The staff at Provena St. Joseph Center in Freeport, IL have been making great strides along their culture change journey. However, the small moments staff share with residents have gone an amazingly long way to give their efforts momentum. Debbie Schaney, an LPN in the Ocean View Drive neighborhood, said there have been some great first steps for building relationships in the neighborhood.

“We’re asking, ‘What are they missing from home?’”

Debbie said staff is encouraging residents to come out of their rooms and get to know each other better. Now, residents look out and take care of each other in addition to building community with simple activities like just playing cards.

Permanent staffing has created continuity of care. “I want to know the residents so well that I can just look at them and know if something is wrong,” Debbie said. Staff is encouraged to talk with and get to know the residents more. When Debbie went into a resident’s room to help her eat the resident said, “It’s so nice that you can sit with me.” Debbie got a bit choked up as she recalled the story and the importance and meaning of human contact. Something so simple, yet often overlooked in the name of efficiency.

Of course chatting a bit during med-pass or taking a few minutes to talk about a shared interest with a resident makes the passing time more pleasant and shows the residents that the staff really do care for them, but Debbie added that there is another positive side-effect. “Residents find more confidence and trust in the staff [as they get to know them through permanent assignment]. They know we will always try to meet their needs.”

Read more about Provena St. Joseph’s culture change efforts here: <http://www.provena.org/body.cfm?id=269&oTopID=20>

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**Upcoming February Workshop!**

**Choreography of Culture Change**

Oconomowoc, WI

The February session of the “Choreography of Culture Change” is fast approaching. Eight folks have already signed up — We only accept 16. And we not only work hard, learn a great deal — but we have a fantastic time! The Choreography is a weeklong intensive grounding in culture change principles and practices which has been critically acclaimed as a comprehensive, and practically valuable experience.

Whether you are an owner, board member, CEO, Nursing Home Administrator, Director of Nurses, Educator, or an independent consultant, you will find much to engage you in this paradigm-shifting week of learning and fellowship with culture change leaders.

See “Workshop” page 2
**Workshop, continued**

The seven days of education are filled with learning, practice, discussion, critique and personal growth. The participants come away with knowledge about the stages of culture change, self and organizational assessment, adult learning theory, group dynamics, facilitation skills, leadership models, teaching leadership and much more.

Spaces fill quickly, so reserve your spot today. See sidebar page one to register.

The fee of $2600 includes tuition, materials, videotaping, feedback, coaching and recommendations on action steps, as well as lunch each day and dinner on two evenings. Breakfast is provided by the bed and breakfast.

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**Calling All Households**

Everyone can distinguish between households and neighborhoods in our personal lives and communities but are we all as clear on the meanings in our long term care settings?

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SHARE your inspiring stories with other folks and organizations on the culture change path. Watch for our new web feature “Household Profiles.” If you are part of an organization (SNF or Assisted Living) or know of one which is doing the difficult work of creating households in long term care, please send the name of the organization and contact information to our web writer, Steph@actionpact.com.

Everyone can distinguish between households and neighborhoods in our personal lives and communities but are we all as clear on the meanings in our long term care settings? Let’s take a minute to clarify the differences between Households and Neighborhoods in culture changing homes. There are both physical and organizational differences to consider.

Households are smaller than Neighborhoods and typically consist of 10-18 residents. Physically, the household is always centered around a living room, dining room and a kitchen. Neighborhoods, on the other hand, can be made up of as many as 30 or more residents, and the physical space may still include a nurses’ station.

Organizationally, there are significant differences as well. Within the Neighborhood Model, everyone continues to report through a department head, but in Households, everyone reports through the household only. This is successfully achieved by embedding professionals who used to be department directors in the household to serve as mentors to people within their profession.

Want more information on organizational models in long term care? Check out the Grant-Norton paper on the stage model of culture change addressing the differences between different organizational models in detail. It’s available for download and distribution on our website near the bottom of this page: [http://culturechangenow.com/free_resources.html](http://culturechangenow.com/free_resources.html)
Free resources and training materials are just a click away!

Did you know the Action Pact website offers free downloads of materials to get your team moving and learning? Instructions for the learning circle, help finding non-caregivers' roles in culture change, techniques for embracing change, a new spin on meetings and many more tools to help spread culture change in your facility. These mini training, discussion and self-improvement aids, taken from our Ask Pact column and Culture Change in Practice blog, can be used by beginners of the movement as well as those already operating in the Household Model. New pieces are added often.

You need not register and there are no strings attached so visit the free downloads link <http://www.actionpact.com/free_resources.html> and share the print outs with your team today!

Navigating Regulations

There are many reasons to resist change. But while we may be able to overcome fears, break habits and embrace new behaviors, state and federal regulations still often leave us scratching our heads. Part of the struggle with regulations is not having good or full information about them and how they work in light of culture change practices.

With funding from the Hulda B. and Maurice L. Rothschild Foundation, researchers at the University of Minnesota School of Public Health have undertaken the immense job of compiling all state and federal regulations on one easy-to-use website – NH Regulations Plus (<http://www.hsr.umn.edu/NHRegsPlus/>). As the site itself says, “This searchable website will serve as a one-stop location to examine and compare the content of state regulations related to nursing homes, the processes of regulation and exceptions to regulations within a state, recent state changes, innovative nursing-home designs and programs that were accomplished within existing regulations, and innovative state regulatory initiative.”

Check out the site and look for this and other regulations stories on our website <http://www.culturechangenow.com/stories.html>.


“Regulatory Compliance in Culture Change” has been used by Lorna Gartzke of Shorehaven in Oconomowoc, WI as a training guide to introduce CNAs to culture change regulatory issues, and “Regulatory Support” was written in 2006 by our friend, well-known and well-loved culture change leader Carmen Bowman.

Getting in the Right Direction Without “Directing”

As organizations go through culture change, it is often hard for the DON to, well, stop telling people what to do. After all, the position is director of nursing. They aren’t being “bossy,” it’s just their job. So, it can be hard to take a step back to get other people’s views or to let people work things out on their own.

Judy Bianca, the DON at Elizabeth Seton Pediatric Center in New York, NY,
has found benefit in taking that step back. She has read a lot to help give up “directing” and finds it is a self-rewarding process. “You can learn to behave differently. You get in the habit of seriously asking, ‘What is the worst that can happen?’” she says of trying new or different ways of doing things. If the ‘worst’ is not acceptable, then establishing parameters can eliminate the worst as an option.

Judy and all the senior staff at Seton have taken on Mentor roles. Mentors guide projects, get resources and encourage creative ideas and a sense of team in addition to mentoring folks in their area of expertise.

When it comes to performance, Judy says it is not “Who did the best job?”, but “Who is giving the children what they need?”

“When there is struggle or resistance [to doing something] I ask, ‘Do you think the children need it?’ and work [the steps] backwards from there to get at, ‘Then you need to do this.’”

This sort of high-involvement in which staff are engaged in problem-solving and decision-making produces better outcomes. People are more committed to a process in which they have a say. This in turn, Judy finds, builds her confidence in the staff.

Learn more about Elizabeth Seton Pediatric Center at <http://www.setonpediatric.org/> and look for an article on their organizational progress in the Neighborhood Model in the upcoming issue of Culture Change Now Vol.4 magazine.