



Pioneer
Network

Using the MDS 3.0 as an Engine for High Quality Individualized Care

**Webinar Series Four:
Reducing Anti-Psychotics
Through Individualized Care —
Medical Perspective and Case Studies**



Welcome!

Using the MDS 3.0 as an Engine for High Quality Individualized Care

Webinar Series Four

Part Ten: Promoting Mental Health Through Team-based Individualized Assessment and Care Planning

Developed by B&F Consulting for the Pioneer Network's National Learning Collaborative on
Using the MDS as the Engine for High Quality Individualized Care Funded by The Retirement Research Foundation



Using the MDS 3.0 as an Engine for High Quality Individualized Care



Barbara Frank,
B&F Consulting
Pioneer Network Board

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Barbara Frank

Maximizing the MDS assessment and care planning process by *involving the staff closest to the resident* in using their daily observation of residents needs to adjust the care plan to individualize care, prevent declines and promote well-being.



Integrating the MDS 3.0 Into Daily Practice

Series One: Organizational Practices

- Part One: Aligning Daily Documentation and Communication
- Part Two: Organizational Systems
- Part Three: QI and MDS

Series Two: Clinical Applications

- Part Four: Promoting Mobility, Reducing Falls, and Eliminating Alarms Through Individualized Care
- Part Five: Individualized Dining: New Practice Standards
- Part Six: Smooth Transitions in Care: Getting New Residents Off to a Good Start

Series Three: Individualized Care: Using Performance Improvement Processes to Reduce Use of Anti-psychotic Medications through Individualized Care

- Part Seven: MDS and Quality of Life: Operationalizing Customary Routines
- Part Eight: MDS and QAPI: How to Improve Outcomes through Just-in-Time Assessment, Care Planning and Quality Improvement by Staff Closest to the Residents

Series Four: Reducing Anti-Psychotics Through Individualized Care – Medical Perspective and Case Studies

- Part Nine: Individualizing Care and Environments: Non-pharmacologic Interventions Instead of Anti-Psychotic Medications
- Part Ten: Promoting Mental Health Through Team-based Individualized Assessment and Care Planning

Previous Webinars are available for purchase as archive recordings at www.PioneerNetwork.net

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SEPTEMBER 20, 2012

Part Ten: **Promoting Mental Health Through Team-based Individualized Assessment and Care Planning**

TODAY'S PRESENTERS

Susan Wehry, MD

Commissioner, Vermont Department of Disabilities,
Aging and Independent Living, Agency of Human Services

Donna Howie, Sunbridge, MA

with nursing home staff and residents
from Lowell and Lawrence, MA

Laurie Herndon

Massachusetts Senior Care Foundation

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SOL OASIS PRINCIPLES

1. Person-centered – *Know the Person*
2. Strength-based – *Focus on what people can do*
3. Behavior = Communication – *Understand needs*

Simple yet profound...



Barbara Frank

First: Four video clips

1. Roger Neil and Donna Howie:
how the new approach has changed
his experience
2. Donna Howie: describes new
approach
3. Dr. Wehry: understanding
agitation and aggression
4. Donna Howie: consistent
assignment so residents feel safe



Barbara Frank

How *knowing each person* and *adjusting to their needs* on a micro day to day level is what gets the best outcomes.

A fluid, living assessment and care planning process that is used by staff closest to the resident and directly contributes to residents' well-being



Barbara Frank

Simple yet profound:

It's all about:

- knowing the person,
- understanding their needs,
- letting them know they are safe, that their needs will be met



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Left to right:

Top row: Nicole Kopytko, Mark Cooke, Donna Howie, April Blackwood, Tina Lefebvre, Angela Pagan, and Loretta Martinez
Bottom row: Ray D'Aiuto, Bill Reidt, Linda Rameau, Michael Corbett, and Roger Neil

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Roger Neil

*She's with me everyday.
She knows me
She knows when to push; when to
back off*

*Always joking
Brings my whole spirit up*

So easy to make it worse

*A simple thing like a stupid little
joke can change the mood of the
whole thing*



Loretta Martinez

I can be very very very difficult

*I trust her...because she's my
aide and I love her and trust her*

Didn't trust nobody

*It's better to trust people than
always be on the defensive*



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Angela Pagan
Sol Oasis Coordinator,
Wood Mill Care and Rehab,
Lawrence, MA

If they become aggressive or agitated,
you will know how to talk to them, to
calm them down



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Roger Neil

They let me vent my anger and come to some reasonable conclusion

Otherwise they would send me to the hospital

It's a way of just dealing with the issue right at the time



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Bill Reidt, Administrator,
Hammond House, Worcester, MA

Prior, we would react to the situation, instead of getting to know the person

Nobody like being told what to do

A “contract” is trying to change the person to fit into your system – you take the individual away

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Bill Reidt, Administrator,
Hammond House, Worcester, MA

If we're trying to make it "home"... the only way is to look at the individual

As we get to know them, we head things off at the pass. We look at situations that might be developing, know the person, and then deal with it prior to anything bad occurring

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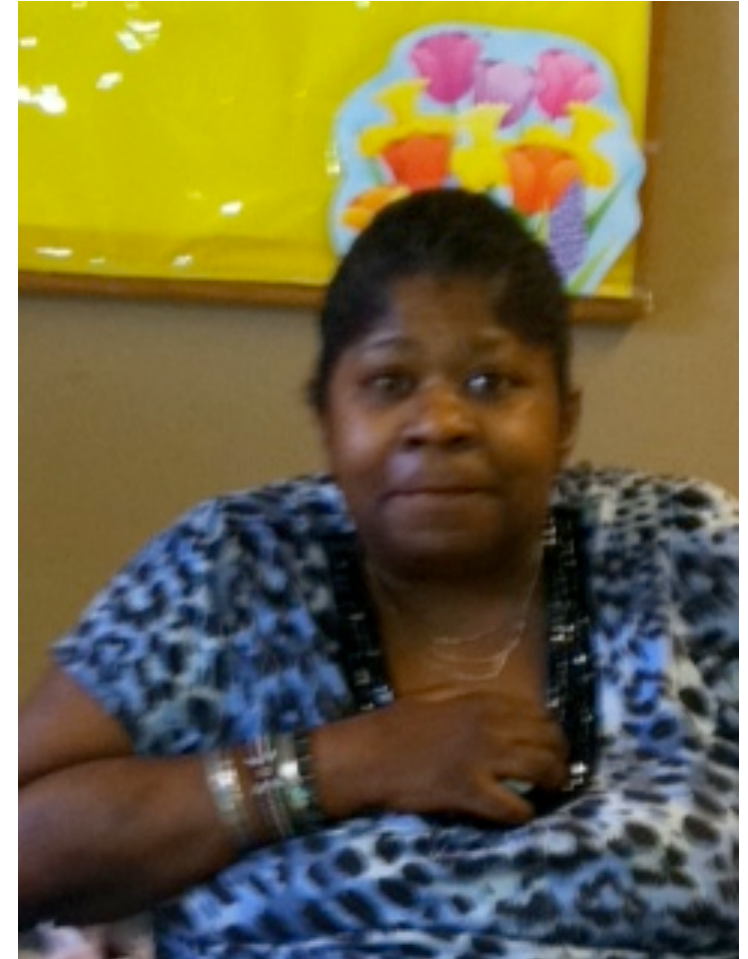


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Bill Reidt, Administrator,
Hammond House,
Worcester, MA

*With Loretta, we failed her.
Through Sol Oasis, she
flourishes... I see the
difference as soon as I see
her...*





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April Blackwood
Sol Oasis Coordinator,
Hammond House,
Worcester, MA

Our residents realize that we take the time to get to know them and it gets communicated to everyone throughout the team

Hard to come into a new environment...it's our job to make it as pleasant and easy as possible



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April Blackwood
Sol Oasis Director,
Hammond House,
Worcester, MA

With everyone else coming in, if we ... take the time to get to know them, that makes all the difference to them

Say “I’ll be back” and carry through



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April Blackwood
Sol Oasis Director,
Hammond House,
Worcester, MA

One-to-one visits, three times a week for 20 minutes

Find *what time is best for you*

I abide my time to you

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April Blackwood
Sol Oasis Director,
Hammond House,
Worcester, MA

We get to know what the residents' needs are

*The resident realizes that this staff member is
here for me*



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April Blackwood
Sol Oasis Director,
Hammond House,
Worcester, MA

It's important to gain trust

Our residents have burned bridges

It's difficult for them to trust



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April Blackwood
Sol Oasis Director,
Hammond House,
Worcester, MA

Take the time to get to figure out who they are and what they like

Trust is very important. Without trust, we have nothing

You have to carry through... that's the whole point



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Michael Corbett,
Administrator, Wood
Mill Care and Rehab,
Lawrence, MA

You have to open up and be yourself and show something of yourself as a human being

Give something from your heart, not just from your role

Trust can't happen if we just sustain professional roles... it's critical to this type of environment



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Linda Rameau,
Administrator, Glenwood in Lowell, MA

Tina gained trust because *she speaks no different to the residents than she does to her co-workers*

Truly looking at them as a person

She's enabled them to trust again



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Tina Lefebvre
Sol Oasis
Coordinator

Sometimes they just need to vent

Loretta felt like “this is just another building they’re going to move me on to”

Initial trust... Just by getting to know them



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Tina Lefebvre
Sol Oasis
Director

Why you throwing your tray in the hallway?

Because no one's taking my tray...

No one came in and asked me...



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Tina Lefebvre
Sol Oasis
Director

Knowing our residents...and their daily routines

Are they going to have a “behavior?” Yes they are if you go in at 7 in the morning



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Tina Lefebvre
Sol Oasis
Director

If a resident is throwing his tray, I go to the resident and say "why are you doing this"

Then we do an "on-the-spot" training – learning circle on "how could we have avoided this?"

It's my fault that the behavior happened...



Barbara Frank

*It's easier to change your own
behavior than your resident's*

Understanding the behavior is the first step in being able to address the resident's needs.

It all starts with being in relationship, having trust.

It's a mistake to dismiss their behavior as an extension of their dementia or mental illness.

*The key is to know the person
and understand what they are telling us.*



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Group Viewers

Pause for Discussion



Barbara Frank

Dr. Wehry: Understanding Needs

Maslow's Hierarchy of Needs

Judith Carboni's *Homelessness
Among Institutionalized Elderly*

*The take-home idea is not to stop the behavioral
expression of need – it's to understand the need.*

SunBridge – Building Trust through Empathy



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Mark Cooke
Sol Oasis Director, Spring
Valley, Worcester, MA

At the outset, she seemed difficult.

What she needed was somebody to spend time with her

People start giving her individualized attention



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Mark Cooke
Sol Oasis Director, Spring
Valley, Worcester, MA

Challenges:

People don't change quickly – it's a long journey just to get small steps

Keep trying. No matter how many failures, continue to try. *Sometimes people just feel good trying.*



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Mark Cooke
Sol Oasis Director, Spring
Valley, Worcester, MA

One woman had paranoia and was verbally abusive...

Went from abusive to “I need to talk with you.” Now she goes and takes a minute or she’ll talk about how she’s feeling.



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Mark Cooke
Sol Oasis Director, Spring
Valley, Worcester, MA

When she's having these thoughts that someone's talking about her.... I say, *"well what did they say? How does that make you? How are you going to deal with how you're feeling so if that happens again you can stay calm because you should know what someone else says about you shouldn't define who you are."*



Barbara Frank

When people's needs for connection and acceptance are met, their anxiety goes down and they no longer need to rely on the behavioral communications that trigger medications.

Group Viewers

Pause for Discussion



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Barbara Frank

SunBridge:

Teamwork across departments

Results



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Linda Rameau,
Administrator,
Glenwood in
Lowell, MA

It's not your typical bingo group. There are self-esteem, coping skills, goal-setting, anger management

You're you, you're value, you're worth – not just a questionnaire on when you want to get up



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Angela Pagan
Sol Oasis Director,
Wood Mill Care and
Rehab, Lawrence, MA

Garden Club: to build self-esteem
Work with Rehab for right tools
Work with Housekeeping – a little bit of a mess
Congratulations on the tomatoes
Social skills – we all work together



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Linda Rameau,
Administrator,
Glenwood in
Lowell, MA

We have all the disciplines involved
Therapy's getting her walking again
They set goals together
Strength-based



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Because of Sol
Oasis and our
new approach:

Ray D'Aiuto,
Administrator,
Spring Valley,
Worcester, MA

Decreased hospitalizations for mental
illness

Number of employees injured = 0

Satisfaction dramatically increased

Better documentation has increased acuity
scores for payment



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Michael Corbett,
Administrator, Wood Mill
Care and Rehab,
Lawrence, MA

5 years ago – 72 deficiencies...

Deficiency free last year

Surveyors see it. They sense the change in the culture and the environment.



Barbara Frank

SunBridge
*Transformed from the old
coercive model where
behaviors are to be “stopped”
to the new approach – know
residents, build trust, put
yourself in their shoes, let
residents know they are safe
with you because you
understand what they need
and will meet their needs.*

Replicated first in 11 Massachusetts home with
100 more now starting



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Laurie Herndon, GNP, Director of Clinical Quality,
Massachusetts Senior Care Foundation

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OASIS Principles:

1. Knowing residents
2. Walking in their shoes
3. Understanding the behavior as communication
4. Learning how to understand what residents' need.



Laurie Herndon, GNP
Mass Senior Care
Foundation



Laurie Herndon, GNP
Mass Senior Care
Foundation

Pilot-tested OASIS in 11 homes

Mix of nursing homes

All had implemented consistent
assignment

Gave them curriculum – they
incorporated into competency
fairs; 20 min lessons on the unit

Apply to their own case studies



Laurie Herndon, GNP
Mass Senior Care
Foundation

Getting to know the resident and seeing what their behavior means day to day is really the foundation

A “loss” exercise helped staff and families be in the shoes of the resident... *having empathy for what it’s like to have arbitrary losses when they enter long term care*



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Laurie Herndon, GNP
Mass Senior Care
Foundation

Key success was attitude change to understand that *behavior is a form of communication*.

Staff embraced the opportunity to get to know the residents.



Laurie Herndon
Mass Senior Care
Foundation

Apply ideas right back to
their units and start
applying it right away

Rename committee from
Behaviors to Well-being

*Staff could more easily
change their own behavior
than the resident's behavior*



Laurie Herndon, GNP
Mass Senior Care
Foundation

Sustainability – incorporate into every meeting

All members of the team participate in care planning, particularly CNAs

Key principles:

- See the resident
- See behavior as communication
- Have a spirit of inquiry about behavior

Allow and encourage your staff to get to know the residents



Barbara Frank

3 Video Clips – individualizing care reduces the need for anti-psychotic medications.

Dr. Wehry: benefits of individualizing care

Donna Howie: putting ourselves in our residents' shoes.

Roger with Angela, his consistent caregiver: how they work through challenges by being in it together.



Barbara Frank

True trust. True relationship.

When the staff closest to the resident know that person well and respond to his needs, he no longer has to express his anger and frustration through aggression, because he trusts that he can talk it out and be okay.

Assessment and care planning are fluid processes built around each person's unique personality, history, strengths, customs, and needs.



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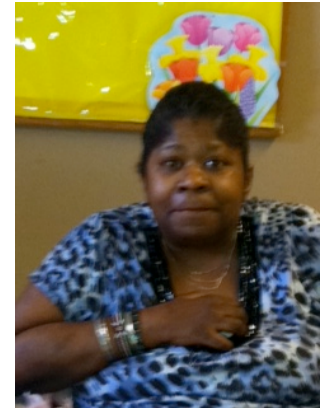


Barbara Frank

When we support well-being,
we prevent distress, and
eliminate the use of
medications to quell the
distress.



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