

*Identifying information has been removed from this report.*

## **OVERNIGHT AS A RESIDENT**

### The Perspective of an AIT

March 10, 2008

As part of my Administrator-In Training education, I planned to spend 18 hours as a resident. I chose to stay at [REDACTED]. I chose this facility for many reasons. The main reason was the staff of [REDACTED]. I worked there for a short time a few months ago. What stood out most to me was that every person I saw had a smile on their face and seemed to genuinely enjoy their work. In nursing homes this type of behavior is typical of most of the workers, but not to the degree I experienced there. The size of the facility was another reason I chose [REDACTED]. They have a bed capacity of 43 with an average census of 40. Their Medicare census averages 3. My hope was that, because of the small size of the facility, they would have the time to spend on assisting me with my education. The last reason that I chose [REDACTED] was [REDACTED], the administrator. He did his overnight stay at this same facility not to long ago. I felt confident that he would know what to tell his staff to prepare them for my arrival.

My biggest concern about the stay was that the residents may suffer because the CNA's would be distracted. I understand the importance of my stay in the facility. It is to give me a closer look at resident life and will enable me to empathize with the residents. I just did not want it to have a negative impact on the residents.

During my stay at the facility, I took notes that outline the events and some of my thoughts as the night unfolded.

- 1500** I was met at the door by the Resident Care Manager (RCM), Charge Nurse, and a Certified Nursing Assistant (CNA). They had a wheelchair and a personal alarm ready for me. I was put immediately into the chair. The nurse took my bag and the CNA took me to get weighed. When we got to the room the first thing I noticed was that the room did not have a television. It was a very nice room, just quiet and secluded. The CNA showed me how to use the call light system then took my vitals.
- 1510** The Social Services Director (SSD) came in for a quick visit. The CNA left to finish what she was doing when I arrived. SSD gave me her business card and a card with the phone number for the speak-up hotline ( complaint/concern number). She said she had to go but would be back.
- 1515** The CNA returned to inventory my belongings. This was a very strange situation. I did not expect it to bother me. I was sitting there helpless while someone I did not know was digging through my bag, counting my clothes, and putting my stuff away.

**1520** The dietary manager came in to introduce herself and to take my dinner order.

**1525** The snack cart came by offering strawberry shortcake. I declined. Looking back on this situation I believe that I declined because I looked at the cart and could not see how strawberry shortcake could come from the mess that they had on the cart.

**1530** SSD returned to complete admissions paperwork. Since I am not really moving in, we just visited for a few minutes. Then, she ran back out.

I am scared to move for fear of setting off the alarm

**1545** The RCM brought in the therapist. We visited for a few minutes, the RCM offered me a book or magazine and left.

**1555** The Activities Director came in to visit. She filled out the activities inquiry sheet, invited me to the activities and left. One of the activities that she invited me to was a movie that was starting.

**1600** I am going to go down and see what the movie is

**1625** The movie is "Driving Mrs. Daisy". It is not really my speed. The nurse asked again if I needed anything.

**1645** Activities brought me a radio. I think it is older than me. It has a lot of static and barely picks up any radio stations. It is, however, better than nothing.

In the past two hours, I have been offered three water pitchers. I am nervous about drinking the water because I know what a hassle it will be for me to get to use the restroom. I wonder how often this same fear affects the hydration of the residents.

**1745** The CNA came into my room to get me ready for dinner. I went to the bathroom. The two aids transferred me into the bed and got me settled.

**1805** I was brought two trays, one puree with thickened water and one regular. Three CNAs, the charge nurse, and the RCM all came into my room to watch me eat the pureed food. They all seemed to enjoy themselves. I have pureed ravioli, some kind of vegetable, and what looks like it could be a roll. It is awful. It all tastes like different flavors of the same thing. (I asked the dietary manager about this later and was told that they thin everything with half and half instead of water. So, the half and half is what I was tasting). I also tasted thickened water. I first thought that I was drinking a weak lemonade. When I asked for water to try I was told that I already had water, it just has a lemon flavor. I did not like the taste of the

water, but it did not taste nearly as bad as the pureed food. After eating the pureed food, I am very glad that I ordered a sandwich as backup for the pureed food.

**1827** The charge nurse came in to see how I am doing. We talked a bit about my meal.

**1845** My tray was just picked up. The CNA is always very pleasant, but in a hurry.

Lighting in this room makes it nearly impossible to read or work a puzzle book from this bed. The way that this room is set up, the light is on the ceiling below the foot of the bed. The glare and the shadows make reading very difficult. I will be spending a lot of time in the future evaluating how rooms are layed out to see if they are functional.

**1930** The CNA came in to explain that this is when she typically starts getting people ready for bed, but that there is no hurry. I told her that I was in no hurry so she went about her business.

**2055** Pushed call light to ask CNA for assistance from bed.

**2058** CNA helped me from bed. I went to the TV room and watched TV for an hour or so. I then rolled up and down the halls for awhile.

**2205** The night shift CNA came in to introduce herself and to bring in fresh water.

**2210** I am back in my room ready for bed and preparing to work a Sudoku puzzle.

**2250** The aids came in and offered to help me into bed. I accepted. I did not realize that I would have no control over the light from the bed. Looks like I am done with my Sudoku Puzzle.

**0005** CNA came in to check my vitals.

**0600** I just woke up from the noise. This room is close to the nurses station so I have to assume that it is time for shift change.  
I fully expected to have had more of a restless night. The place was pleasantly quiet.

**0630** CNA came and got me out of bed. I brushed my teeth and got ready to start the day.

- 0650** The dietary manager is rushing from room to room taking breakfast orders. Today is country breakfast. This means that the cooks bring out the electric griddles and cook breakfast for the entire facility, including staff, in the dining room. It is a very pleasant experience.
- 0720** I am sitting in the full dining room watching meals get prepared and taken to residents that are eating in their rooms. I feel that this is being done backward. I think that feeding people in their rooms first will encourage other residents to stay in their rooms.
- 0735** I was served a very good breakfast that is exactly what I wanted. Sausage, eggs, hashbrowns, and toast with orange juice, milk, and coffee to drink. While waiting for breakfast I was offered coffee four times. I finally accepted when they brought the food. I did ask for break room coffee. They gladly got it for me.
- 0900** I am going to call it a day. I am extremely tired and my backside hurts from this chair. I have gained a whole new respect for wheelchair cushions. Most of the facilities have them in all of the chairs. I think that they should be in all chairs in all facilities. After just a few short hours, the wheelchair was anything but comfortable.