

# Creating Home in the Nursing Home: Fantasy or Reality?

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Mid pleasures and palaces,  
though we may roam,  
Be it ever so humble  
there's no place like home

J Payne

# Language is Important

- Person Centered Care
- Resident-Directed Care
- Self-Directed Care



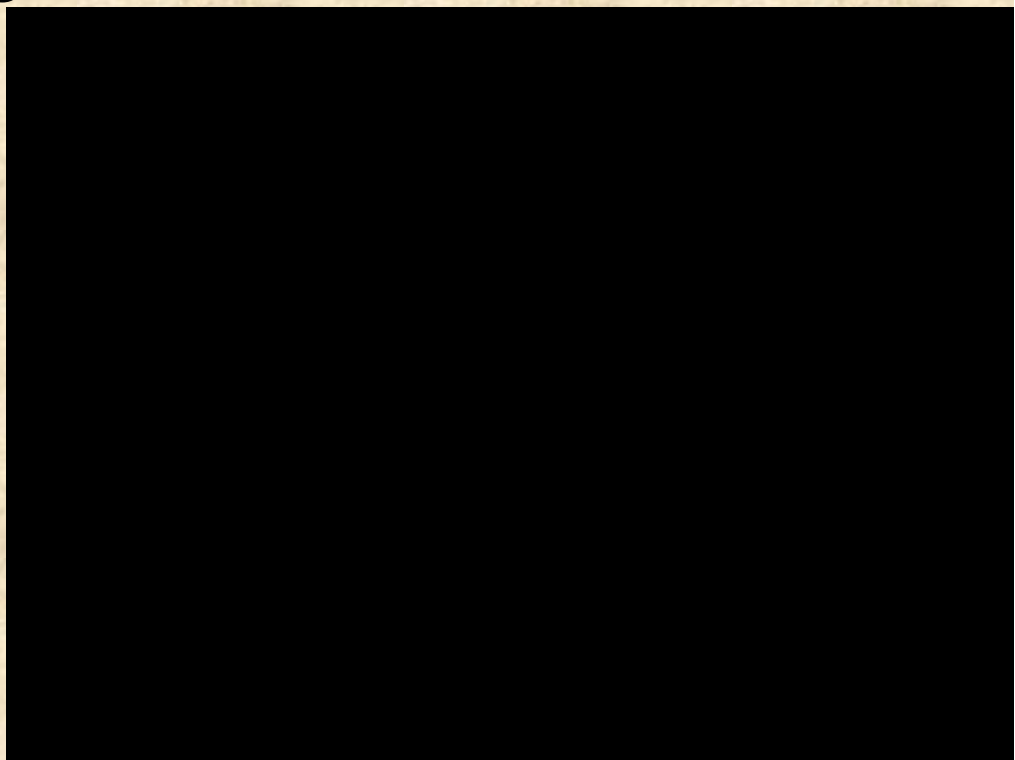








# Layers of the Meaning of Home

- Psychological State
  - Expression of Self
  - Design Typology
- 

# Home as Psychological State

- Safe and secure
- In control of our actions and environment
- In relationship with people we choose



# In a (traditional) Nursing Home...

- Staff have virtually all the control
  - Timing of almost everything – wake up, meals, shower/bath, activities, trips, going outside.
  - What is served at meals- often a 4-6 week rotation of the same foods over and over again – sometimes as short as 3 weeks.
  - What activities people engage in.
  - When people can go outside.



# What Decisions CAN Residents Control?

- When to get up
- What to have for breakfast
- When and where to bathe
- What to do each day

In Short- **EVERYTHING!**



# Home as Expression of Self

Tag 252: “the facility must provide a safe, clean, comfortable and homelike environment, allowing the resident to use his or her personal belongings to the extent possible.”



The interpretative guidelines define a homelike environment as “one that de-emphasizes the institutional character of the environment as much as possible and allows residents to use those personal belongings that reflect a homelike environment. A personalized homelike environment is one that recognizes the **individuality** and **autonomy** of the resident, provides an **opportunity for self-expressions** and **encourages links with the past and family members.**”

Most of the rest of the interpretative guideline focuses on personal belongings in the residents' bedrooms and when their absence should be questioned.

While this is important, it does not address either residents belongings in the shared areas of the household,

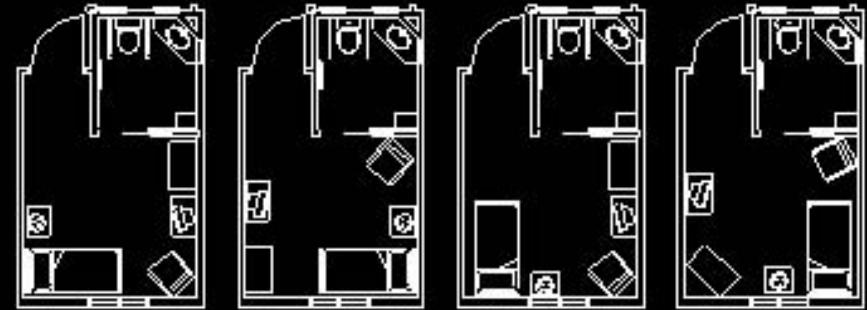
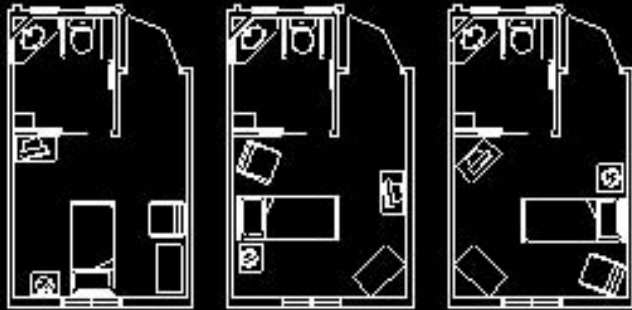
nor de-institutionalization of other elements in the setting.

**“HOME-LIKE” is more than a few knick-knacks in your bedroom**





# Resident Room Layout Options







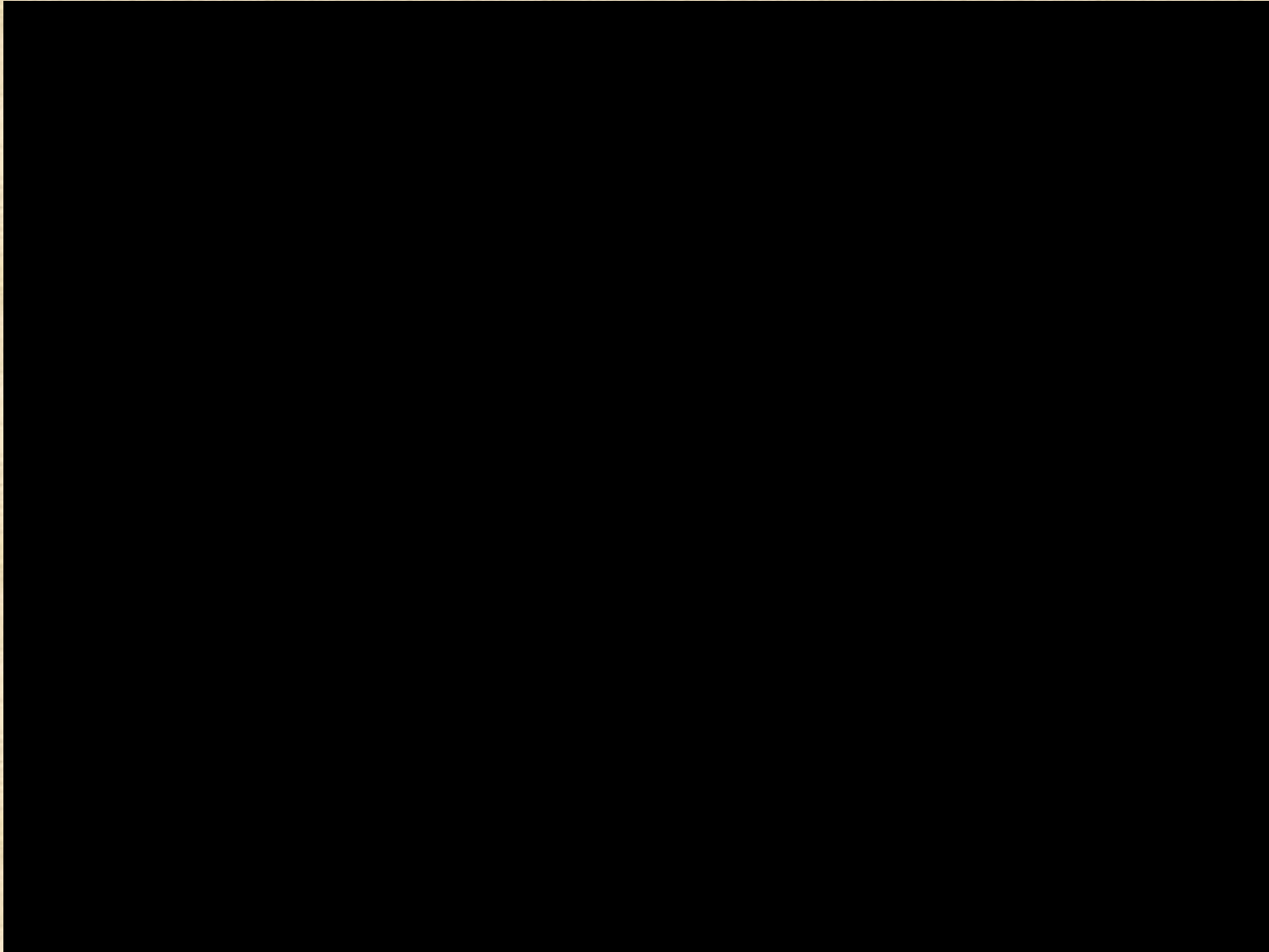
Meadows



Trillium  
Place



# Home as Design Typology

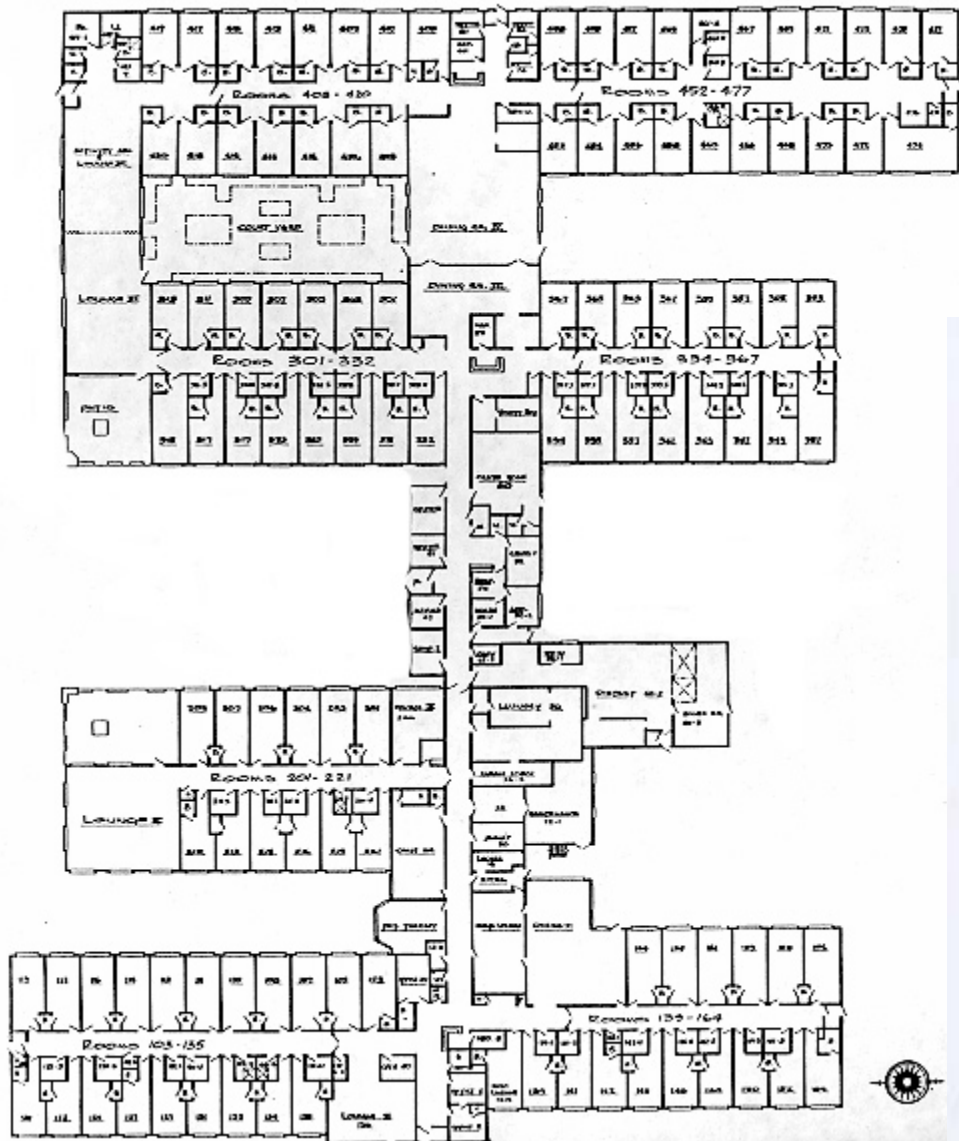




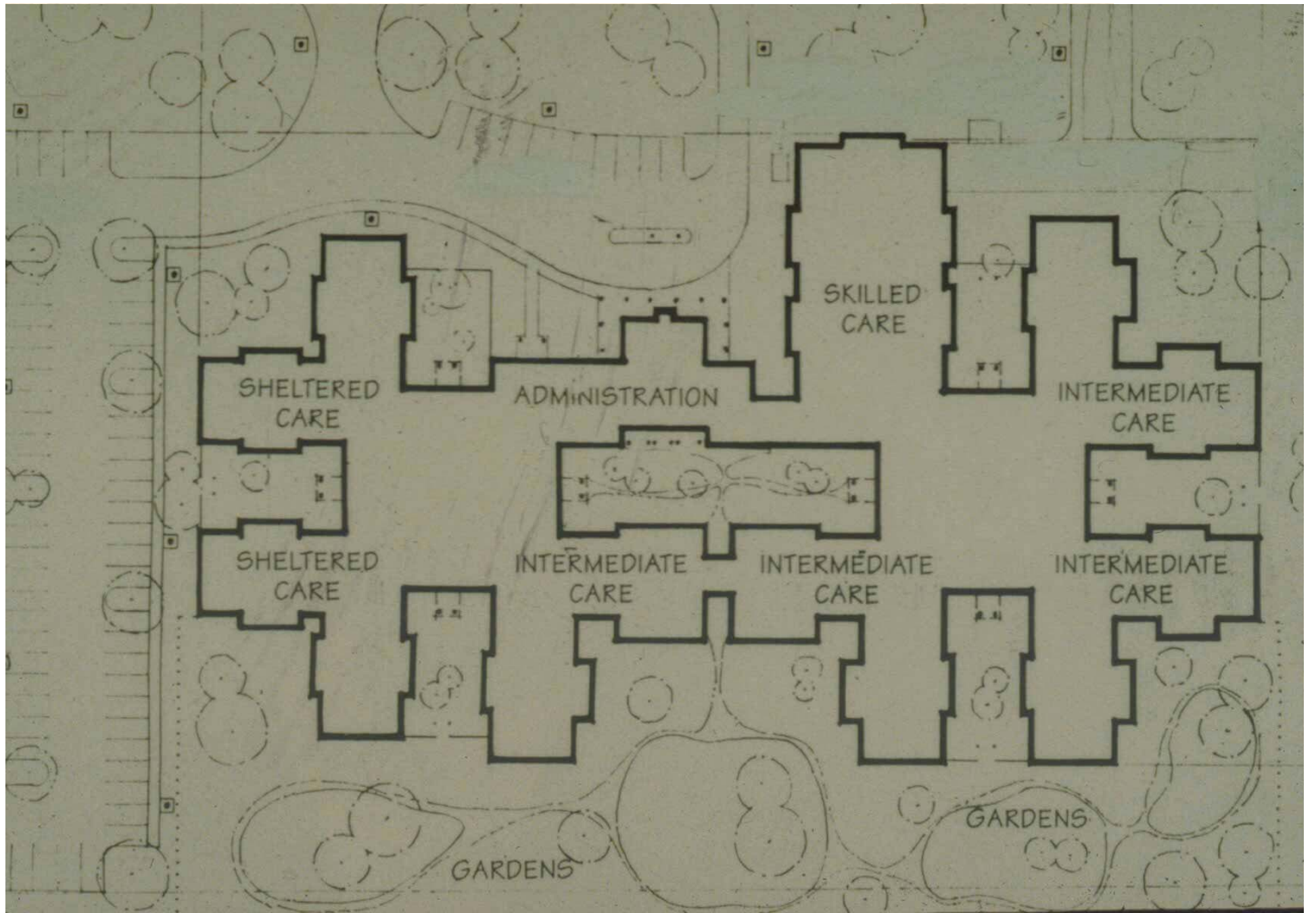
# #3: Build houses, not institutions

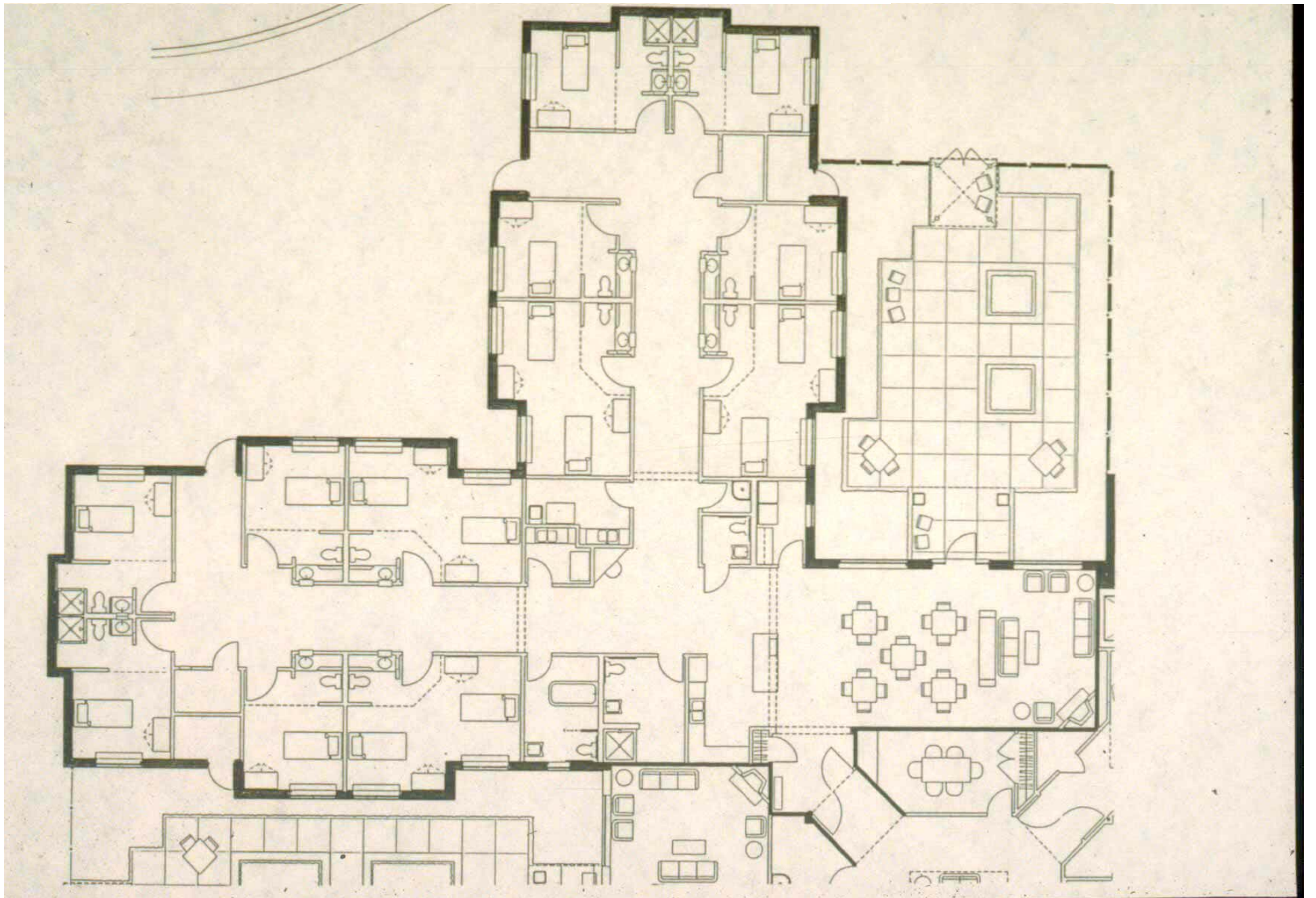








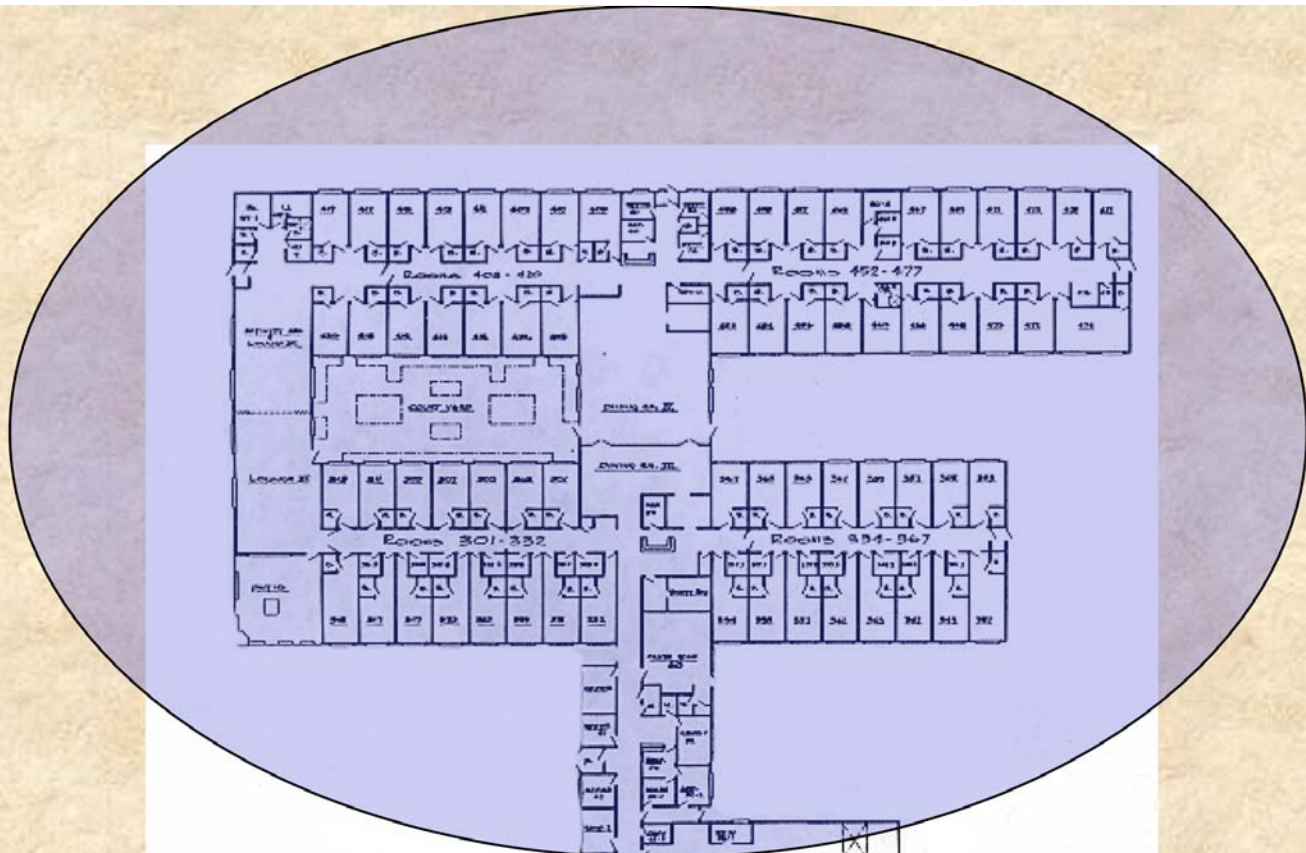
















# Other Recommendations



# Eliminate Institutional Icons



Not in Federal Regulations, but state regulations vary tremendously.

Affectionately referred to as the world's largest nursing home  
Wesley Home



Creekview at Evergreen



# Other Institutional Icons

- Overhead Paging
- Call bells/lights
- Monotony of furniture
- 2x4 fluorescent lights
- Shiny floors
- Staff uniforms
- Voice-voice communication
- Call lights in sconces
- Indirect lighting
- Carpeting
- Staff in street clothes

# Focus on *Care*, not Documentation





# Encourage Efficient Technologies



# Passive Monitoring

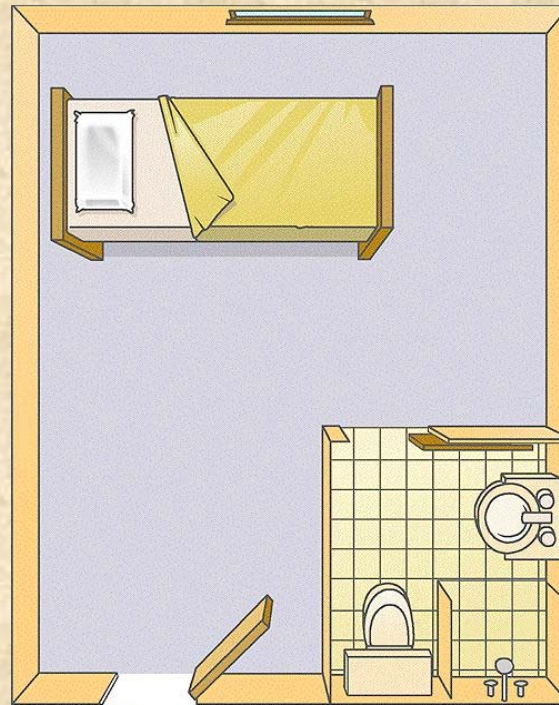
Incontinence sensor



Bed exit sensor



Bed sensor outlet



Motion sensors

Motion sensors



Staff cancel switch







# Make Self-Directed Care a Core Value

- Include in training for all staff
- Incorporate into job descriptions
- Base evaluations on supporting self-directed care



# Increase Basic Training Requirements

- It is a travesty that training requirements to be a nursing assistant may be as low as 40 hours, half of which is classroom and half is following someone on the floor.
- Manicurists are required to have 400 hours of training before they are certified.

# Training from the Top

Owners, Administrators, Board Members should be required to work 1 day every month or 2 as a caregiver. This is the only way to really know what is going on.



# Control, Control, Control

- Who you share a room with
- More options of food choice, style, location, companion
- Bringing personal belongings for the bedrooms and beyond
- Hiring of staff