The Awakening of a Leader

By Tiffany Dombek, NA/R

Close your eyes and let me show you my typical day at Perham Memorial Home as it was before we renovated into households. I arrive to work at 6a.m. I punch in and then with four other co-workers, I sit around a table and listen to the previous night’s report. Now it is 6:20a.m. My partner and I get up and shuffle out to the hallway where we go to the same, shared residents’ room to wake them up for breakfast like we do every single day. After we are done we move to the next two, and so on until we have everyone up. We don’t stop until we are done. It’s a constant rush for me, my partner and the residents. It’s clearly not a lot of fun; it’s just my job. After breakfast I rush to lay the residents down and go on break. By 10:30a.m. I am rushing to get everyone up for lunch and rushing to put them back in bed for the afternoon. I leave work with nothing. I just did my job and left. It was pretty much the same thing everyday.

As the organization began changing everything, I wasn’t sure what I was getting myself into. I was really negative about the whole idea of culture change. It will never work! How do they think they can have this perfect little world inside a nursing home?

Believe it or not, WE DID and it is FUN!! I now go to work every day wondering, "What can we do today? What is something the residents would like? What did they do last night?” This is something I would have never thought before. I get to work now and it’s quiet and very relaxed. We keep the lights down in the hall and the staff is quiet. We do not wake the residents until they put their call light on or the time they have requested to be woken up. They get up, eat, bathe, sleep and do activities as they wish. Everything is done on their schedule, NOT the staff’s schedule. Our residents are first; no questions asked. This is now truly their home and we are the guests that help them as they need. We not only take care of them, we cook, clean, and offer a friendship to them (something that was hard to do before with such a tight schedule).

I was one of the lucky ones (as I call myself now) to work on the pilot

See “Awakening” page 4

Leading the Way in Culture Change

Strong leadership is key to change in long-term care. “The leader’s role in culture change is to open the conversation, to listen respectfully to resistance, and to bust through obstacles locked in place by limited knowledge, lack of resources and fear of change,” says LaVrene Norton, who, along with Steve Shields from Meadowlark Hills in Manhattan, KS, has written a book on this very topic. As With Sunbeam, which is due out the end of summer, explores ways to grow leadership not only in formal leaders, but in informal leaders and residents as well. As it says in the book, “Leadership is about character, not position.” When we think of a leader, we think of someone in an upper level position or management. Certainly management needs the capability of leading others daily, but this must include the skill of recognizing the natural
“Leadership is about character, not position.” When we think of a leader, we think of someone in an upper level position or management. Certainly management needs the capability of leading others daily, but this must include the skill of recognizing the natural abilities in those around them. “Leadership is not about demonstrating power, but about teaching others to realize their own power.” A leader is simply someone who influences others to accomplish a goal. If the goal is to successfully transform your facility into a home, each person’s input must be taken into consideration. After all, the people who do not have official leadership positions are often the people dealing with day-to-day problems with in the organization, and may have insights towards finding a solution that management might miss. Using the individual skills of each member of staff is integral to the success of your culture change journey. And, of course, resident leadership is the ultimate goal. Below you will find a story of resident leadership excerpted from the book:

Ethel had come to the nursing home “to die.” She had given away all her possessions not expecting to be around much longer to need them. When she moved into Perham Memorial Hospital and Home they were living the Household Model in the original facility and soon after moved into a new building. Ethel was thrilled to have her own private room and bath. After six months her health had improved quite a bit, as did her attitude. One day, a nurse aid was in Ethel’s room and saw a videocassette sitting on her table. The aide asked about the
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Sheer Joy Found in the Moment

By LaVrene Norton

Pleasure and joy are so deeply personalized – whether we’re 2 or 92 – and the magic that a loving person can bring to another is what person-centered care is all about.

I was enthralled with recent stories in a learning circle at the Elizabeth Seton Pediatric Center, a remarkable place in downtown Manhattan. Originally founded by the New York Foundling, it is home for 136 children from birth to 21. Sometimes children live there short term for rehab and often they make it their home away from home for years. The children have a variety of medical diagnoses, all requiring extensive and complex care. The center, with the enthusiasm of staff, attending physicians, children and their loving families have been planning a move toward a neighborhood model, their first step on their way to a much more dramatic future move into new households.

One great day in the kitchen, Jason, an early grade-schooler discovered his connection with the universe - always a deep pleasure for a child and the adults in his life. Participating in a baking project, and with the help of those who love him, he was able to place his hand on the blender filled with all the ingredients for a delicious cake. With great effort he pushed the button. As the blender jumped into action, joy clearly exploded within Jason. His eyes were ecstatic. He realized that he had done it. It was his hand that brought about the mixing of these raw ingredients – that transformed the flour, egg, shortening and chocolate into this new wondrous thing – cake – rich and delicious and ready for the oven.

Jason’s joy was paralleled in the face and voice of the woman who told his story in our circle that day. It reminded us that these moments are there for all of us to enjoy – with our own children at home and with the people who live where we work – whether they are children or elders. Creating a climate where life can be filled with the tiny moments of pleasure that come with discovery, relationships and achievement – that is what our work is really about and that is what life is about as well.
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Free Resources, Continued

**Awakening, Continued from Page 1**

Household Model and the other two units at the same time. I worked four days every two weeks on the "other side" and the rest of the time on the pilot household. Like I said before, I really thought they were insane. I knew that other places had accomplished this change but they were larger facilities. I thought there was no way this would ever work. Little did I know that within a few days of working in the household, I would love it. It got to the point where I dreaded coming to work on the days I was assigned to the old units. And when I worked in the household, I would go home thinking of things to do the next day. What a great change this "crazy idea" was; the residents seemed so much happier and the staff was relaxed and having fun at their jobs, still managing to get everything done.

I'm not saying culture change is the easy way out - not at all! It is very hard if you don't get things organized and if you don't have great communication between staff. I have never seen such good communication and teamwork at PMHH. We did have our tough times but we all worked them out right away. If we have a problem, we talk it out. It takes a lot of work but in the end, it is worth it. Now I don't just go to work, I go to spend time with new friends.

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**DVD continued**

the special challenge of working with facilities at various stages of culture change. The DVD was scripted, filmed and edited by Action Pact.

All proceeds from sales go to the Pioneer Network to support their on-going efforts in furthering culture change in long term care.

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**April, 2006**

**What would you change?**

We asked staff members that are not in management roles what they think needs to change in their organizations. Here's what they said:

**Ashley (Dietary from Pennsylvania)** - "get out of the medical and sterilized atmosphere, and out of that mind set; the technical aspect where it's strict and formal." Ashley recalls how tray lines would operate. The tray came down the line with a diet card and she only looked at the diet to place food on the tray. It was a diet card and not a person with whom she was interacting. Since participating in Circles, Ashley now looks at the diet card and remembers talking to the individual and can visualize who they are and can personalize the tray. "Mr. Williams likes chocolate milk."

**Linda (Housekeeping from Missouri)** - "Better communications between facilities (they have 2) - throughout the whole facility; nursing staff, housekeeping and residents also."

**Cathy (administrator from Missouri)** - declined to allow communication with non-managerial staff. "I don't want them exposed to something that may not happen. It can set up expectations." She appeared to feel that asking her employees about change would imply that administration would be doing what the staff suggested. Don't ask, don't suggest?

**Wendy (Medical Records from Minnesota)** - "The first thing is more resident independence and decision making. Give them the chance to make their own choices about getting and when to eat. That's the biggest thing right now."

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The workbook includes exercises and team activities specific to each stage.

The work was funded by the Commonwealth Fund, and commissioned by AHQS to support the work of QIOs around the country who have