

# Nothing is Traditional about Environments in a Traditional Nursing Home

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Creating Home in the Nursing Home

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# Session Plan

- Focus: Physical environments in typical nursing homes based on 10 years of research
- Findings from research
  - Quality of Life Study & other studies
- Introduction to NHRegsPlus Website
- Recommendations at 4 levels:
  - Federal regulators & policymakers
  - State regulators & policymakers
  - Builders & owners
  - Administrators & staff leaders

# QOL in Nursing Homes

Funded by CMS, 1998-2003

- 5 states – 8 NH/ state – 131 units –  
21 SCU – 1988 resident rooms & baths
- Environmental checklists focus on QOL domains (not dementia specific)
- 3 levels of assessments
  - Resident room & bath (112 items)
  - Nursing unit (140 items)
  - Facility wide (134 items)
- Captured specific objective environment of each individual & linked environment to QOL & functional data

# Definition of Physical Environment

Fixed, semi-fixed, & unfixed components of physical structure & furnishings, fixtures, decor, and equipment (excluding backstage).

# Quality of Life Domains

- Autonomy
- Dignity
- Privacy
- Meaningful activity
- Enjoyment
- Relationships
- Comfort
- Security
- Functional competence
- Spiritual well-being
- Individuality

# Sharing Space

## Bedroom

- 580 (29%) private
- 1152 (58%) 2 bed
- 178 (9%) 3 bed
- 78 (4%) 4-6 bed

## Bathroom

- 25% private
- 42% 2 people
- 5% 3 people
- 18% 4 people
- 10% 5-20 people
- 13% outside room traveled up to 82ft

# Storage

(Regulations require: accessible, individual, private closet space)

- 7% clothes rods accessible (36"-48") yet 65% used wheelchairs
- 37% lockable storage
- 41% counter space around bathroom sink
- 9 bathrooms had space 2'X2'X2'
- 14% of rooms incontinence products visible

# Sharing Space: One Counter and One Chair





# Barriers to Autonomy

(65 % wheelchair usage)

- Long undistinguishable corridors
- State req. distance to nursing station seldom achieved
- Limited automatic door openers
  - Main door: 19 yes, 21 no
  - Unit: 2 yes, 129 no
- Bathroom key needed or for visitors only



## Distance as a Barrier

Distance measured from farthest bedroom to:	Min	Max	Mean
Unit entrance .05 mile	58'	288'	135'
Dining/social area on unit .04	30'	230'	115'
Primary toilet .02 mile (2-20 residents shared bathroom)	03'	82'	10'
Bathing area .05 mile	20'	270'	107'
Facility dining room .07 mile	08'	348'	102'
Main front entrance .07 mile	14'	387'	110'

# Inadequate Light Levels (3053 Total Light Meter Readings)

	<u>Range</u>	<u>Mean</u>
Nurses' station	10 - 410 FC	91 FC
Head of bed	4-95 FC	37 FC
Bathroom sink	1-75 FC	25 FC
Primary toilet	1-48 FC	13 FC
Shower/tub room	4-152 FC	46 FC

# Corridor Clutter as a Barrier to Functional Competence

(Range 0-10 Items, M=3.5)

- 9% no clutter
- 3 units had all 10 items
- 58% medical equipment
- 48% laundry carts
- 48% housekeeping carts
- 47% other (cages, dishes, podiatrist, prosthesis)
- 41% clean linen
- 32% medicine carts
- 22% incontinence disposal
- 18% trash containers
- 15% weight scales



# Personalization

(7 item scale)

- 85% personal photos
- 39% door personalization
- 30% brought chair
- 29% individualized bedspread
- 18% lamps
- 18% own bureau
- 8% individualized drapes



# Resident's Space



# Mean Scores of Resident Items by Number of Beds

	Private (580)	.95*
Chair (s) in sleeping area	2 Bed (1152)	.78*
	3+ bed (256)	.31*
Resident controls TV	Private	.78*
	2 Bed	.55*
	3+ bed	.37*
Lockable storage in room	Private	.48*
	2 Bed	.34*
	3+ bed	.26*
Primary toilet	Private	.46*
	2 Bed	.23*
	3+ bed	.14*
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# Checklists on CMS Website

- [http://www.cms.hhs.gov/NursingHomeQualityInits/05\\_NHQIHighlights.asp#TopOfPage](http://www.cms.hhs.gov/NursingHomeQualityInits/05_NHQIHighlights.asp#TopOfPage)
- Click: Quality of Life Volume 2
- Appendices
  - Appendix G – Room & Bath Checklist
  - Appendix H – Nursing Unit Checklist
  - Appendix I – Facility Checklist

Published papers on MN website:

<http://www.hpm.umn.edu/ltresourcecenter/>



# Practical Strategies to Improve Nursing Home Environments for Better QOL

Funded by Retirement Research Foundation

- NH personnel get used to their environments: need to assess with fresh eyes
- Tendency to rely on convenient suppliers
- Practical solutions can help within ordinary maintenance budgets
- Materials included self-assessment protocol and manual for low-cost strategies

# NHRegsPlus Website

<http://www.hpm.umn.edu/nhregsPlus/>

Funded by Hulda B. & Maurice L. Rothschild Foundation

Searchable website of federal & state NH  
Regulations—regs updated as of August 2007

- Comparative tables and text by topics
- 4 categories existing facilities
  - Resident room & bath; nursing unit; facility wide; dining & lounge space
  - 17 topics
- 4 categories new construction
  - Application process; bedroom area; nursing unit; facility wide
  - 19 topics
- Analysis links regulations to resident autonomy and quality of life both positively and negatively

# Ten Examples of State Regulations

1. Body holding room required for dignified holding of body where it will not be exposed to the view of patients or visitors. Room may be used for other purposes when not holding a body. (CT)
2. Rags from patient bedding or clothing shall not be used in dietetic services for any purpose. (AR)
3. In resident bathrooms, all sinks shall have hot and cold running water (NM) & toilet paper in a suitable dispenser must be provided within reach of each toilet. (TX)
4. Alternative to public address system for non-emergency messages required in new construction. (WA)

## Ten Examples of State Regulations, cont'd

5. All unique design solutions shall be described with outcome measures. This shall be reviewed in cooperation with the center. (VA)
6. Provisions shall be made to keep clothes dry while resident is bathing. (PA)
7. Ceramic kiln must be installed in accordance with Uniform Mechanical Code. (MN)
8. If patient is allowed to scrape trays, there must be a physician's order. (AR)
9. Household straw brooms shall be used only at entrances and exits of building. (WY)
10. Deodorants can not be used to cover up odors. (AR)

# Recommendations: Federal

- Create standard for private rooms (unless by choice) in new construction
- Consider expanding minimum room sizes & specifying distances
- Take a parsimonious approach to promulgating new federal regulations on physical environment:
  - Clarify verbiage: unsightliness; cheerful space; satisfactory bed-stand; comfortable interior; adequate light levels and good condition linens
  - Consider approach that is geared to functional requirements of space
- Amend surveyor instructions to look into all spaces residents routinely use—e.g. tub/shower rooms

## Recommendations: State

- Collaborate to develop a set of model regulations directed towards underlying intent to promote innovation & flexibility, not to exceed Federal regulatory scope
- Develop convenient & transparent way to grant waivers
- Tie waivers to outcome based studies (POE) & share results
- Do not develop double sets of regs for ordinary vs. culture change nursing homes

# Recommendations: Builders & Owners of New Construction

- Move beyond obsolete classic design (nurses' stations, headboards, multi-purpose rooms) towards innovative function enhancing spaces
- Go beyond regulatory minimums (e.g., ceiling night light, storage, accessibility)
- Team with local researchers to study environments

# Recommendations: Administrators/Staff Leaders

- Look at facility with new eyes: do nursing home self-assessment
- Get rid of clutter—off-site storage
- Exemplary features not sufficient—need plan for broad utilization
- Consider buying furnishings, decorative items, and equipment from atypical vendors



Thank you for listening & please visit our web site:

<http://www.hpm.umn.edu/nhregsplus/>

and our departmental website:

<http://www.hpm.umn.edu/ltcresourcecenter/>

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