Finding Person-Centered Long-Term Care Facilities

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Today’s Focus

- Transitioning from home to long-term care setting
- Decision Support for family members who want a setting that practices “person-centered” care

Person-centered Care in Oregon Long-term Care Settings

Goals for Today

- Provide a knowledge base of person-centered care principles and practices.

- Provide tools to guide consumers in selecting a long-term care facility that practices person-centered care.
Person-Centered Care

...a philosophy of care that requires thinking about and planning with and for people who require assistance in their daily lives and providing that assistance in such a way that the person is honored and valued and is not lost in the tasks of caregiving.
The emphasis is on well-being and quality of life as defined by the person.
Person-Centered or Person-Directed?
## Continuum of Person-Directed Culture

<table>
<thead>
<tr>
<th>Provider Directed</th>
<th>Staff Centered</th>
<th>Person Centered</th>
<th>Person Directed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management makes most decisions – little consideration of impact on residents or staff</td>
<td>Staff consult residents or put themselves in residents’ place while making decisions</td>
<td>Resident preferences or past patterns form basis of decision making about some routines</td>
<td>Residents make decisions every day about their individual routines. When not capable of articulating needs, staff honor observed preferences &amp; lifelong habits</td>
</tr>
<tr>
<td>Residents accommodate staff preferences; follow existing routines</td>
<td>Residents accommodate staff but have some choices within existing routines &amp; options</td>
<td>Staff begin to organize routines to accommodate resident preferences – articulated or observed</td>
<td>Staff organize their hours, patterns and assignments to meet resident preferences</td>
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Person-Centered Care

- Personhood
- Knowing the Person
- Autonomy/Choice
- Relationships

- Care
- Meaningful activity
- Environment
  - Physical
  - Organization
PERSONHOOD
Knowing the Person

PERSONHOOD
Knowing the Person

PERSONHOOD

Relationship
PERSONHOOD

Autonomy/Choice

Knowing the Person

PERSONHOOD

Relationship
PERSONHOOD

Autonomy/Choice

Organizational Environment

Knowing the Person

Physical Environment

Relationship

Care
PERSONHOOD

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Knowing the Person

Care

Meaningful activity

Relationship
PERSONHOOD

Organizational Environment

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Care

Meaningful activity
Elements of Person-Centered Care

- Knowing the Person
- Choice, Autonomy
- Relationships
Person-Centered Care

- What is important TO you?
- What is important FOR you?
Arthur’s Story

http://www.youtube.com/watch?v=5ZcWuy4GHEc&feature=related
The Problem – What’s not working

- Arthur lives alone --
  - Not safe
  - Not eating well
  - Has fallen

- He has cognitive impairment
  - Found out at night in unsafe neighborhood
  - He is throwing food away, attracting rats
  - Hit caregiver
What is Important TO Arthur?

- Personal Preferences, Values
  - Staying in his apartment
  - Having company—talking about boxing and other sports
  - Piping hot foot, eating with others
  - Always wearing a particular hat
  - Having $10.00 in his pocket for emergencies
  - Getting frequent reminders about appointments
  - Staying connected with his nephew and family (weekly visits, daily calls)
# Arthur’s Needs Based on What’s Not Working

<table>
<thead>
<tr>
<th><strong>Important for</strong></th>
<th><strong>Important to</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Supervision (wandering)</td>
<td>Interesting conversation</td>
</tr>
<tr>
<td>Reduce falls risk</td>
<td>Piping hot meals</td>
</tr>
<tr>
<td>Fumigating apartment</td>
<td>Company while eating</td>
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<tr>
<td>Managing behavioral symptoms</td>
<td>$10 in his pocket</td>
</tr>
<tr>
<td></td>
<td>Favorite hat</td>
</tr>
<tr>
<td></td>
<td>Not being startled awake</td>
</tr>
<tr>
<td></td>
<td>Staying in his apartment</td>
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</table>
Arthur’s Goals

- Provide support so that Arthur can stay safely in his apartment.
- Increase opportunities for Arthur to socialize with others, especially during meals.
Strengths

- Supportive, involved family
- Arthur is engaging and easy to talk to – when he is not startled and has things that are important to him available (hat, $10)
- Has few ADL needs
- Workers have a key to his apartment
- Resources to pay for current levels of care
Options Counseling Action Plan

- Fumigate apartment (nephew)
- Prepare & freeze meals (nephew’s wife)
- Continue visits & calls (nephew & family)

Task List for HCW:
- Read profile – understand what is important to Arthur
- Heat meals & sit with Arthur while he eats
- Discuss sports
- Call Arthur’s name, make sure he is awake before approaching
- Make sure Arthur has his $10 and hat
- Continue to listen and learn from Arthur
Arthur, 12 months later . . .

- More memory impairment
- Increased disability due to congestive heart failure
- Complicated medication management regime
- Nephew’s family cannot maintain meal preparation
- 24-hour supervision very expensive
"Culture change" is the common name given to the national movement for the transformation of older adult services, based on person-directed values and practices where the voices of elders and those working with them are considered and respected.

Pioneer Network
(www.pioneernetwork.net)
Consumer Expectations for Decision Support

- Objective, neutral information
- Assistance that is tailored for their situation
- Help in understanding the process of selecting the best care setting possible for their needs and resources
Consumer Knowledge about Long-term Care Options

- Types of settings
  - Physical differences, staffing

- Licensing and Oversight

- Costs

- Help with finding the right setting
  - Options Counseling
Understanding “Levels of Care”

- How much assistance is needed with ADLs?
- How much care and supervision is needed to manage a health condition, for example:
  - Taking medications
  - Checking blood sugar levels
  - Using oxygen
  - Daily range-of-motion exercises
- What is the potential for care needs changing in the future?
Consumer Prep #2

- Understanding how costs are determined
  - What is included in the facility’s base rate?
  - What are the specific fees for additional services?
  - What methods are used to determine monthly charges?
  - What are the conditions under which a rate might change?
  - What percent annual increase to expect?
Consumer Prep #3

- Understanding Uniform Disclosure Statements, or the conditions under which a facility would request a resident to leave
  - Care needs that exceed the capacity to meet them (e.g., 2-person transfer, confined to bed, wandering)
  - Changing from private pay to Medicaid
Consumer Prep #4

- Understanding how to get the most out of visiting facilities
  - Make an appointment
  - Talk to managers, staff, residents and family members
  - Visit a second time without an appointment
  - Be prepared to talk about:
    - Important FOR information
    - Important TO information
  - Ask questions about person-centered care
  - Trust your senses
What is important FOR Arthur?

- Medication management
- Monitoring & managing symptoms of CHF
- ADL care
  - Showers
  - Dressing
  - Mobility
- Safe environment
What is important TO Arthur?

- What do we know that is important to Arthur?
- What else do we need to know?
- How do we guide Arthur’s family in gathering this information from Arthur?
Selecting a PCC Care Setting for Arthur

- What do we know that is important to Arthur?
  - Talking sports
  - Having piping hot meals
  - Company while he eats
  - His $10 & Hat
  - Being in his home
Selecting a PCC Care Setting for Arthur

What else do we need to know?

- Things that will make environment more comfortable
- Daily routines
  - Getting up and going to bed
  - Meal times
  - Getting clean
- Meaningful activities
  - Music
  - Outdoors
  - Religious spiritual activities
- How he wants to relate to caregivers
Selecting a PCC Care Setting for Arthur

How do we guide Arthur’s family in gathering this information from Arthur? (p. 6-7)

What is Important TO My Family Member
The answers to the following questions will help staff understand the importance of specific daily routines, preferences, and people. Ask your family member:

<table>
<thead>
<tr>
<th></th>
<th>Answers</th>
<th>Not Important</th>
<th>Somewhat Important</th>
<th>Very Important</th>
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<tbody>
<tr>
<td>What time do you like to get up?</td>
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<tr>
<td>What time do you like to go to bed?</td>
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<tr>
<td>When do you like to eat breakfast?</td>
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<td>Do you prefer a tub bath, shower, bed bath, or sponge bath?</td>
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<td>Do you want to choose what clothes to wear?</td>
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<td>What are your favorite foods?</td>
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<td>What are foods you do not like?</td>
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Selecting a PCC Care Setting for Arthur

Consumer Guide, p. 8-9

- ADL Needs
- Managing health conditions
- Cognitive functioning
Finding the right setting

Questions for Management & Staff

- How will you get to know Arthur?
- How will the staff accommodate Arthur’s preferences?
- How do you build a sense of community here?
How will you get to know my family member?

- Listen for or observe:
  - Genuine interest in your family member – “important to”
  - Interest in your family member’s history as well as current health situation
  - What will they do? (e.g., assessment tools, conversations with your family member, seeking information from you)
  - Respectful interactions between staff and residents

- Knowing the Person
How will you accommodate preferences?

- Listen for or observe:
  - Time for staff information sharing about preferences & well-being built into daily routines
  - Consistent assignment
  - Ability to request specific caregiver
  - Ability to adhere to important routines
  - Those who know your family member best, participate in care planning
  - Setting (community) makes every effort to include you in care conferences

- *Choice, autonomy*
How do you build a sense of community?

Listen for or observe:

- System in place for welcoming new residents
- Residents are engaged in their environments (individually, small groups, larger gatherings)
- Common space is in use
- A range of activities are provided
- Residents’ talents and special interests are recognized and embraced

- Relationships
Questions for other residents & their families

- Residents and family report or convey:
  - Positive relationships with staff and management
  - That staff know what is important to them and accommodate their preferences (especially residents)
  - Continuity and stability in staffing
  - Report enjoyable events
  - A sense of community
  - Responses consistent with those of management and staff
Trust your senses!

- What do you see?
- What do you hear?
- What do you smell?
- What do you taste?
- What about touch?
Other Sources of Information

- Oregon Long-term Care Ombudsman’s Office
  - www.oregon.gov/ltco
  - 1-800-522-2602

- Local DHS Offices

- Nursing Home Compare website
  - www.medicare.gov/nursinghomecompare
Culture Change in Oregon

- Making Oregon Vital for Elders (M.O.V.E.)

http://orculturechange.org/
Questions?