

May 27, 2010

## Nurse Competencies for Nursing Home Culture Change

## **INTRODUCTION**

Pioneer Network

n 2008, the Hartford Institute for Geriatric Nursing, in collaboration with the Coalition of Geriatric Nursing Organizations and Pioneer Network. convened an interdisciplinary Expert Panel of leaders in culture change and in gerontological nursing to explore and make recommendations about the role of nurses with regard to nursing home culture change. An issue paper, Nurses Involvement in Nursing Home Culture Change: Overcoming Barriers, Advancing Opportunities (www.hartfordign.org/ policy/position papers briefs), provided several recommendations, one of which was to develop a set of competencies for licensed nurses in nursing homes to promote and facilitate person-directed care and culture change in their organizations. This recommendation recognizes the important role nurses play in an organization's nursing home culture change transformation and ensuring high quality care and life for residents.

A core group of nurses with expertise in nursing home culture change were charged to address this recommendation. The group reviewed existing competencies for nurses and other disciplines in long-term care and care of older adults. They consulted with nurse experts, actively engaged in the work of culture change and considered role models, to identify the competencies. Ten competencies were finalized after extensive input from nurses throughout the country via a survey that proposed 39 competencies. The 10 competencies are those deemed most relevant and critical for nurses to be successful in creating and sustaining person-directed care.

The 10 competencies are specific to nursing home culture change. There are existing geriatric nursing competencies that were developed and shared in 2000 by the Hartford Institute for Geriatric Nursing and the American Association of Colleges in Nursing (AACN). The 10 competencies build on this body of knowledge.

The competencies do not specify the role of the nurse or the level of education of the licensed nurse. Some competencies will be more applicable to nurses in administrative positions and registered nurses, while others are applicable to all levels of licensed nurses. The 10 competencies, in total, are necessary for the entire licensed nursing team. As such, a nursing team well grounded in these competencies, would be an invaluable part of the interdisciplinary team, recognizing that culture change is a team effort.

## NURSE COMPETENCIES FOR NURSING HOME CULTURE CHANGE

- 1. Models, teaches and utilizes effective communication skills such as active listening, giving meaningful feedback, communicating ideas clearly, addressing emotional behaviors, resolving conflict and understanding the role of diversity in communication
- 2. Creates systems and adapts daily routines and "person-directed" care practices to accommodate resident preferences
- 3. Views self as part of team, not always as the leader
- 4. Evaluates the degree to which person-directed care practices exist in the care team and identify and addresses barriers to person directed care
- 5. Views the care setting as the residents' home and works to create attributes of home
- 6. Creates a system to maintain consistency of caregivers for residents
- 7. Exhibits leadership characteristics/ abilities to promote person-directed care
- 8. Role models person-directed care
- 9. Problem solves complex medical/psychosocial situations related to resident choice and risk
- 10. Facilitates team members including residents and families, in shared problem-solving, decision-making, and planning

These competencies are useful in identifying specific skills needed by nurses working in care settings involved in culture change. It is a first step in creating measurement and other tools useful in educating and supporting nurses in this work.

Developed through a collaboration of Pioneer Network and Hartford Institute for Geriatric Nursing, 2010, www.PioneerNetwork.



Supported by the Commonwealth Fund, a national, private foundation based in New York City that

supports independent research on health care issues and makes grants to improve health care practice and policy. The views presented here are those of the authors and not necessarily those of the Commonwealth Fund, its directors, officers, or staff. These competencies are supported by the following organizations, part of the Coalition of Geriatric Nursing Organizations (CGNO):

- American Academy of Nursing (AAN), Expert Panel on Aging
- American Assisted Living Nurses Association (AALNA)
- American Association for Long Term Care Nursing (AALTCN)
- American Association of Nurse Assessment Coordinators (AANAC)
- Gerontological Advance Practice Nurses Association (GAPNA)
- Hartford Institute for Geriatric Nursing (HIGN)
- National Association of Directors of Nursing in Long Term Care Administration (NADONA)
- National Gerontological Nursing Association (NGNA)