"Trompe l’oeil" is French for “trick of the eye.” The term is often applied to art that tricks the viewer into seeing something that either isn’t actually there or can be perceived as different things depending on how you look at it.

For example: young girl or old woman?

(Yes, this is the culture change blog. I’m getting there...stick with me.)

AND...here’s my point. There are lots of silly things going on in long-term care that add up to a serious lack of home. They’re there, we just don’t see them because we’re not really looking. But, if these things were going on in our own home I bet we’d notice. Check out this excerpt from In Pursuit of the Sunbeam (get your copy at [http://www.actionpact.com/book-ipots.html](http://www.actionpact.com/book-ipots.html)) by LaVrene Norton and Steve Shields:

Try on a pair of catalyst glasses that allow you to see the dust, the problems. Let yourself see the degree to which your facility honors home, normalcy, relationships, privacy and choice. Walk through your facility with new eyes and play a game – “Things That Are Stupid” or “Things That Are Not Home” or “Things That Would Make Me Crazy If I Lived Here.” Do it not because you can change these things immediately, but because you need to see. We need to experience the irritant as the first step to changing it.

Do you see these things?
• No salt and pepper shakers or sugar packets on the tables.
• Lists that dictate when people take baths; elders pushed in wheelchairs down the public hallway to the bathing room, naked under their robes, feeling vulnerable and cold; the dreaded shower chair experience.

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New Eyes, continued

• Schedules for awakening residents, starting at 5:30 a.m. when you dress them and set them in front of the nurses’ station to snooze for two hours until breakfast.
• Residents put to bed at 6:30 p.m.
• Waking residents up every two hours to turn them.
• The facility turned into a prison for fear of elopement.
• Alarms placed on the bodies of confused residents that go off every time they get up. What must that feel like for the elder? Does she become increasingly anxious about the alarms yet unable to escape them to somewhere that feels safe?
• No real “alone time” for residents, especially for those paired with a stranger for a roommate after having lived for decades alone or with a spouse. Nowhere for the resident to go for quiet and solitude.

Ask everyone to make a list of his or her discoveries throughout a couple of work days. Even ask elders to make lists. Then get together and discuss your findings. Once you’ve seen these things for what they really are, it will be hard not to move forward with change.

Just a reminder: all blogs and hand outs are available in a downloadable, pretty format here <http://www.actionpact.com/free_resources.html>. Print them out and make copies for participants in your training sessions or meetings. This blog is for YOU to keep up a learning environment in your organization.