORC 2000, Ombudsman Best Practices: Supporting Culture Change to Promote Individualized Care, B. Frank
Case Discussion
Case #1

During a routine visit to Stoneybrook Nursing and Rehab several residents tell you that the food is often cold. You speak with other residents who are also dissatisfied with the food temperatures and would like more than one alternative meal choice. Due to the number of complaints about food, you visit with the Resident Council President, Ms. Jackson. Ms. Jackson says that complaints regarding the food temperature, lack of choice and small servings have been reoccurring complaints in the last few months. Ms. Jackson said the Administrator promises to address their complaints, but it is only better for a week or so and then goes back to normal.
## Common Resolution Strategies

- Seek permission to attend RC meeting and listen to resident concerns regarding dining
- Encourage RC to invite the Dietary Manager to their meetings in order to discuss these issues
- Provide information regarding Residents’ Rights
- Support resident petition regarding dining

## Culture Change Practices/Principles

- Dining Committee (includes residents and staff)
- Discuss different dining styles (e.g. menus, open dining hours, soup and salad buffet, family style)
- Formal feedback from residents regarding dining (e.g. survey)
- A learning circle to discuss their dining experience
- Residents vote on personal recipes for staff to cook
- Resident vegetable garden
- Incorporate cooking into activities

### Case #1
Ms. Young is a 42-year old resident with multiple sclerosis living in Baywater Nursing Home. Prior to needing 24-hour nursing care and moving into Baywater, Ms. Young worked as Physician’s Assistant. The Administrator, Mr. Brooks, calls you to discuss a pending discharge notice for Ms. Young. Mr. Brooks claims Ms. Young is violating the right to privacy of other residents by getting involved in their complaints. Mr. Brooks claims Ms. Young often tells the staff that she is more knowledgeable than they are and they should stop making mistakes. He states that the nursing staff feels threatened by her and do not want to assist her or provide care. Mr. Brooks also says Ms. Young is particularly close to a nurse on staff. Occasionally Ms. Young complains openly about how Mr. Brooks manages the nursing home and treats his staff. Mr. Brooks says he and his staff have spoken with Ms. Young about getting involved in other residents’ complaints, about her relationship with the staff and about her personal complaints, but they cannot meet her needs and have to issue a discharge notice.
Case #2

<table>
<thead>
<tr>
<th>Common Resolution Strategies</th>
<th>Culture Change Practices/Principles</th>
</tr>
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<tbody>
<tr>
<td>• Provide information regarding residents’ rights and discharge appeal rights</td>
<td>• Identify what is meaningful to the resident and encourage staff to meet those needs</td>
</tr>
<tr>
<td>• Speak with Administrator regarding resident’s rights and discourage discharge notice</td>
<td>• Is the resident involved in the RC? A leadership role in the RC?</td>
</tr>
<tr>
<td>• Recommend meeting with staff and resident to discuss resident needs</td>
<td>○ PEER Training to be a resident advocate?</td>
</tr>
<tr>
<td>• Identify if the other residents want her involved in their complaints</td>
<td>• Are there other younger residents? If so, do they have shared interests?</td>
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<tr>
<td></td>
<td>• Encourage an open dialogue between her and the direct staff</td>
</tr>
<tr>
<td></td>
<td>• Include her in staff training for a resident perspective</td>
</tr>
<tr>
<td></td>
<td>• Volunteer in the community? Hospice volunteer in the nursing home?</td>
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Complaints and Culture Change

If LTCO focus on culture change activities, who will address the problems in facilities?

Is focusing on culture change the best use of ombudsman time given the chronic issues we deal with every day?
# Top 10 Complaints (2006-2010)

<table>
<thead>
<tr>
<th>Code</th>
<th>Complaint</th>
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</thead>
<tbody>
<tr>
<td>41</td>
<td>Failure to respond to requests for assistance</td>
</tr>
<tr>
<td>19</td>
<td>Discharge/eviction- planning, notice, procedure, implementation, abandonment</td>
</tr>
<tr>
<td>26</td>
<td>Dignity, respect - staff attitudes</td>
</tr>
<tr>
<td>44</td>
<td>Medications - administration, organization</td>
</tr>
<tr>
<td>40</td>
<td>Accidental or injury of unknown origin, falls, improper handling</td>
</tr>
<tr>
<td>42</td>
<td>Care plan/resident assessment - inadequate, failure to follow plan or orders</td>
</tr>
<tr>
<td>71</td>
<td>Food service - quantity, quality, variation, choice, condiments, utensils, menu</td>
</tr>
<tr>
<td>45</td>
<td>Personal hygiene (includes nail care &amp; oral hygiene) dressing &amp; grooming</td>
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</table>

### Two of the Top 10 Complaints Alternate Between the Three Codes Below:

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<tr>
<th>Code</th>
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</thead>
<tbody>
<tr>
<td>66</td>
<td>Resident conflict, including roommates</td>
</tr>
<tr>
<td>48</td>
<td>Symptoms unattended, including pain, pain not managed</td>
</tr>
<tr>
<td>79</td>
<td>Equipment/Buildings - disrepair, hazard, poor lighting, fire safety, not secure</td>
</tr>
</tbody>
</table>
Chronic Issues

NORS: Top 3 Complaints from 2006-2010

1. F-41: Failure to respond to requests for assistance

2. C-19: Discharge/eviction-planning, notice, procedure, implementation, including abandonment

3. D-26: Dignity, respect- staff attitudes
How do you respond to complaints regarding call lights?
What do residents want?
- Relationships with staff and other residents

What do caregivers want?
- “CNAs defined good caregiving as based on the establishment and maintenance of good relationships with residents…”*  

Pioneer Principle
- Relationship is the fundamental building block of a transformed culture

*Turnover Reinterpreted: CNAs Talk About Why They Leave, Barbara Bowers
What is the “root cause?”

- **What is the residents’ routine?**
  - When are call lights used the most?
  - What is the most common request for help?
  - Can the staff anticipate the residents’ needs?
  - Do residents actively participate in their care plans?

- **Facility schedule or residents’ schedule?**
  - Is there a rigid morning schedule or do residents wake as they wish?
  - Do shower schedules honor resident preferences?
What is the “root cause?”

- Not enough staff? High turnover?
  - Consistent Assignment
    - Better understanding of the residents’ routine, better care
    - Better relationships between the staff and residents
    - Increased staff and resident satisfaction, less staff turnover

- Why are call lights ignored?
  - Who usually responds to call lights?
    - “That’s not my job.”
    - Promote teamwork response and direct care involvement in decisions
    - Share the residents’ perspective of what call lights mean to them
Culture Change as Systems Advocacy

- What are the top 5 complaints in your region/assigned facilities?
  - How could Culture Change practices address those complaints?

- How can you develop a Systems Advocacy plan to respond to those complaints and promote resident-directed care?
  - In-Service training for staff
  - Work with Resident and Family Councils
Discussion
In Closing

- Seize daily opportunities to incorporate Culture Change principles and encourage resident-directed care in:
  - Complaint resolution process
  - Discussions regarding Residents’ Rights
  - Consultations with facility staff, residents and families
  - Your language
  - Systemic advocacy
Resources

- The National Long-Term Care Ombudsman Resource Center (NORC) [www.ltcombudsman.org](http://www.ltcombudsman.org)
- The National Consumer Voice for Quality Long-Term Care [www.theconsumervoice.org](http://www.theconsumervoice.org)
- Pioneer Network [www.pioneernetwork.net](http://www.pioneernetwork.net)
- Advancing Excellence in America’s Nursing Homes [www.nhqualitycampaign.org](http://www.nhqualitycampaign.org)
- CMS (Centers for Medicare & Medicaid Services) [www.cms.gov](http://www.cms.gov)
- CMS: Four Part Series- From Institutionalized to Individualized Care (archived webcasts) [http://surveyortraining.cms.hhs.gov](http://surveyortraining.cms.hhs.gov)
- Quality Partners of Rhode Island [www.riqualitypartners.org](http://www.riqualitypartners.org)
- PHI National [www.phinational.org](http://www.phinational.org)
- **YOU!** Please share your success and activities with NORC.
Advancing Excellence – A national campaign to improve the quality of care in nursing homes that kicked off in September 2006.

Assisted Living – Strengthening assisted living standards is critical to protect vulnerable residents and ensure an reasonable quality of care. Follow the development of this issue as many seek to define assisted living in a meaningful way.

Bankruptcy Law and the LTCOP – The Bankruptcy Abuse Prevention and Consumer Protection Act of 2005 allows the appointment of a “Patient Care Ombudsman,” which may be the State Ombudsman.

Culture Change – This movement promotes a person-centered model of care.

Dementia Care – Find resources and information achieving quality care for people living with dementia care.

Elder Abuse/Elder Justice – Sadly, older persons are not always treated with respect nor do they always get the care they need.

Emergency Preparedness – Resources are available for victims, their families and care providers that may be useful in preparing for, or in the aftermath of, an emergency event.
Ombudsman Support

NORC applauds the daily efforts of all long-term care ombudsmen to promote residents’ rights and quality of care. It is our hope that these documents and best practices will challenge ombudsmen to try new strategies in addressing ongoing issues. In each category you will find center documents related to key ombudsman topics, best practices used by ombudsmen around the country and additional relevant resources.

- Program Management
- Program Promotion
- Ombudsman Training
- Systemic Advocacy
- Volunteer Management

Additional Resources

Training Videos Used by Ombudsmen (Updated May 2011)
This list is a starting point for compiling effective training tools. Thanks to all of the local and state ombudsmen and volunteer coordinators who contributed information for the compilation of this list.
Resident-Directed Care or "Culture Change"

Consumer Voice encourages all residents, family members and advocates to learn more about the resident directed/centered care, also called "culture change," that is in many ways the full implementation of the 1987 nursing home reform law.

July 23 Hearing: Person-Centered Care: [Reforming Services and Bringing Older Citizens Back to the Heart of Society](#)

Pioneer Network and Culture Change

Currently, there is a grassroots movement to transform the culture of aging in America; this movement is called culture change, the transformation of traditional institutions and practices into communities in which each person's capacities and individuality are affirmed and developed. To learn more about culture change and the Pioneer Network, visit their website at [www.pioneernetwork.net](http://www.pioneernetwork.net).
The National Long-Term Care Ombudsman Resource Center (NORC)

www.ltcombudsman.org
ombudcenter@theconsumervoice.org

The National Consumer Voice for Quality Long-Term Care
(formerly NCCNHR)

http://www.theconsumervoice.org/

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