

# Welcome Home Project

# Table of Contents

## **Charter Committee .....**

Overview of concept and what will be accomplished.....

Dialogue for in house direct teaching.....

Forms can us to build and maintain home.....

## **Introduction to Welcome Home Project...**

Overview of concept and what will be accomplished.....

Dialogue for in house direct teaching.....

Forms can us to build and maintain home.....

## **Chapter One.....**

Overview of concept and what will be accomplished.....

Dialogue for in house direct teaching.....

Forms can us to build and maintain home.....

**Chapter Two.....**

Overview of concept and what will be accomplished.....

Dialogue for in house direct teaching.....

Forms can us to build and maintain home.....

**Chapter Three.....**

Overview of concept and what will be accomplished .....

Dialogue for in house direct teaching.....

Forms can us to build and maintain home.....

**Chapter Four.....**

Overview of concept and what will be accomplished.....

Dialogue for in house direct teaching.....

Forms can us to build and maintain home.....

# **Introduction**

## **Welcome Home Project...**

**Overview of concept and what will be accomplished.....**

**Dialogue for in house direct teaching.....**

**Forms can us to build and maintain home.....**



# Introduction

## Vision For "HOME"

### Begins with Individuals

### & beginning a Steering/Charter Committee

I want to congratulate you on this first step of building Home in your organization. I want you to realize how very special you are and that you are pioneering Welcome Home Project throughout the nation by beginning this in your own facility. You, your Steering/Charter committee , Owners and Caregivers are hero's and will find this to be a great legacy to tell others of as you success in building Home for all your very special residents who make this home and those caregivers who work on the hom. This manual you are about to embark upon will be different from all other manuals and trainings you've ever encountered before because we are all caregivers and we have worked hard, tirelessly to do our best for our residents according to standards of care and changing regulations. We both understand that it can be stressful and challenging because of so many factors . Maybe sometimes you feel that the approaches are more like a "Band-Aids" it helps but it is not what is needed for total healing. This is how I see the Welcome Home Project ; it is a healing balm and it will bring more life to your homes, work and care that will be meaningful because everyone will have the understanding of the vision; the vision they can understand of Home . That vision that will be the umbrella to everything that is done on the home, every job, every chore, every relationship.

Currently, there are more than 18,000 nursing homes in the United States that provide a total of 1.9 million beds to persons needing full-time care. More than 1.6 million people reside in nursing homes each day and their average length of stay is approximately ten months.<sup>1</sup> We are encountering the "graying of America" a time in which people are aging and living much longer. In recent years, medical professionals have added over thirty years to average life expectancy. At birth, life expectancy is now above 80 and for those individuals that are currently elderly and have lived to at least age 65, they have a good chance of survival to ninety.<sup>2</sup> These aging individuals have

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1 Fitzpatrick, J. & Fitzpatrick, E. (2010). A better way of dying: how to make the best choices at the end of life. P. 190. New York, New York.

2 Fitzpatrick, J. & Fitzpatrick, E. (2010). A better way of dying: how to make the best choices at the end of life. P. 191. New York, New York.

lots of options: home health care, nursing home care, residing in assisted living, or participating Advantage- it's hard for them and their families to know where to begin, but often times the current stigma of nursing homes prevents many from considering facilities like yours.

It is professionals like you- working in these facilities, under these pressures, and with the societal stigmas of how nursing homes are viewed- that are the real heroes. I remember talking to veterans from 1971 through 2001 and how they felt unappreciated until the very unfortunate 9/11 tragedy. Until 9/11, our country failed to recognize our military heroes and veterans. Unless it was a national holiday, these individuals often went unrecognized and underappreciated. Those of you working as care-givers in long-term care are in this very boat. You are heroes in so many people's lives, yet you go unrecognized day in and day out. Never forget how valuable you are and how much of a difference you are making! Making the commitments that you do makes you so special in the lives of many.

It is that commitment, your contributions, and your concern that we want to tap into with the following material. We want to use heroes like you to call for a vision across our state of nation. By reading this manual, utilizing the concepts, and engaging in an intended change, you are becoming a pioneer in transforming institutional care to what we call "the Home". Think about the well-known slogan "Home Sweet Home"-you commonly see it on front doors and entry ways to residences everywhere. Sometimes you see it on billboards as you drive into a small community wanting to welcome their returning residents as well as visitors. You look forward to returning to your home after a long day at work or even after a relaxing and enjoyable vacation. Why is home so valuable to us? It's because home provides familiarity, comfort, security, and family. All those factors that have likely contributed to the person you are, the life you lead, and the memories you will retain. In a perfect world, a home is a positive, valuable, and treasured safe-haven from the day to day lives we experience. For many aging adults who begin to experience the loss of family and spouses, physical and cognitive health, and the ability to care for themselves independently, it can be painful to leave their residence but the benefits of socialization, safety, nutrition and home can match the needs they have and can outweigh the move by the many benefits; such as, the opportunities of meaningful relationships on the home and opportunities of life enrichment from all the dining experiences, social gatherings and celebrations on the home.

It is for these reasons that we are introducing the Welcome Home Project which has been inspired by the culture change movement throughout the nation. Research has shown that elderly individuals who are able to choose their routines like in their homes thrive and recuperate far faster than those placed in traditional [institutional] nursing homes. They are able to remain in familiar surroundings and can continue their usual activities in most cases. Most importantly, they retain their ability to control their own schedules and activities, making very important choices, albeit, small choices, on their very own.<sup>3</sup> As you will see throughout this manual, this is exactly the vision we have for all assisted living and long term care nursing centers!

Caregivers on the home need to remember that their residents are someone's mother, father, grandparents, sibling or spouse. If you haven't had a personal experience with a parent, grandparent, sibling, or other family member, there is probably someone who has taught you as a child, who has touched or influenced you personally- a teacher, a neighbor, a pastor- that have gone to reside in a long-term care facility. It is important to make these connections because we must remember that those we take care of are so special. They have made some contribution, raised someone, and loved someone. They've offered much and made many sacrifices, just as you have, to make our world a better place. They are extremely special people and that alone is our motivation! They are someone's family...but they are also our family. Simply put, they are human beings and it is our responsibility to love, to care for, and to cherish individuals who have made these kinds of impacts.

So, what will it take to create and implement such a vision Home in long term care? Simply put an all-over cultural change; specifically a vision that everyone understands and guides their role in the organization on the home. Change certainly isn't easy! Just ask those individuals you are serving on a daily basis. The older we get, typically the more difficult it is to change. Despite the challenge and what seems like an overwhelming and daunting task, we must first and foremost get excited for hope again! Those individuals who are making efforts to share this model across the state even admit that they, too, have been without hope many times, only dreading what was to come next. They enthusiastically admit that they, and so many others, are institutionalized and they want to challenge all to make a permanent difference, as they are attempting and being successful at doing so. They wholeheartedly believe that all of us have got to make a change and can guarantee a positive outcome if each of us will. They urge those of you embarking on the journey "home" to join them. Let's show our

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<sup>3</sup> Fitzpatrick, J. & Fitzpatrick, E. (2010). A better way of dying: how to make the best choices at the end of life. P. 193. New York, New York

passion, our commitment, our willingness to make a difference in the day to day existence of those whose lives are culminating.

Congratulations for the passion and dedication you have to bring Home to your facility through the organizational guide called Welcome Home Project. So how can this vision be achieved? At first, it may seem unattainable, but imagine the monumental effects of such a change. The paradigm of long-term care must be reconsidered. Creativity and thoughtful consideration should be utilized when changing the nature of your work. In order to improve the quality of service, the environment in which the residents live must be restructured, staff members must be empowered to improve services by providing them with more ideas, resources and training them in a different manner. The concept requires staff to overcome the professional and territorial boundaries that are so often engrained in them. Flexible management is necessary in order to carry out these goals and team members must be convinced to commit to the home model and developing family relationships with those with whom they work and serve. All this leads to a cultural shift and, as a result, more satisfied consumers, whose quality of life is what we all wish it to be. Isn't that worth your efforts? Isn't that why you should consider implementing such a model in your facility, in your homes? We are about to embark on a journey....a journey back home!

This guide will assist you in taking what staffing, facility layout, policies that are working everyone at the same time build and maintain home you are during your daily routines, weekly and monthly meetings & in-service along with a few processes such as move in and new employee orientation.

I do not want to add any more work to the providers because there is already so many more regulations that require so much extra work; however, I believe when you implement these ways to organize and maintain home that you will find the tasks to ensure the compliance for the residents on the home such as to choice, the lifestyle assessment and self-determination the services you provide will indeed bring the resident, staff and families together making home and us enjoy meaningful relationships together.

I believe every staff will understand that when they get to come to work, to do the specific job – chores on the homes whether it is in nursing, dietary, life enrichment, accounting, administration, laundry, housekeeping or a form of clerical; all of which make our house a home yet provide the required clinical standards of care and we continue to fulfill all the regulatory and facility policies..... yet the vision and motivation is being a homemaker. Making this big building/house into a home driven

by each resident who live on the home. One such place practicing this transformational cultural change is in Enid, Oklahoma at the Homes of Greenbrier. In 2004, a Steering Committee was formed to conduct research on the national Household Model. In 2007, the Steering Committee along with a Neighborhood Council composed of members of their staff began implementing a program entitled "Welcome Home Project". The results have been astounding, the following chapters will describe for the reader characteristics of and the process of implementing such an effective practice and how to create a comfortable home environment. Steps will be described in detail, from selecting a steering committee to performing research of home needs, hiring and training qualified staff to participate on the neighborhood council and resource teams, to engaging residents to enjoy their quality of life by having control, choices, and autonomy over their environment and the services they receive.

In the book, "In Pursuit of the Sunbeam" the author clearly communicates the theme of home. . It states,

"Our philosophy is home. It's simple really...all people have the right to home; that blend of shelter, relationships, expressions, meaning, and a sense of self that we have enjoyed our entire lives. Home happens when the place, the person, the relationships, and the pleasures of daily living come together in a unique protective identity that we recognize."<sup>4</sup>

The overarching goal of Welcome Home Project is to create an organizational plan to maintain home through the organizations management structure, policies for quality care, physical environment and daily activities that mimic a home-like environment, routine, and non-restrictive setting. The Welcome Home Project to organize the work on the homes to avoid the appearance of being a "medical institution" and promote comforts of home. In contrast, the Homes of Greenbrier attempt to create a real home for the resident; one that includes privacy, interpersonal warmth, stimulating opportunities for personal development, as well as encouragement to contribute to the development of others, and finally a strong commitment between residents and staff members. These objectives are met in various and creative ways that enrich their lives from the very first day of arrival to the facility-when they engage in a personal move-in process rather than "admission to the facility"-and throughout their stay at the Homes of Greenbrier.

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<sup>4</sup> Copyright ©2006 Action Pact, Inc. LaVrene Norton, MSW. (2006) Living and Working in Harmony Training Guide for Self-led Teams. P. 3 A component on Household Matters, A Good Life 'Round the Clock.

Residents are greeted by several dedicated staff members, whose traditional, institutional titles have been altered and now include titles like mentor, nurse leader, life-enrichment guide and environmental mentor, all in the resident's selected home. Residents decorate their rooms to their liking and make their space personal and familiar to them. They have the freedom to schedule their own activities- whether it's reading a book in the community living area, taking a nap in their room, playing board games with other residents, or building and painting a model car. In addition, maintaining that home-like foundation includes participating in weekly Learning Circles with staff and other residents, giving them the opportunity to introduce themselves to new members, challenging them to share input on group decisions, and discussing ideas about daily activities and other life enrichment opportunities. Aside from the keyword "home", life-enrichment is another important concept when implementing this cultural change. Life enrichment refers to staff members always asking the residents what it is that they would like to do. The resident, "the household member", always has a part in the planning of their stay. As we honor and respect one another, it becomes clear that no matter our age that we all have a need for love, dignity, and security and the family at Greenbrier has the same needs.

Residents also utilize the Learning Circle to plan the week's small gatherings and plan celebrations such as a resident's birthday party or a baby shower for a member of the staff. Learning Circles entail having residents and staff gather in a circle for the purpose of planning an activity or for the pleasure of simply socializing. The staff at Greenbrier report that the Learning Circles are a key concept and very important in the national Home model. They've stated that it is "absolutely revolutionary in creating home in current long-term care settings." Steve Shields and Lavern Norton write in "Household Matters" more about the concept of learning circles. The Steering Committee at Greenbrier used this book and workbook as homework during their research and altered some of the methods to meet their needs. The resource is highly recommended for those that will pursue this journey. *To obtain a Household Kit of the renowned National Household Model to structure your very own model, you can contact Meadowlark Hills at the following phone number (785)537-4610 or by writing to 2121 Meadowlark Road, Manhattan, KS 66502.*

Some of the other aspects of living in the Homes of Greenbrier that are especially enjoyed by its residents and discussed further in this manual are the Rose Garden Café, a refreshing innovative idea in contrast to the institutional cafeteria in many nursing facilities. At the Rose Garden Café, residents can choose the times that they wish to eat their meals and upon entering the café are served by waiters and

waitresses and are given a wide selection of choices from a restaurant style menu. The following chapters will guide you on your journey “home” and give you ways to implement these ideas in your own facilities in an effort to truly make it “Home Sweet Home” for those who live and work on the home.

**Now that you finished the First Step of reading this opening. You are ready for the Second Step of watching Charter Film and reviewing the Charter session dialogue.**

## **Charter Session Dialog**

*I want to congratulate you for coming to a point that you want to create “Welcome Home” project in your facility. You are going to be so rewarded by the quality of life and service. You’re going to be rewarded by less turnover. You’re going to be rewarded with seeing home and family blossom before your very eyes. I’m so proud of you. I do want to tell you that I want to dedicate this program to my parents, Herman and Gail Hackett, who in 1971 were lead to begin this journey, for them it was a ministry and all of the buildings, everything you see, my dad actually built and he and I were partners and I would develop the programming, my mother designed and decorated, her artwork fills the walls. We took care of both of our grandparents here, my parents have both been here and that is what you’re doing, you’re going to be providing for people like my parents, my family, your family and it’s going to be wonderful so congratulations.*

*I’m not sure if you have heard about this through NAHCA, if they are bringing this to you, but I would suggest that you get the administrator, the DON, the department directors together and all of you watch the **video session 1 part 1**. This is going to cast a vision for you of what it means to become a home, a family and it is an organizational guide that is going to take the work, the meetings, the procedures that you already have and just organize them in a fashion that home prevails and family prevails and its driven by the residents and I believe that you will find most people would love to do this, they just need to know how. Once you do this, you’re going to learn a concept called the learning circle and you’re going to come back together and the first thing you are going to do is decide:*

**(See Action Point on Chart Session To Do) *Katy: let me add page # when done***

*First, who is going to be on your steering committee? Once you do that, I have a couple of worksheets and some posters that will give you a visual aide to start making a list. The first thing you need to do is get a map of your facility and begin looking at “where are our homes?” “Where are our sister homes going to be? And who will be the mentor, the nurse leader, who will be the support team which you are probably going to have extra nurses that will not be nurse leaders. They need to be on a home, you will have every office person, you will have every department director, you will assign those to specific homes then they as well need to be a part of this circle: the mentors and the nurse leaders of your steering committee. As you then look at your map and you start looking at worksheet #1. You’re going to start listing all the people on 7-3, 3-11, 10-6, where are they working right now? Who are the people in dietary, housekeeping, maintenance, activities, administration, the social worker; all of those things, you’re going to list them.*

*You’re going to eventually come up with in worksheet #2 as you are doing your meetings, you’re going to come up with each home is going to have its own sheet and it will tell you what*

*home it is and it's going to tell you who the mentors are, who the nurse leaders are, the life enrichment, it's going to tell you who the different nurses are, the household nurses for the shifts that you have, the caregivers, that sort of thing.*

*Okay once you have watched the video and you've come back and you've looked at your map of where your homes are going to be, you began your worksheets on what staff is where, who are going to be mentors, nurse leaders, and so forth.*

*You're ready to start meeting and make a learning circle, we met once a week and what we would do is we would decide you might watch some video and then work on a poster. I actually have some posters for you. You can improvise on these, you can use them, you can do your own thing.*

*If you look at first poster, it talks about some of the plans for the home, and its putting that map up, highlighting, just leaving it there whenever you all get together, put those posters up, get your map up, highlight each home or sister home together, color code it, put on there and identify, "do we have any areas that could be community sites?" Do we have an area where people can go watch the theater, watch movies? Where is the café going to be? Where is a video rental, where they can just go check out videos and things to show on their homes or in their rooms? Where is a library going to be? Where is a private dining area that can be reserved? We had a little space and we just glassed it in and we created our first general store, we now have a huge general store that we just donate and have people donate items where every week the homes can come down and the residents can get what they want for free. Those kinds of things, you're going to have those posters up so when you walk in, put those posters up, it's so exciting to see the progress you have made, its visual, it will keep everyone excited.*

*You are also going to want to list on poster #1 how you are going to decide the names of the homes. My great uncle was one of the first sheriffs in Oklahoma, so my mother suggested as a part of our committee, let's go to the residents and ask them to name a famous Oklahoman; so all of our homes were named after Oklahomans.*

*You're also going to want to put again that worksheet up on who is going to be the household staff, where the household staff is going to be, and do we need to hire? Do we need to hire anything for this particular home or these sister homes and do they have to have a license to be able to be in that position? Do we need any supplies for the home? If you are going to do like we did, we have our staff room on the home, not a nurse's station, you may need to look at some of those supplies as well. So you are now making a decision, are we meeting every week, what pace are we going to start doing these posters, what pace are we going to watch the videos at the same time? I would watch a video at the same time you are working, because it's just a lot more*

efficient. That's what's great about this home concept, you're going to work smarter, because you are going to do these things within the organization you already have set up.

So if you look at Poster #2, it's going to list some things that you are going to discuss through the learning circle of any updates and any protocol. For instance, the dietary, if you don't have a café, there are many regulatory ways that you can create your dining experience now where it's not a café. We just found that the café was wonderful, because most older people are used to going out to eat and it gets them out of their home and going into a real social, kind of community setting, and it's very social. So if you haven't started a café, maybe you need **to look at the dining protocols that are on the website.** You may also need to list, who are your housekeepers, those are going to need to be a part of that home. You may have some floater housekeepers but they are going to be a part of the training for that particular home or sister homes, they will be trained just like everyone else. Everyone is trained. Same thing with activities, you are going to want to list that and on the activities, they are going to become the life enrichment on the homes, and what home are each of them going to be on? You're going to also have on this poster the training schedule, when you feel like you are getting to that point, you want to set some dates of when you're going to be through with the videos yourself, when you're going to be through with making some of the learning circle decisions, when you're going to set the time to actually get memos out, start coordinating.

It will budget wise have some training costs, because you're going to need to train each home and sister home for probably 2 hours for a 4 week period, so you will want to plan on the financial aspect of that. They also may be some other accounting considerations that you need as far as any expenditure for any other supplies in the dining room. We also did uniforms, so when we did our uniforms, we just provided two uniforms for our dietary staff and then it was up to them to maintain that. You may want to buy or rent some table clothes, get some dignity napkins. And then a final cost might be the cost of copying, like you are going to be copying the self-determination, you're going to be copying an orientation training, you're going to be creating your grid, just some of the office type nursing forms that you'll be needing as you build your home.

The next couple of posters that you'll have, #3 and #4, just are a few ideas of really important protocols that you might have and how you might want to put those into a report in neighborhood council, how you might want to build it into the rhythm of the home on the stand up agenda, that sort of thing. I just listed things on there, but it's totally up to you. Don't create more work; if it's not broken, don't fix it. I'm just trying to give you ideas of existing things, how it's going to fit in the rhythm of the home. That is also part of working through as you are watching these videos, the very last video is about the rhythm on the home and it just kind of shows you how you maintain the home. So as you are looking at your rhythm and when your times are of shift change, when you're going to have your in-services, when you're going to have your neighborhood council or you might have called it department directors meeting, when you are going to have some of those events going on. You might take some of your practices and see, do I need to add that into one of these existing forms. So again, that's just sort of working some of those details out so that when you set the date to begin training, you are presenting that.

*Now once you actually go through each week of training, you will see as you are watching the video, as you train Week 1, you're going to have a task you're going to do to start building that home and sister homes. Week 2 you're going to have a second task. Week 3 and finally week 4, and by week 4 you should be up and running and on the resources, there are a few little QAs that on the very beginning week and two week, you are going to want your mentors, your nurse leaders, your life enrichment to be on the home a couple of times a day. The next week, to be on the home once a day, the following week you'll just gradually decide, but you're going to work, what I call, the bugs out. You're going to want to just make sure that they know your home household staff know that you are right there; we're going to work things out. And it will change as things work or maybe don't work, but you're going to have the line of communication open up so well and then even during the first week or two your whole steering committee will probably want to get together that first week to see any reports from any homes to see what's going on. So these posters are going to guide you and give you resources for that.*

*The very last poster just may be paper work that you need to have printed for the week 1, week 2, week 3, and week 4. So as you get your worksheets, you posters up, every time you all get back together, just put those up at the back of the room, it's just a visual of your progress, your success. It will give you excitement. It's a lot of work, because you are working this in with your existing job, but it's well worth it.*

*The very last thing you'll see for the resources for the charter group is I did put together a little memo. You feel free to use any of it or use your own, but you're going to want to communicate to your residents and your staff and to the residents' family the exciting program that you have going on. You're also going to want to meet before the home is open with the residents and their families on the homes and we had our mentors, guides, nurse leaders, we had a circle and we went around the circle and we said, "What do you love about your home?" And by that time we had already opened our café, we opened our café before we opened the home so they could see and we then went around and said what we loved about our new café, what do you think about the menu. And then at that point, the mentor, the nurse leaders explained, we're going to be starting a process and it starts with we're creating home. And creating home means we are going to try to have the same staff on sister homes and you're going to have this person as your mentor, and this person as your nurse leader, and this person as your life enrichment guide, and what we're going to do is we're going to take 4 weeks. And the first week we are going to come to the resident and we're going to ask them the self-determination, what is it they want, we're going to ask them about lifestyle and we're going to start building a grid and a staff area and life enrichment and that our vision is that we're all together here for home, for family. And as you do that, then later down as people continue to move in, they're going to be taken and oriented to this whole process.*

*If you want to also later do more with education and in-service, buying the Meadowlark Hills kit by Steve Shields and LaVerne Norton is superb. They are who have inspired me to create an organizational guide to help people accomplish home, but they have all of the*

*knowledge for more education and that may be a source for you as you open up home and want to do more in-service training.*

*Again I want to end with how proud I am of you, I may not know your name or know your face, but I know your spirit and you are the key to providing home with the best quality, you're going to have the best quality come out of this, because you're going to have less turn over. You're going to have more job satisfaction, more resident and family satisfaction, and you're going to see that everyone is unified, because they all understand what we're here for. We may have our different chores on the home and job descriptions, but we're all here for the same reason: to make our house a home. We're all family to one another. The best is yet to come.*

Through the last ten years I have simplified and tried to ensure that the Welcome Home work was part of the work needed not adding more work. Even before all the changes to Focus on Excellence, Five Star and now the 2016 Federal Regulations, organizing home and building every member of the staff and residents up to have a vital role is imperative. (and have gone back to simplify because of the added work from Focus on Excellence being ask to do , the PBJ, the new Section G, the 2016 new Fed regulations.)

Here is why you need to get organized for Home:

1. Less turnover
2. Greater employee satisfaction and greater purpose for work
3. Resident choices and relationships are enhanced
4. A home and a family are formed

**As the leader of your Welcome Home Project , let's get started;** for you it is important to have the written materials printed, so that you can follow the chapters with the video's. As the leader, you need to watch all the videos and use your book to follow along. Making notes and highlights that you want to recall and guide your steering committee. Once you have watched the videos from Charter to Session four and followed the written materials; you should have the final overview of what you are going to accomplish in your organization with Welcome Home Project.

Now that you have finished your homework it is time for you to make this a reality by following the steps below with your own steering or Charter Committee.

**Take the Third Step now and review the ‘Action Points’ listed on the next page as a ‘GUIDE TO ORGANIZE YOUR OWN WELCOME HOME PROJECT.’ Again, congratulations to YOU on being such an outstanding leader and a national hero for all those who live and work on the home.**

# **Action Point: Guide to organize your own WELCOME HOME PROJECT:**

## **Action Point Steps:**

**1<sup>st</sup>: Getting Started with your Steering or Charter Committee. Decide on the group for the committee involving: Administration, Administrative Nursing, Charge nurse, C.N.A. (M.A.T. for Assisted Living) Peer mentors, Life Enrichment, Dietary and Environmental for your steering or charter committee. Invite them to meet with you, even if do not need this time; plan on two hours for first meeting.**

## **2<sup>nd</sup>: Preparation for this session by leader:**

- 1. Set a date for the committee to meet**
- 2. Have the website ready to show session one, part one, segments one, two, three and four to “Cast a Vision for Home an Organizational Guide”**
- 3. Discuss date and time of next meeting. Allow up to two hours per meeting. \*If more than two members are going to have to miss the session, reschedule. Everyone must make this is a priority to get started.**
- 4. Make a decision, are you going to meet every week or at what pace.**

**3<sup>rd</sup>: At this first meeting, watch the Session one of “Welcome Home Project” interacting with each break out session.**

## **Homework assigned: (For everyone)**

- 1. Think through the floor plan and the possibilities of the Homes**
- 2. Think through the list for Home Support and Resource team for the Homes or sister Homes.**

## **4<sup>th</sup>: Preparation for next session by leader:**

- 1. Rewatch Charter Session and Prepare for learning circle: Begin discussing, who will additionally be added to the Steering (later called Home Support and Resource Team for Home or Sister Homes) Worksheet 2 for the Home**

**Support. Later Worksheet 1 to look at Household Nursing and Caregivers suited best for the Homes or Sister Homes.**

- 2. Print the worksheets and the Posters. Have Poster ready with supplies needed-markers and materials.**
- 3. Have a list of all staff by shift and position of all employees in the organization.**
- 4. Posters up to discuss the floor plan and possibilities of Homes and Sister Homes.**

**5<sup>th</sup>: At the second meeting:**

- 1. Watch the Session 1 Part 2 on the Website. Take notes as needed. Group will be starting to fill in the Poster of floor plan and Home Resource and Support Staff. (As the group is watching the Charter Session, point to the various posters and worksheets that are being described.)**
- 2. Begin learning circles for floor plans (Poster 1 )**
- 3. Begin learning circles for Home support and set date for next (worksheet 1 and 2)**
- 4. Begin learning circle for Nursing Caregivers on homes that is best suited (worksheet 1 and 2)**
- 5. Decide combination of working on posters and watching the video**

**6<sup>th</sup> : At the remaining meetings: Continue completing the Poster work, Worksheets, finish watching the Sessions and doing any homework**

## Café:

If you are already doing a café style or menu style of dining, this is great otherwise have the Nutrition guides watch how to do a café. *Greenbrier Testimonial: While meeting, watching the videos and working towards the Welcome Home, we started the café first to see the difference this made for our residents.*

## To do café:

1. need the menu : have resident decide what to put on the menu and also have a daily special and ideas of what they want This is also the time let them know your efforts to organize the home with the designated staff .
2. need the equipment to do “order items”
3. Uniforms for the staff: look like a café. This will become an important time of not only nutrition but dignity and socialization.
4. Go over the protocols (\*\*) Lori has in print
5. Flags or symbol when the kitchen is open to cook otherwise residents, families can come and visit while enjoying a beverage.
6. Set date for training and coordinate with members for each home the days/time for the training session. Posters or Memo need to go out. Plan on two hours a week. Each session, they will build one part of the home> \*See this poster to fill out
7. Page 29 titled “Welcome Home Project” needs to go up about the sessions for organizing home so it reminds staff, exists residents and informs families. Also a letter and invite for each sister homes to meet the Home support staff and do a learning circle on ALL our value for home: resident, family and staff. See the items needed for the Household Staff room on the poster and each organization can decide if they want to have the area ready as they train staff.
8. The week you show session 1.  
Have learning circle with families and residents about the home concept. You may offer to watch Session 1 to the families as they visit for their care plan conference.
9. Now you are ready to do the weekly sessions/tapes and build your organization one week at a time through training and the ‘rhythm of the home through your daily, weekly and monthly routines.’
  - a. stand up meetings daily \*see sample form
  - b. daily small gatherings and community events \*see poster
  - c. weekly planning meeting \*see sample but make one user friendly for you
  - d. weekly neighborhood reports \*see samples
  - e. monthly in-service \* make sure reviewing home is part of each in-service \*see sample in-services
  - f. monthly update buddy system
  - g. Move In \*see packet and self-determination
  - h. Self-Determination Form/Grid

- i. Training: add to peer mentor/NAHCA monthly meetings what want to do at in service on homes
10. Once you open the home, use the form to daily check for the 'bugs you need to work out.' This needs to be done the first month or so. You determine. Those appear on pages 31-38.

## Casting a vision for “Welcome Home Project”

Organizing and maintaining Home  
Research based and inspired by the National “Household Model”  
Lori Hackett Long, M.Ed. Gerontology

### A. Your Journey for making a Vision of Home a Reality

1. Organizing your daily, weekly, monthly, quarterly and annual work, meetings to include the residents lifestyle choices for making Home.

2. Organizing Home, Designated Staffing, Mentors and Guides, Homemaking, Life Enrichment into each home while Maintain Quality Standards in Clinical care & Regulator

### B. The FOUNDATION of the HOME (Organization as I have researched and based upon the organizations I have previously developed to promote Quality assurance)

1. Designated Staffing **On going** \*And
2. Training *New Household Orientation* **On going**  
*\*attachment 1: Learning circle (Source: National Household Model)<sup>5</sup>*  
*\*attachment 2: Household Model Verses the Traditional model (Source: National Household Model)<sup>6</sup>*  
*\*attachment 3: Values handout for Stakeholders in the Household Model (Source: National Household Model)<sup>7</sup>*
3. Commitment to Home materials for both staff and families<sup>8</sup> - **On going**  
\* 3 & 7
- 4... Household staff room: Self-determination/Grid
- 5... **Daily** Report: Stand up Agenda/ Communication Book & Household Staff room  
*\*attachment 9*
6. **Weekly** Neighborhood Council: Mentors, Guides... Household representatives  
*\*attachment 11*
- 7... **Weekly** Household Planning Meeting  
*\*attachment 8*
- 8... **Daily** Life Enrichment Gatherings and community events *\*attachment 5*
- 9... Move In *\*attachment 4* - **On going**
- 10... **Monthly** 2 hour in-service  
*\*attachment 10: Ideas for monthly Household in-service training, Agenda for monthly in-service business on the HOME and DVD's*
11. **Monthly** Home Residents Council
- 12... Quarterly QA Council QAIP

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## Overview of Posters to Make

\_\_\_ (1) **Look over map and decide where the Homes will be.**

**Look over map for Community Centers**

**Look over map for Café needs/idea**

\_\_\_ (2) **Have a list of staffing by each home/hall and each shift by that home/hall**

Use "Household Staff" worksheet, from Welcome Home Project packet

\_\_\_ (3) **List of those staff** such as Administrative type nurses, department directors/assistants and other Administrative personnel who might be a mentor, Life Enrichment, Nurse Leader for a particular home. Use worksheet provided in the following page.

\_\_\_ (4) **Look over Handout for making "WORKING POSTERS" to guide your organizational work for "WELCOME HOME PROJECT" and decisions. BEGIN your POSTERS for work at Steering meeting to guide you.** Use worksheet provided in *Appendix*

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\_\_\_ (5) **Order the "National Household Model Kit" so that you can use the Contract, Forms such as Leadership Vs. Shields Matrix, and DVD training such as: Hiring DVD, Learning Circle DVD, Come on In DVD "Household Matters – (Information to Purchase: A Good Life 'Round the Clock", Manhattan Retirement Foundation 2121 Meadowlark Rd Manhattan KS 66502**

\_\_\_ (6) **set a weekly day and time to watch Welcome Home Project DVD Initial Training DVDs and begin reading the materials from Meadowlark Hills for Training & Skills you may wish to incorporate in the Home and in training/in-service in addition to "WELCOME HOME PROJECT". Use by permission for Home under "Welcome Home Project agreement" Copyright and may not be copied for use by other facility.**\_\_\_<sup>9</sup>

*To obtain a Household Kit of the renowned National Household Model to structure your very own model, you can contact Meadowlark Hills at the following phone number (785)537-4610 or by writing to 2121 Meadowlark Road, Manhattan, KS 66502.*

**WORKSHEET 1**

**(2) List of staff by each home/hall and each shift by that home/hall**  
**\_\_\_\_\_ *Hall/Home Worksheet***

Current  
6-2

Household/Home  
6-2

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2 -10

2-10

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10 -6

10 -6

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WORKSHEET 2

**Welcome Home Project Household Staff for \_\_\_\_\_ Home**

Mentor or Team leader \_\_\_\_\_

Nurse Leader \_\_\_\_\_

Life Enrichment Guide \_\_\_\_\_

Nutrition Guide \_\_\_\_\_

Environmental Guide \_\_\_\_\_

Home Support (list):

**6-2** Household Nurse \_\_\_\_\_

Caregiver: CMA emphasis \_\_\_\_\_

Caregiver: CNA emphasis \_\_\_\_\_

Caregiver: CNA emphasis \_\_\_\_\_

Caregiver: Housekeeping emphasis \_\_\_\_\_

**2-10** Household Nurse \_\_\_\_\_

Caregiver: CMA emphasis \_\_\_\_\_

Caregiver: CNA emphasis \_\_\_\_\_

Caregiver: CNA emphasis \_\_\_\_\_

Caregiver: Housekeeping emphasis \_\_\_\_\_

**10-6** Household Nurse \_\_\_\_\_

Caregiver: CMA emphasis \_\_\_\_\_

Caregiver: CNA emphasis \_\_\_\_\_

Caregiver: CNA emphasis \_\_\_\_\_

Caregiver: Housekeeping emphasis \_\_\_\_\_

***Use of posters to display at steering committee....continually working: adding and taking away...See what have done, what needs to be done....***

***This is a visual “organizational Guide” of steps, what your goals for Home are, Policies, equipment, training and evaluating the Foundation of your Home.***

Posters can include:

**Poster #1: Plans for Home**

**I.** Put up the Map of the building and highlight in various colors:

\*Where each home will be

\*Community Sites

\*Café

Place these on the poster labeled #1 for visual aide at all Steering meetings

**II.** List on the Poster the items below that need to do Learning Circle and/or research in planning for “Welcome Home Project”

\_\_\_ Names of Home

\_\_\_ Household staff for each home

\_\_\_ Household staff room

\_\_\_ Staffing hiring and licensing needs

\_\_\_ Plans to train staff, residents, families

\_\_\_ What equipment supplies need for home?

\_\_\_ Job duties

\_\_\_ Policies and Procedures, etc.....

What community sites do you have in your Home?

## Community Sites

Convention Center.... Show Time..... Groups, guests...music other.... Birthday Celebrations

The Gym..... Exercise Class (PT at Skilled)

The Spa.... Choice of spa treatment each week

Rec Hall..... Bingo, Dominoes, Cards, Games

Church

Video Store

Grocery Store

Beauty Shop

Computer Bar

Bedlam Snack Center

Doctor's office/Clinic

### **Ideas for Individual Home Life Enrichment: social gatherings/interests/hobbies**

Family Planning for upcoming week:

\*Birthdays to celebrate (Staff and Resident) (special table, ritual....)

\*Welcome to new household members (resident, their family, staff)..... Dinner

\*Outings to Grocery Store/ snack center

\*Volunteers to check out "video" for Movie/show times at HOME (decide show times)

\*Manicures

\*Letter writing and Journaling "this is your life" –written by Lori Long

\*Look at upcoming Community Events (activities) Schedule

\*Learning Circles: resident choice: reminiscing topics/seasonal, etc.

Poster #2:

## List of to discuss:

Any changes in protocol or just the Welcome Home Project training?

1. List training for Dietary/ protocols
  2. List for housekeeping
  3. List for Activities
  4. Training on specific modules (steering committee select) (Not all) from Household Model Kit
  5. Training with videos “Welcome Home Project” initial training DVD’s
  6. Training Schedule: Dates & times by Home. Normally will take 5 weeks one day a week. There will be assignments to do during the week to “build the home.” Make sure you are hired as for positions as much as possible.
  7. Accounting..... costs
- \* Related to Kitchen or Café dining
  - \* Cost of training: 2 hours training per week per employee
  - \* Payroll budget per home....
  - \* Budget for food, nursing, activities, HK/laundry per home

Poster #3

***Look at your own systems and if working see if area to improve with HOME***

***What you are currently doing***

\*Infection Control Council (as is...report to weekly neighborhood council; then speed through "Business of Home" at monthly in-service)

\*Fall Council (as is...report to weekly neighborhood council; then speed through "Business of Home" at monthly in-service)

\*Safety Council

**POSTER # 4**

VI. Organization on each Home

Self- determination form/ My Story/Grid

Resident Assessment Needs/Care Plan

Compare: resident/time/task to household staff member and make specific assignments

Household staff: (a) Mentor daily rounds and duties *\*\*keep daily round notes in notebook*

(b) Household stand up "learning circle" between shift changes,  
Communication Book & Household staff room

(c) Weekly Team planning

(d) As needed, new admission learning circle

(e) Weekly Neighborhood Council

(f) Monthly Home review & Grid

(g) Monthly 2 hour in-service training

(h) Bi-annual or Annual "Dream Learning Circle"

**Rhythm of the Home:**

Poster #5:

Paper work for "training session"

Week 1 Orientation packet

Week 2 Self determinations

Week 3 Stand up Agenda

Week 4 QAs on the Homes

Week 5 Overview

## **Sample Memo and poster on Welcome Home Project**

### **Welcome Home Project ..... The beginning weeks after you open for Home**

Use the following notes and QA's as you monitor closely and meet in your Neighborhood council during your beginning days and weeks.

- (I) Poster to put up at all entrances
- (II) Memo: Neighborhood Council
- (III) Sample "Beginning Day" QA for Neighborhood Council
- (IV) Memo for "Beginning Day" learning circles

## WELCOME HOME PROJECT

We usually spend most of our lives creating our home. We decorate, make memories and enjoy time with others...in our home. Our residents and their families need to have HOME in long term care so they can continue enjoying these types of opportunities and feel comfortable when visiting, eating, celebrating or just being together.

Our journey at (Name of your Home) has led us to join the “Welcome Home Project” an organizational guide inspired by the nationally acclaimed “Household Model.” We have gone through the hands on training at the original model “Welcome Home Project.” Even though our quality of care and services will remain, the change is we are Home:

\* Each home has its own household staff that will be assigned to that home.

\*Each home has \_\_\_ - \_\_\_ residents who reside in that home.

Formally \_\_\_ hall is the \_\_\_\_\_ **Home**  
Nurse leader: \_\_\_\_\_ Mentor: \_\_\_\_\_ Life Enrichment: \_\_\_\_\_  
Nutrition Guide: \_\_\_\_\_ Environmental: \_\_\_\_\_  
Home Support: \_\_\_\_\_

Formally \_\_\_ hall is the \_\_\_\_\_ **Home**  
Nurse leader: \_\_\_\_\_ Mentor: \_\_\_\_\_ Life Enrichment: \_\_\_\_\_  
Nutrition Guide: \_\_\_\_\_ Environmental: \_\_\_\_\_  
Home Support: \_\_\_\_\_

Formally \_\_\_ hall is the \_\_\_\_\_ **Home**  
Nurse leader: \_\_\_\_\_ Mentor: \_\_\_\_\_ Life Enrichment: \_\_\_\_\_  
Nutrition Guide: \_\_\_\_\_ Environmental: \_\_\_\_\_  
Home Support: \_\_\_\_\_

\*The resident’s day and routine is directed by their choices (what to wear, what to eat, what life enrichment opportunities they want to be a part of...) they, the resident make.

\* Please respect entering the residents’ home; knock and wait to be invited by the resident. Just as if you were at home...you have people wait to be invited in.

This concept may challenge your understanding....but think about the way things should be at home. We are not creating a homelike setting.... we honor and value each resident’s basic need to create their own home not matter where they live. This will take everyone believing in this vision and mission because.... *EVERYONE DESERVES A PLACE TO CALL HOME.*

\*\*\*Families please contact the Household Nurse for your home or the Mentor for any questions.

\*\*\*Families are invited to come to their Welcome Home Project Orientation at \_\_\_ time. in \_\_\_\_\_ (Name of your location) i.e. Café. \_\_\_\_\_

(2) **Memo/reminder for Neighborhood Council members:**

Mentors, Nurse Leaders, Life Enrichment, Environmental, Nutrition, Home Support Mentor

When the Homes open, be on your home every day for the first weeks:

Your job is to be “the support” the Household staff; especially the Household Nurse. Go over those things you will monitor to help “work out the bugs” HOWEVER, let her be the one to run the learning circle if have to talk about change in posted schedule, problem and the report between shift. You will not be on the household like this and therefore you must remember the goal is the “self-led team” you just gently guide and try to take a back seat all the while keeping your eyes and notes handy for you, the other mentors and I to review at the end of the day: We can meet each day at \_\_\_\_ (time) to review the notes from the day. I know this week will be hectic for you with the families meeting with me as well this week. HOWEVER, this is now your priority for the week. You **MUST** talk to me if for any reason you are unable to be in your home for 2 hours in the morning and 2 hours in the afternoon. That gives you 4 hours to get caught up on calls to return or other work you need to achieve that day.

AGAIN, you need to carry your Master Calendar with you and make notes as well as the daily guide. I am expecting this to be done daily unless you contact me personally. You are so vital in the smooth transition of the first week as well as the other guides who will be doing the small gatherings while the Life Enrichment guides train the 6-2 staff to take over the following week. **THANK YOU, THANK YOU, THANK YOU!!**

\* you and sister home plan your weekly planning meeting on in-service day; but one hour apart, so you can cover each other.

-Go over any requested days off

-Go over signing up for the Grid for Caregiving duties, life enrichment duties, and meal time assignments with residents

Week Two:

\*go down home **one hour** in the a.m. and one hour in the pm.

\*Continue to fill this form out

\*Weekly Planning meeting. Have list of family conferences that will be hosting a household staff/family/resident learning circle. Make contact with family to see when they can come.

Week Three:

Same as above

Weekly Planning..... Set date for in-service training

\*Begin Quality of Care policy: read over first policy

\*Life Enrichment will begin training 2-10 on the evening life enrichment activities

Week Four:

Same as above Weekly Planning

**(III) Sample QA's you can use to help support the observation and working out the bugs during the beginning days. Adapt for your organization for monitoring & taking notes during the first weeks on the home.**

## Mentor Daily HOME

DAY \_\_\_\_\_

6-2 Household Staff Assigned:	Household Staff Present:
Household Nurse _____	_____
Care giver CMA _____	_____
Care giver CNA _____	_____
Care giver CNA _____	_____
Care giver HK _____	_____

Time down on the home & what did while on the home:

Mentor: \_\_\_\_\_  
Life Enrichment Guide: \_\_\_\_\_  
Nurse Leader: \_\_\_\_\_  
Environmental Guide: \_\_\_\_\_  
Home Support Mentor: \_\_\_\_\_

Families/ Staff visited:	Any problems or questions:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Small gathering done: 6-2 staff being trained

Any comment for Breakfast or lunch on Home:

Report between shifts: stand up learning circle: HOME Notebook: notes on any changes for the day. \_\_\_\_\_Time

2-10 Household Staff Assigned:                      Household Staff Present:

Household Nurse	_____	_____
Care giver CMA	_____	_____
Care giver CNA	_____	_____
Care giver CNA	_____	_____
Care giver HK	_____	_____

Time down on the home & what did while on the home:

Mentor: \_\_\_\_\_  
Life Enrichment Guide: \_\_\_\_\_  
Nurse Leader: \_\_\_\_\_  
Environmental Guide: \_\_\_\_\_

Families/ Staff visited:

Any problem or questions:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Any comment for Dinner on Home:

10-6 Household Staff Assigned:                      Household Staff Present:

Household Nurse	_____	_____
Care giver CMA	_____	_____
Care giver CNA	_____	_____
Care giver CNA	_____	_____
Care giver HK	_____	_____

Weekly Neighborhood Council\_\_\_\_\_

## Life Enrichment QA Report

Weekly Planning meeting for Home \_\_\_\_\_

Life Enrichment: Time down on the home & what did while on the home:

wk1 \_\_\_\_\_

wk2 \_\_\_\_\_

wk.3 \_\_\_\_\_

wk.4 \_\_\_\_\_

*i.e. am round check/documented in notebook, a.m. small gathering, one on one, new resident learning circle, family learning circle for care plan meeting*

Documented in the Resident HOME Notebook the one on one or small gathering \_\_\_ and in the Home communication/meeting Notebook for any notes on any changes for the day. \_\_\_

Weekly Neighborhood Council \_\_\_\_\_

Monthly In-service meeting on Home \_\_\_\_\_

Any comment for Breakfast, lunch or dinner:

Any comment on self-schedule policy, move in policy, doorbell/sign in policy:

Any comment/observation on "Report" between shifts: stand up learning circle:

Turn a copy of this HOME QA & your monthly Job QA Report into  
Community Mentor.

Beginning Day worksheets

### Environment Mentor QA Report

Weekly Planning meeting for Home \_\_\_\_\_

Environmental Mentor: Time down on the \_\_\_\_\_ (name) home & what did while on the home:

wk1 \_\_\_\_\_

—

wk2 \_\_\_\_\_

—

wk.

3 \_\_\_\_\_

wk.

4 \_\_\_\_\_

*i.e. am round check/documented in notebook, a.m. small gathering, one on one, new resident learning circle, family learning circle for care plan meeting*

Documented in the Resident HOME Notebook the one on one or small gathering \_\_\_ and in the Home communication/meeting Notebook for any notes on any changes for the day. \_\_\_

Weekly Neighborhood Council \_\_\_\_\_

Monthly In-service meeting on Home \_\_\_\_\_

Any comment for Breakfast, lunch or dinner:

Any comment on self-schedule policy, move in policy, doorbell/sign in policy:

Any comment/observation on “Report” between shifts: stand up learning circle:

Turn a copy of this HOME QA & your monthly Job QA Report into  
Community Mentor.

**Nurse QA**

New Household Resident Name	Follow up: Admit paperwork, Grid	Home
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Weekly Planning meeting for \_\_\_\_\_ (name) Home \_\_\_\_\_

Time down on the \_\_\_\_\_ name home & what did while on the home:

Any comment for Breakfast, lunch or dinner:

Report between shifts: stand up learning circle: HOME Notebook: notes on any changes for the day.

Weekly Neighborhood Council \_\_\_\_\_

Monthly In-service meeting on \_\_\_\_\_ (name) Home \_\_\_\_\_

Turn into Community Mentor

# Move In Coordination

\_\_\_\_\_ (name) Home Mentor QA Report

Daily Duties:

To do: follow up:

Admissions \_\_\_\_\_

Tours \_\_\_\_\_

Assessments \_\_\_\_\_

Communication to homes \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Move Ins (Admissions) for Homes QA

New Household Resident Name

Date/Time of Move In /referred by:

Home

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Any comment for Breakfast, lunch or dinner:

Report between shifts: stand up learning circle: HOME Notebook: notes on any changes for the day.

Weekly Neighborhood Council \_\_\_\_\_

Monthly In-service meeting on Brooks Home \_\_\_\_\_

Turn into Community Mentor: This QA & monthly Report

## Household Staffing/Schedule Call In Protocol

*\*All staff needs to sign in on the Master 'sign in sheet' for Scheduler. Then GO down to your assigned HOME. Even if need people on another home, until directed by the Household Nurse.\**

I. **Prevention:** the day before at 10:00 Mentor/ Guide or Nurse Leader will meet with Household Nurse or scheduler to see how schedule looks for tomorrow, and through the next two weeks.

II. Daily **Report** (time) \_\_\_\_\_: learning circle:

Ask any staff from Household that we could call if there is a call in a.m.:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Ask any staff from sister Household if we could call if call in occurs in a.m.:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

III. Unexpected Morning of call in:

5:30 a.m. 10/6 nurse call Scheduler or On-call mentor  
Scheduler will ask that the household or sister household were called first. If so, and no relief, then Scheduler will give direction.

## **Household Nurse and Mentor/Guide/Nurse Meeting**

Time:

Day:

Place:

We want to keep working out the bugs for our new “Welcome Home Project” Oklahoma project. We want to meet and come to a consensus on the protocol regarding the handling of the schedule, call in’s, the daily learning circle and weekly planning meeting.

We need everyone here for this learning circle and training session. It is important that we all handle these “foundational” issues the same on all the homes and that everyone is trained on the agreed upon protocol.

Thanks for everyone hard work and desire to make HOME a reality at \_\_\_\_\_. (Name)

**Chapter One.....**

**Overview of concept and what will be accomplished.....**

**Dialogue for in house direct teaching.....**

**Forms can us to build and maintain home.....**

## Chapter One: The Foundation of the Home

In Chapter 1 and Session 1 Video, you will be introduced to the foundations of a “home” and the tools needed to make this project successful to you. Congratulations on beginning the journey of transforming your traditional nursing home into a real “home.” As you listen to the training DVD and use the resources provided in this book, you may be asking what should I expect to learn from Session 1?

One of the first and most important aspects of Welcome Home Project Oklahoma project is developing and holding learning circles, which includes, not only the staff, but also residents. The learning circle not only provides your residents with an enjoyable experience, but it also results in a consensus on a decision that needs to be made within the home. Basically the guidelines of a learning circle require those participating to sit in a circular position so everyone feels equal in the process. The facilitator poses a question to those participating and every person in the circle has an opportunity to respond to the question. Another guideline comprised in the learning circle is that no one can speak while another person is responding to the question. This ensures participants are respectful of one another’s opinions and responses. The learning circle is a revolutionary concept and it observes and acknowledges the voices, ideas, and observations of those affected by the current situation. It is an absolute in the process of transitioning to the home model.

Also featured in Session 1 is the issue of traditional homes and the reasons why this system is broken in so many ways today. Due to regulations established in the 1980s, the clinical model emerged and nursing homes became the status quo. As caregivers and experts in this field, we are responsible for fixing what is broken while maintaining the strict regulations placed on our business and all the while, we must foster the idea of “home” along the way. Another way to put it, if you take the clinical model we’ve labeled a nursing home and subtract “nursing” as the primary aspect of the equation, we are left with just a home. In addition, another broken aspect of the clinical model is the hierarchy of management. Typically, decisions, including rules and policies, are made by leaders and administrators and quickly passed down to other staff members. These staff members are the individuals that are working with the residents’ day in and day out. While these individuals have the most knowledge about the resident, they have little or no input on their day to day care.

The difference you will experience using the home model is that all staff members are encouraged to grow in leadership in their respective homes. This is because every staff member takes opportunities to interact with their residents. When the staff is working in a home, no one is ever too busy to listen to the residents. In order to do so, more staff members are absorbed into the established homes. As a result, more people are working together to create a home for the residents and this puts less pressure on your individual staff members. For example, each home typically has set number of residents and are affiliated with a sister home for those staff positions that will work two homes. Serving these residents , are three shifts of household staff which include the household nurse, caregivers (C.N.A.)(M.A.T. Assisted Living) to address

dietary needs, housekeeping, and medication. In addition, homes also have other staff that serve as Nurse Leaders, Life Enrichment Guides, Mentors (members of administration), Nutrition Mentor and Environmental Mentors.

You will also see in Session 1 DVD that members of Greenbrier staff were asked what they loved most about their own personal homes. Some answered that they loved the sense of security and privacy, others loved having their personal belongings surrounding them, while still some mentioned the closeness of family and being around others or simple things like working in their gardens. This is exactly what our residents want as well. They are no different than us! In the highly acclaimed book, *In Pursuit of the Sunbeam*, a book recommended when transitioning your facility to the home model, we are clearly reminded by the authors that “home is a basic necessity” for every person living. Think back to what home means in your life. We can move time and again, we do we make the new place where we are living “home” by developing rituals, routines, and giving it our own personal touch. Each home we’ve had reflects who we are inside. As we age and begin to have to rely on others for care, we can still create a home when we are allowed to retain control over our lives in these ways.

This is our vision for those we serve each day. The keyword is always “home.” We should constantly be asking our residents questions about what THEY want to do, what THEY want to eat, etc. If it could be done in their own home, why shouldn’t it be done here too? We have been given a big responsibility and that is to enrich the lives of our residents, no matter what job you have in the home. *We can certainly maintain the quality standards required by us and provide the clinical care needed while adding the vision of welcoming people to their very own homes.* This is not only the most beneficial model for our residents, but also for those on staff in these homes. You will soon see the results of employees who enjoy their work more, less turnover, and you will also see how stakeholders become a part of the self-led teams in each home.

For the past 35 years, caregivers and administration at Greenbrier have researched various levels of the program in their facility. Everyone is a stakeholder in this entire process- the resident, the staff, and the family. As you will learn, new regulations are being implemented in our field that refers to making facilities more “home-like”. It not just “home-like”, it must become home. The initial move-in process sets the stage for this transition to home. Another way that Greenbrier has made their facility home is by introducing the Rose Garden Café, a family style dining room, where members of the resident’s family are encouraged to visit and eat with the resident at every opportunity. The café was one of the first steps Greenbrier took in transitioning to the home model. You will see in this session a Learning Circle conducted about how the new dining experience has affected each resident.

As we build on Session 1DVD, we will begin looking at the foundations of the home model. If you think of it as a blueprint to a home, the actual structure or frame of the home are the regulations required by federal and state guidelines. The home model foundation is made up of twelve parts-

- 1) Designated Staff & training , 2) materials that explain the value of Home and commitment to making home, and adding to the Move In packet for residents as well as adding to HR for new employees hired 3) learning circles, 4) household staff rooms for daily household meetings, the self-determination form and The Grid, 5) daily Stand up Agenda reports at shift change , 6) weekly neighborhood council meetings with mentors and home guides, and 7) Weekly Planning Circles , 8) Life Enrichment Gatherings and Daily Community Events, 9) Move In Process, 10) one 2 hour in-service trainings each month and update staff caregiver and resident home buddy list, 11) Monthly Resident Council, and 12) Quarterly Councils: QA, QAPI. 5 star program.

It is the self-led team and the residents building this foundation to create the rest of the home, the more comforting and enjoyable aspects of a home. If the foundation and structure is solid and strong, then the remaining parts of the home can be constantly improved on and altered to meet the needs of those in the home, which should be your staff's first priority.

## Welcome Home Project Training Video

### Session 1 Part 1 Dialog

*Well, I want to say congratulations that you have made a decision to bring the Welcome Home Project to your organization. That means you are passionate, you are dedicated to your residents and you see the value of bringing home into the existing staffing that you have, because we are going to be talking about designated staffing. You are going to be able to use your facility layout and the environment to promote a home. You are going to see everything through new eyes, through eyes of an umbrella, where home is the umbrella to every service, every environment, every policy. We are coming to you and going to share with you how you can organize with your staff, with your schedule, with your layouts. You're going to be able to just organize into your daily routine, your weekly, your monthly, plus the new employees that come in, and also the new resident move ins that come in.*

*Now I want to assure you I'm not going to (or we are not going to) give you any extra work, we are going to Keep It Simple Sweetie (KISS). We are going to take these elements of home and you're going to put them right in to your organization. But what's going to happen is, it's going to make a lot of these new regulations: the self-determination, the lifestyle assessment, the residents' choices, the home emphasis, the family participation; it's going to bring everyone together in your organization so that you can achieve these more smoothly, more efficiently and the outcome will be quality, the outcome will be home. The last thing is I believe that you are going to see everyone in your operation is going to now have a new job duty, because when you come to work we all have a job. I'm sitting here with a nurse, with a nutritionist, with a life enrichment, with a peer mentor and a C.N.A., with administration, with HR. So no matter if you are housekeeping, dietary, a nurse on the floor, whatever your position is, those are now your chores on the home, but you are also now going to be a homemaker. So everyone that comes to work now has a new duty and that is you are a homemaker. This vision of home, building our homes together, is going to change the lives of the people who live with you, the people who work with you in a fantastic way.*

*I'm sitting here today with an amazing group. This is our charter group for the Homes of Greenbrier and this group started about 2004 researching and we began our homes in 2005. So we've been doing this organizational model and one thing that we have learned as a gift to you is we have simplified it so that it will fit right in and you will be able to do it beautifully.*

## **Session 1 Part 1 Segment 2 Dialog**

*So I am sitting here with a wonderful group these are the charter members of our Welcome Home Project. We began researching about 2004 and we began our Welcome Home organizational project in 2005, so it's been over 10 years so I am glad to have everyone here. As you can see we are sitting in a circle. Later you may be standing, but you will be in a circle. These circles are so important; the circle is very inclusive visually as you can see. It puts everyone together and the circle gives each person a voice to share what has happened through the day that needs to be reported- maybe at a stand up meeting, or it allows a person to respond if there is a challenge on the home and give their opinions. Even in our dietary, at the Rose Garden Café, there's always a stand up meeting between the shifts so they can tell their observations or give their suggestions. It does not take away from your organizations chain of command or the policies that may be required for you; but I guarantee you this- you will have better ideas from learning circles than sitting in an office with the same 6 or 7 administrative people. "Why?" Because these learning circles are the heart of our homes. They are the heart of the organization. These are the people that are involved every day on the home with the residents and their ideas, observations, suggestions, and thoughts are important for making the home go so smooth, in communicating so well.*

*We are going to be using these learning circles to build and maintain your home. You will use the circles for pleasure in small gatherings as we'll learn, at your weekly planning meetings, at neighborhood council, at stand up meetings. You may use them to introduce new residents or new staff members.*

*This is a quote from Meadowlark Hills on learning circles:*

*"Wherever people gather together. We naturally sit in a circle. When someone new comes along, someone says, 'Hey, pull up a chair,' and every one moves a bit, creating a larger circle to make room for the new person to join. A circle is the most conducive form for allowing conversation within a group."*

*"In a learning circle, no one person's voice holds more value than another. Everyone is heard as equals, building a sense of respect and team. Each participant is given opportunity to speak without being interrupted or judged. This form of communication draws shy people out and encourages those who are more talkative to listen. Everyone has a chance to examine both their own views and those of other circle members, broadening perspectives and the base from which relationships are built and solutions are discovered." (5)*

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<sup>5</sup> Copyright ©2006 Manhattan Retirement Foundation d/b/a Meadowlark Hills Retirement Community; LaVrene Norton, MSW, and Steve Shields, Action Pact Press; pp 54 & 57

*I have been around long-term care for 45 years growing up, I have never seen anything so revolutionary as learning circles as all of you here can attest to through the many learning circles we did when we were organizing the Welcome Home Project. I think it is very important as we commit to this project, all of you who are watching that even though you may see in the future the acuity of our care, our residents may get greater, that it's even more important that we focus on our value for HOME, because that home changes. The umbrella of that home changes the way we deliver all our services, changes the way we interact; it changes everything and it will allow us even as acuity changes, it will allow us to enjoy our work, because there is a greater purpose than just the chore that we each are assigned to on the home.*

*Well again, I am so proud of this group. Many of them as you will learn in another session have been career in this field. But we're going to start by letting them share one of the questions that you will be doing a learning circle on, and that is "What it is that you love about your own home?"*

*Brandi Davidson, Current QA Nurse / 16 Years / Original Nurse Leader*

*"I love the comfort and security of my own home, having my family all together and the love that you feel there."*

*Barbara Tate / Rose Garden Cafe Manager / 5 years / Nutritional Guide*

*"I love the warmth and the coziness and the family dinners and the safety that I have when I'm there."*

*Rheadonna Lorenz / Activities Professional / 18 years / Life Enrichment*

*"I just love that I can decorate it my own, my put own spice on it and just feeling safe and secure."*

*Jim Thorpe / Administrator / 26 years / Mentor*

*"Gayle and I started together almost 53 years ago now starting home and I emphasize starting home. It wasn't automatically a home when we started but it's built on that because of our children. Everything that's happened in that home good and bad but it's still home. It makes me feel like it's home because I am most comfortable there than any place there is on this earth. When I come home I can kick my shoes off and I have a good time when I'm at home."*

*Gayle Thorpe / Human Resources Director / 26 years*

*"Oh I love my own home, because I can come in and feel comfortable in it. I can do what I want to do. I feel safe in my own home."*

*Syd Smith / Registered Dietitian /*

*"I love being in my home, because its full of memories like others have mentioned, some good, some difficult, but it's a place that I can go and relax and be surrounded by family pictures, things that are important to me, and its my safe place, I can relax when I'm there."*

## ***[Pause to do your own learning circle.]***

*So I hope that everyone can hear the things that you love about home. Did you hear some of the things that we can bring to the residents that they enjoy? Decorating their homes, putting their family pictures up, having family get togethers, we all have rooms, we want the families involved, making their choices, their refuge where they can just go into their room, and when we come in, we don't just walk in, we knock, we ask permission, "May we come in?" That's their home, not only the home is their room, but their home is the whole place, and they are making choices. I think as you go back and look at some of the things that we talked about, you can see how we bring home into our organization from just what you love about home. Why is that important? Because then we understand how to do home and it changes the way we look at what our chores are at our organization.*

*Now again, I am just so proud of this group and all of the people at the Homes of Greenbrier who for 10 years now have been doing Welcome Home and maintaining it in a great way. I want you to tell me, these 10 years, what you have seen about home:*

*Syd Smith: "I believe that it has made our residents especially when they first come in, more comfortable, I think it has eased the process of adjusting to being away from their own homes. I believe it is a more natural environment. We had kind of a institutional model, the resident came in, they fit into our schedule, and we've provided them the opportunity of choice of how their day goes in their mealtimes, and what time they want to get up, where they want to sit in the dining room, in many many ways we've provided choice and we all like that. Its more natural, it feels different than more into a "institutional" , because its what were used to."*

*Gayle Thorpe: "The last ten years, I have noticed that the families, the employees and the residents have a special love for each other that we really didn't get to share, because we didn't have the freedom. And my favorite thing about home is that our residents get to make choices. Choices of when to get up, what do they want to put on, what time do they want to go to meals, when do they want their bath, they get to make those choices and that's very special to them and their families."*

*Jim Thorpe: "You know I see a somewhat different aspect to it, because I see the resident families before I even see the resident most of the time. And coming into a nursing home for a person that's never been there it's not a comfortable situation for them. Its their first time usually. I am able to say something to families now about welcoming their loved one into our home that becomes their home and I call it a welcome Spirit, because there is a spiritual aspect to it I really believe that. I see so many families that say you know there's something different about Greenbrier and I say tell me about that difference. And they will usually say it's just*

*different coming in here; it looks different, it feels different than most places we go into. So it's a welcome home spirit and I'm proud to say that these folks sitting around here have that right here in their heart."*

*Denise Logan: "Oh in the last ten years I have seen a lot of changes. The residents have more control of their ADLs, more choices on every aspect of their life. We've had to stop a few times and regroup, we've had to back up and regroup on a few things to find a better solution on some things, but there's been a lot of changes, good changes."*

*Rheadonna: "They have a choice now, they can get up when they want to, you know they don't get up where its convenient for us were there for them and they get up when they want to get up and we don't heard them in like cattle when its time go eat, they go eat when they want to, and they get up when they want and go to bed when they want to and its just they're happier and like Gayle said the relationships that were building with our residents and the caregivers and the families is just so much more and to me its more intimate."*

*(Lori- So you see a difference in even the relationship between the residents and the staff and the relationship between the staff and the family members?)*

*"Yes I do, because they will come to you, because they see us everyday you know 8 hours a day I mean different shifts but our faces are always the ones that they see and they feel comfortable. Its just more of a family like you're talking to your own family member."*

*Barbara Tate: "In the dining, we have the special of the day or they can order off of the menu and I just think that with all the choices they have the residents are happier and when you come to the Garden Cafe, everyone just seems so happy, people are in there drinking coffee and just visiting reading their newspapers and they're awesome with employees and I think its because they have many choices that they are just happy with us."*

*Brandi Davidson: "I've been in long-term care a long time and when I first walked in the door of an institutional model, especially as far as the cafe, you see the pink moon shaped tables with some people feeding five residents at a time. Now what I see is one on one everyone sits at a dining table, their visiting about current events, their family, with that being said our residents are very close with our employees, they know a lot about their own children, whats going on in their lives. I see the residents and the families a lot happier, we have less complaints but I also agree with Jim, w hen you walk in you have a different feeling when you walk in our door.. Its home, you know people are comfortable, you know people feel safe, which are residents have told us many times, its just a different atmosphere, but the other side of that is the choices that they have and the voice that they have, but we now switch our schedule to what they want, we have a grid on every home that tells what they like to do, when they want to get up, what activities they want to partake in, and if they come to us and say that they want to switch maybe a shower from morning to evening, we adjust to them, they no longer adjust to us."*

*And I know some of you who are listening and are joining us on this journey are wondering, "How can we do this?" That is the point of this training, we're going to show you all of our tools and how you are going to build your home with each of these sessions.*

### **Session 1 Part 1 Segment 3 Dialog**

*I want to get it deep in your spirit and in your soul: HOME. Because this is what is going to drive and motivate everyone: from the staff, the residents, the families, and people coming in and out.*

*In the book, "In Pursuit of the Sunbeam" the author Laverne Norton clearly communicates the theme of home. . She writes,*

*"Our philosophy is home. It's simple really...all people have the right to home; that blend of shelter, relationships, expressions, meaning, and a sense of self that we have enjoyed our entire lives. Home happens when the place, the person, the relationships, and the pleasures of daily living come together in a unique protective identity that we all recognize."(6)*

*Home Is a Basic Necessity "In Pursuit of the Sunbeam" Lavern Norton*

*"We need to remember what home means in our own lives. Home is a basic necessity for a wholesome and balanced life. It is where we retreat, regroup and find sustenance.*

*Home is, in fact, an extension of our self-identity which we alone create..... During our lifetimes we may have lived in several different houses, but each was our home because we made it so with our rituals, routines and personal touch. No matter where we lived, we took control by working to create a comfortable living space suited to our particular needs and tastes- one that reflects who we are."(7)*

\_\_\_\_\_6 Copyright ©2006 Action Pact, Inc. LaVrene Norton, MSW. Living and Working in Harmony Training Guide for Self-led Teams. A component on Household Matters, A Good Life 'Round the Clock. Pp 3

7 Copyright ©2006 In the Pursuit of the Sunbeam. Manhattan Retirement Foundation d/b/a Meadowlark Hills Retirement Community; LaVrene Norton, MSW and Steve Shields, Action Pact Press; pp 26

*Home: A Sanctuary where Grace Abounds*

*"Creating home as our sanctuary and the place that fosters graceful living happens naturally and subtly over time. We may not think of the work or decisions that occur every day to sustain our home, but there is no doubt it is we who direct its development. Being in charge of our own home brings meaning and priceless quality to our life and enables our individual potential to flourish. These are the values and beliefs that weave these together to create the basic of life within the home." (8)*

*You see we do all deserve home, no matter where you live and we are going to make home and we are testifying our journey for the last 10 years that we have done it and we are maintaining it and it is our gift to you. We want this for anyone living in long term care. Again I'm going to emphasize that in the future we may see more higher acuity, but it's more important than ever that home become the vision in which all of our services, all of our relationships, all the environment is geared around as we come together as people who live on the same home, work on the same home, the families work. The key word is home and as we talked about we make our home, the residents make their home, as you said in your circle, they have a lot of choices. They're making their home. We're helping them; we're supporting them in that rather than them fitting into our schedule. I know a lot of you listening are wondering 'how are we going to do that?' We're going to show you how to do it and it will be done in a daily fashion in your regular routines.*

*You're going to hear a lot of our words are centered around home. One of them is homemaker. As I mentioned earlier we all at our homes are homemakers whether you are a man or a woman. You're making your house your home. You do it through eating together, celebrating together, watching television together, decorating; all of things that you do to make your house a home, you get to bring that now into your job. So even as a nurse, administrative nurse, a MDS nurse, a QA nurse, a housekeeper, a dietary, an administrator, a personnel director, the janitor, whatever job you had, you will be a homemaker on that home.*

*Yes we will still have our regulations, we'll still have our policies, we're going to maintain those, but you are going to have home as an emphasis while you are doing that.*

## **Session 1 Part 1 Segment 4 Dialog**

*Before we look at the foundation of the home, I want our group, we did something in the beginning days, our charter committee decided we would start our café before we opened our home, because it was going to have a quicker response of letting the staff see, wow what a difference! I hope most of you have a dining program that offers choices, but at the time our dietary manager had a café and she's like we can do a café and so we're going to go around our Circle and we're going to let everyone tell a little bit about what it was like before and what it is like now ten years later.*

*Brandi Davidson: "You would walk in and see the pink moon tables, one person feeding five residents at a time there wasn't a lot of conversation going on and it seemed chaotic. Now, everyone gets to sit at a dining table, the staff visit with the residents about families, sports, current events. We have seen a lot of weight being stabilized, less supplements having to be offered. I've noticed that families enjoy coming to eat with the residents now and you walk in and it's like the men are sitting there at the coffee shop in their home based community. The women are out with their friends and they take care of one another and I think it is a lot of fun in our café. They have choices. (Lori: as a nurse how have you noticed a difference with how it relates to the relationship of your nursing staff and the residents?) They're close, they know basically what the residents want, what their desires are, but it's fun to sit back and watch them interacting. They know about each other's children, they're visiting, their laughing, they're communicating. It's no longer hurry in, hurry out; we have a lot of things to do as far as nursing. Now they get to choose when they want to eat, what they want to eat, what they want to drink and it's a more relaxed environment for all of them."*

*Barbara Tate: "Now they come down and the residents will come and find me and say, "Let's put this on the menu," so they are helpful on that. I just like the laughter and it's busy in there, I mean you go in there and they're just having the best times. They have so many choices and it is like the coffee shop. You'll find people in there all times of the day drinking coffee, reading newspapers, laughing. The dietary staffs really close to all of them; they can tell you how they're eating, how they're not eating and they're very helpful with that. We do monthly menus every month so they have a special today; for breakfast they all order off the menu so we don't have any specials and for lunch and supper, they have a special or they can order off the twenty-one items. (Lori: what if I wanted to have a breakfast at dinner time?) We have a lot of them that do that."*

*Rheadonna Lorenz: "It's not just the special for the alternate of the day; if they don't want it, they don't have to eat it. Just to see that we don't have to count the supplements or we're more worried now about the weight gain we're having and they have so many choices, it's just great, it's better. The atmosphere is what I love, it's because when you do walk into a café, you hear people laughing and chattering and there's so much conversation going on in that café now."*

*Denise Logan: "Even our residents that need assistance with feeding, they get their choice of what they want to eat. Pureed diets, they still get the choice and the kitchen will purée whatever*

*they want and it just makes for a better, happier environment.”*

*Jim Thorpe: “When I first came, I knew nothing, but I was smart enough to know that something wrong in sitting down at the kitchen table and someone bringing you food you didn't order. But I didn't realize how really wrong that was until our dietary manager at the time came in and she said, "Jim you have so many complaints about the food," and I was having ten, twelve, fifteen complaints a week about food. That's the reason why I have no hair; I pulled all my hair out. She said let's have a café, it takes time to do, it takes a whole different menu to do that, she said let me handle it, let me try it. The Hackett's were gracious enough to say let's try it and we did. It was started off correctly though, because Lori if you'll remember we had the families come in and we took a circle of families and we said what do you think after we presented it to them. They agreed, let's try it. The residents were brought in, we had a circle. The staff was brought in and we had a circle. Everybody was a go, so we kicked it off. It was not just a success, it was a roaring success; everything went well. A year later, we had the same circles to check and see, would you want to go back the way we were? Guess what the vote was, 100% no. Let's stay with it and we have. Yeah we've learned a lot of lessons along the way, we've cut down on the food that we throw away, we've cut down on the supplements that we've had to use; that's a big cost, a huge cost. Appetites went up, weight went up, the most important is satisfaction went up, didn't it? You remember. Its great and were blessed because of it.”*

*Gayle Thorpe: “One of the things that I loved about the cafe when we first began was the choices that they had, but my favorite thing was a little lady that was absolutely refusing to go to the dining room, said you can't make me, I'm not going, I'm not going to do it and the little nurse that was working with her said alright, but about three days later, our DON then was out in the foyer and this lady was getting ready and she thought getting ready to go to church and she said Mrs., are you getting ready to go to church? She said, "no, I'm getting ready to dine." This DON said you're getting ready to what? She said, "You know, in our new cafe." So this person goes into the cafe and one of the people at the table said, "Can we get another table here, they do that at other cafes, let's just pull a table together." Because there were four at the table but there needed to be five, so they pulled two tables together and this lady look up at one of the waitresses and she said, "ma'am, more butter please." She was our biggest cheerleader in the dining room, she absolutely told everybody, "you gotta go to this cafe." I'm not kidding you, if they were new, "you wait until you go to our cafe, you get choices, you can sit where you want, you can have more butter anytime you want it." She was absolutely the joy of our life at that time, she really promoted what we began to do and worked so hard to achieve.”*

*Syd, you have been our registered dietitian, we're so blessed to have in our village as a dietitian for over 23 years; so you were here 13 years before we opened the cafe, tell us your opinion.*

*Syd Smith: “I have seen Improvement in the nutritional status of our residents as a result of the cafe. I believe they eat better, it's a community, when they come in it's a community, it's more relaxed. I think that improves their dietary intake at the meals. You'll see them sticking around after meals just visiting, they'll come down and drink coffee or have a cookie and a glass of juice*

*and work a puzzle. I believe that just the interaction among the people that they dine with, the staff is a more natural environment versus institutional and it's not just a task to be completed, it's an experience. We want it to be a dining experience like when they would go out to eat; we want it to be enjoyable. It's a constant work in progress, we have a lot of issues that we worked through and we're always working to improve that service that it is a more dignified environment. I feel like they are treated like my own father lived there for about 3 years and I was so glad that we had made it a more homelike setting, because it made his adjustment and there are many here that have had family members there and it's just easier for the families because they're more comfortable. Families come in, we have a lot of family members that come in on a regular basis, we encourage that, we promote that, we offer a room that they can have a birthday party or they can have a family dinner, we want them to have that access to those things that they would normally be doing at their homes. They would a birthday party or they would have a dinner together, a celebration and it makes a world of difference."*

*I think you can tell by listening to the learning circle there's so many benefits, not only nutritionally but dignity. I remember that's the number one thing I saw, it was like you could actually see dignity the first morning they walk in and those pink tables were gone and we had created what's called the dignity napkin and it was beautifully folded as if you would go to a cafe and we still use those. Our staff had pads just like you would go to Cafe and they would order and they have their menu. The old environment just reinforced, "I'm sick, I'm sick," but the new environment reinforces so much more of what meal time is about. Meal time is more than just nutrition, even though that is nutrition and hydration are so important to the overall well-being and health of a person, but it's a totality. Its socialization, it gives them an opportunity that they can actually give to someone else: words of encouragement, a smile, actually even help each other, which they do, so it's just an overall beautiful environment; much more than just the food itself. Well just as you've heard from our experienced leadership and charter members of The Welcome Home project, that the dining is critical in the home and you have to decide how are you going to choose to do it. Are you going to do a cafe? What are you going to do? But it is a time of more than just nutrition and hydration, its meaningful relationships, its socialization, it's where a resident can help someone else and feel dignity and so forth. So I want you to get deep inside your spirit: home. Because your vision of home is going to change your vision of how you see everything about your job, the environment, the dining, every service, every regulation.*

## **Part 2: Foundation of the Home**

**Think about your home: it has a foundation first: before the walls go up, the electricity, the roof and of course it supports the family who will make this house into a home. Same principle. These foundations you have & if it is not broken don't fix it; just organize your home and incorporate this organization to the rhythm of the home.**

**Home is always driven by the resident on the home**

**1<sup>st</sup> foundation built on the value and commitment of home through  
1<sup>st</sup>: Designated Staff & Training (on-going)**

**By the time you are doing this training, each person should be on a designated home and sister home. Based upon your job you are part of a designated household staff of caregivers, a sister home or you are on the home as a mentor, guide or support to the home caregivers, residents and resident families**

**\*Having your own Home or Sister Home and being a part of a designated staff is the key to success**

**By having YOUR home**

**By having YOUR own household staff**

**Providing YOU the Foundation of training of the Home; along with some breakout session to build your home with your home residents, each member of the household staff and the families of the residents....**

**#1 Your home will have less turnover**

**#2 You will have a greater enjoyment of your work on the home**

**#3 You will be a stakeholder on your home becoming an important part of the communication, ideas and outcome on the home as you grow through knowledge and leadership.**

**Being a part of a home staff means that you are going to be building relationships with the same residents, their families and staff. It means you will have to treat each other with respect and be merciful when someone may have a 'bad day'. I found over the years, the NACHA program and peer mentors, the Nurse leader,**

**Mentors and all home support are so important to help maintain the home with the staff who have been career and especially the newer members coming on. I like to actually use examples from our own home life to illustrate: if you have a new baby come into your family at your own home; how will the parents and others treat this new member of the family? We want our newest members to be taken care, to be trained by a peer mentor and have a career with our home.**

**We need each other. We must team up to accomplish what needs to happen on our homes. We need to encourage each other as well. Always remember we will be successful when we treat each other the way we wanted to be treated, when we do our work the way we want our peers to do theirs and when we value each member of our home as our extended family. Now you may have members of the home that may violate a HR policy, a call in policy, or something in their job description; of course go to the person on your chain of command and follow your foundation for this.**

**That is the great American dream is the pursuit of happiness.**

*Are you ready to get started on your journey to home? We're going to start by reviewing what I call the Foundation of the home. I want you just again to think back at your own home; you know a home, when it's being built has a foundation. Its typically cement and it may have your plumbing inside of it, the walls are going to go up, your roof is going to go up. When the home is built, the family is going to move in and they're going to make that house into a home. So in order for us to have a home, we need foundations on which to move and to work in and to be able to guide us, so that we can also have freedom on our home to make that particular home driven by the residents and the caregivers and the families on that home.*

*The first foundation of the home is the designated staff and the ongoing training. Today at the end, you're going to be doing a breakout session and you, your nurse leader, your mentor, everyone that is on your home will be going over what it means to be part of a designated staff. So by this time you are on a designated home and it may be attached to a sister home, which is what we found out that we needed to do. It's based upon your job and as a part of being on a designated staff that means that you are also going to have other people that normally you might not see down the hall all the time and those are going to be mentors and guides and we're going to be talking about those in another session. By having your own home, by having your own household staff, by providing you with this training of the foundation and the breakout sessions to build your home with your residents and each other and families, you are going to find the benefits. 1. Is that your home is going to have less turnover. 2. Your home will have a greater enjoyment of working on the home. 3. You will be a voice, a stakeholder on your home becoming such an important part of the communication, ideas, and outcomes on the home as you grow in your knowledge and in your leadership.*

*You see being a part of a designated staff is a key to building home, because you are going to be with the same residents, you're going to be with the same home caregivers, your staff, you're going to get to know your families. This is where your home and family come together and what happens is the quality outcomes are going to be greater, the way that you can implement all of your policies and your regulations in your daily, weekly, monthly routines on your home are going to be more efficient and are going to be even more enjoyable, because you're all going to be working together to encourage each other.*

*Carmen Fore: "What I love is having the home concept, it sounds more difficult, but it actually makes things so much simpler. When you are making people and doing the routines that they like and encouraging them to do what they want to do, things run a lot smoother. It's not more complicated, it actually encourages high quality care."*

*I found that through the years it's so important that we treat each other with respect and when you're on a designated home and you're dealing with a set number of people it becomes easier for us to develop those relationships and to treat each other with respect and to encourage each other. I'm particularly interested with the NAHCA program, the peer mentors, developing career professionals that are going to continue to teach and to encourage each other. Again I like to use examples about if you were at home and you were expecting a child, a new baby, all the plans that it takes to prepare for that baby. Those are the type of attitudes that we should*

*have for one another as we have a new member coming on to our home as a designated caregiver. You see we need each other on the home as caregivers. We must team up to accomplish what needs to happen on our homes. Always remember we will be successful together as a designated staff when we come to work and we work as if we want other people to work and we treat each other the way we want to be treated. When we value each other as an extension of family while we're working on our homes. So on the designated household staff what your home is going to look like, if you look at this poster and we're going to review more in-depth next session on what is the nurse leader, what is a mentor, the life enrichment guide, the environmental guide, all of the people right now that are in offices MDS nurses, QA nurses, receptionist, office clerical people, Administration, social worker, HR, Life Enrichment, dietary, housekeepers, everyone right now that has a job that's not in a direct care position are going to be assigned to a home as well to support the designated staff. The designated staff are whatever hours you have let's say your hours are 6-2, 2-10, 10-6, you will have your household nurse, you will have your CNA and your CMA caregivers, you will have a designated housekeeper and again there are times that to fill your schedule you're going to have to have a sister home so that there will be some people on the schedule that will go from one home to the sister home just to have a 40-hour schedule.*

*A mentor keep in mind is going to be a part of your home when you're doing learning circles or you're at a planning meeting or you have to bring the group together. They're going to look at what are the regulations, what are the policies, what are the foundations of the home so that you are in compliance with the various regulations and the policies of your organization. You're going to have a nurse leader, this is an administrative nurse who's aware of the regulations. Again who is aware of the policies and the foundation of the home. You're going to have Life Enrichment guides and they are there as a guide to direct the life of the home. They're going to make sure that the lifestyle, the history; they're going to be directing the planning meeting so that we can all build meaningful life on our homes with our residents, with each other, in celebration of birthdays and celebration of events.*

*The second foundation of the home is the materials that you need to put together and add to the move-in, what you would normally now called the admission to move-in, because we don't want to just admit someone like you would into a hospital. We want to move in someone into their home. You need to add that value of home to your move in materials. You also need to add this to your HR orientation policy. Here are some of the commitments that need to be added to your move in and to your orientation of new employees. "We value person-centered care focusing first on the individual's unique personality and how they wish to live out their day. We value elders, families and staff together as integral team members working together to create a fulfilling and meaningful life for all. We value self-led teams that decide among themselves the most appropriate individual and team responses to the needs and desires of our residents. We value home as it relates to each individual's heart's desire and strive to enable the choices and quality of life that the residents enjoy in their own homes. Each is respected as an individual and shares in this decision making. You see we will create a healthy and happy culture of home. We will acknowledge and remove barriers for good communication. We're going to listen to each other, we're going to be self-aware, we're going to demonstrate a commitment to lifelong*

*learning, we're going to be willing as a self-led team to be coached and to coach others. We're going to grow in our sense of Team awareness, become skillful together as a team, decision-making, problem-solving. We will grow family relationships. We deeply respect the family relationships involve residents and their families, families with other families, commitment of our families and the family nature of our household life. Relationships are the Bedrock of our happiness as a household and involvement is key to building relationships.*

*So the first foundation of the home, while we're maintaining our regulations and policies of your organization, is the ongoing routine of our designated Staff Schedule and training. The second is adding on going into your move-in and your HR packet the materials for home and that commitment. The third is ongoing and that is learning circles. You'll have those on a daily occasion at stand-up meeting, you'll have those weekly when we have planning circles, you'll have them daily at small Gatherings on the home when those occur. You'll have them at in service planning. You can call a learning circle when there's a situation that we need to bring the household members together to decide. Again we've already addressed that and I know you understand how important that concept is. The fourth foundation of the home is a household staff room. Now we have taught at the state level, we've hosted organizations and their some homes based on their facility layout they might not be able to give a room like we have given, but it's very important that the staff is on the home where the residents live. That will be something that your Charter committee and you yourselves will have to work on and it's very important that if you do have a room that that is where the household nurses, everyone meets, you have your stand-up meeting. In the household staff room is a grid and the grid is very important, because it's what helps us do home. Each home has a set number of residents, when a resident moves in or as you are building your home and maintaining your home, you're going to update the self-determination form. That's going to tell you what the resident wants, what they like, what their lifestyle has been like and the grid matches the self-determination form so that we can put that up and it guides the life of the home so that the caregivers on the home know exactly at a glance what are residents want and when they want them. You will be working on this at breakout sessions to be able to get this started and you will have a process in which you maintain it. If you do not have a room other groups have put this in a notebook so that you can look at it but it's very important to the work of the home.*

*The fifth foundation of the home and it's so important I think this is before we started the home this was a huge complaint is communication and so we developed the stand-up meeting with a stand-up agenda and based on however many times that you, your shift change you would have a stand-up meeting and we will be showing you exactly how to do those and showing you a sample form that you are welcome to use or you may have one that you're already using. A nurse leader will be coming to the stand-up meeting once a day and a mentor will be coming by on occasion as they monitor the home is being maintained with the foundations. The sixth foundation of the home is the neighborhood Council which we will be doing for you and showing you each week we have a report that will monitor the move-ins, will monitor the cafe, will monitor the quality assurance measures, will monitor a breakout session and come down on the home the whole staff and make sure that we're maintaining the home. So this goes into kind of the rhythm of the home, they meet every week. The purpose is we bring all of the people from*

*each home together and we are able to spread information to and from homes and the community together and it also holds us all accountable on the home that were fulfilling those parts of the foundation that are going to keep us having the quality outcomes yet also make sure that home and homemaking is our vision.*

*The seventh foundation of the home is weekly and it's a planning meeting and that's where all the staff on the home that are able to get away, your mentors, your guides, your nurse leaders, your aides, your housekeeping, the residents and any of their families that want to come and you have a guide and you're looking ahead at the next week. What are things we want to do? Yes we have to have a calendar of things that we're doing a month ahead, but we can add things if somebody has a birthday or someone is going to have a baby and you want to have a shower. Whatever the event or whatever you want to plan that's your time to plan. Again we'll be showing you some samples of the forms and we'll be doing a circle or two to show you as well in other sessions. The eighth foundation of the home is Life Enrichment and the Life Enrichment is all of our jobs. We want to add meaning, we want to add life, we want to add opportunities to give one another, to feel a sense of purpose and dignity. Through participating, through helping people and it's done through Gatherings on your home, it's done through community events or Community sites, it's done through celebrations. You will be realizing that part of your job as being a designated staff member, adding homemaking to your job means that you are increasing life and the enrichment of their life. I've always believed and the only reason I'm working is that every life has a purpose and every life is to be valued or that they will not be here and so our job is to help bring that about in our life of our home.*

*The ninth area is the move in and we'll have a session dedicated to comparing what the old model of admitting someone and moving and planning that move will be. The tenth foundation of the home is in-service training, which I know you do it's required to do. We do ours differently now, we will be teaching a little bit about the agenda that you might come up with for your and service, adding bits of home at every in-service using the NAHCA long distance learning, doing the regulatory items and that is a very important part of the foundation is continuing your knowledge, growing in knowledge and leadership. The eleventh foundation is the monthly residents Council. You're already doing that it's very important that we realize that this is a time for the residents to come together and give us ideas that influence the whole community. The twelfth foundation, again I know you're doing, it's the quarterly, the quality measures now they have added many new requirements to quarterly assessments, facility assessments and all of this. I believe all of these measures that are going to be required will be easier to achieve because you're going to have a group working together not just a few people trying to do this alone.*

## **Session 1 Part 2 Break out session Instructions**

I. **Nurse leader & Mentor** facilitate Learning circle on Designated staffing, expectations of being on a designated household and the importance of being on the home where the residents' life: a staff area or room.

**Foundation of Home: having designated staffing & staff household room where everyone is on the Home with the residents not sitting off the home at a nurse's desk.**

**Building Home includes: Designated Staffing & that means you have:**

- a. a regular schedule
- b. you are to show up for work when scheduled
- c. if you are sick, follow the policy
- d. you are to know job and be trained in skills.....

**II. Nurse leader and Mentor: Staff household room**

**\* Go over the organization of the staff room: all home staff stand up meetings should be conducted the same way\*\*\*This is why Mentors, nurse leaders, guides need to go to some stand up meetings and making sure being maintained, especially with new nurses on the Home**

**\*Go over what Each Staff Household room, should have the same elements:**

**3 BB: Home matters, Security Matters, Special notices memos, grid, Table, Chairs, Charts in closets, file of form/ supplies, notebooks, grid**

**WHY? Because if the Home has to share with another home and it is a Household Nurse, CMA caregiver or C.N.A. caregiver....then they are "right" at home and can feel confident in work.**

**\*Handout for “Designated Staff & Chain of Command protocol  
\_\_\_\_\_Home**

**Nurse Leader:**

**Mentor**

**Life Enrichment Guide:**

**Environmental Guide:**

**Resource Support:**

**6-2Household**

**Nurse** \_\_\_\_\_

**Household CMA Caregiver** \_\_\_\_\_

**Household C.N.A. Caregiver** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**2-10Household**

**Nurse** \_\_\_\_\_

**Household CMA Caregiver** \_\_\_\_\_

**Household C.N.A. Caregiver** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**10-6 Household**

**Nurse** \_\_\_\_\_

**Household CMA Caregiver** \_\_\_\_\_

**Household C.N.A. Caregiver** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Each home will have a household nurse (charge nurse)**

**Each home will have their designated caregivers on the home such as the Certified Nursing Assistants, the Certified Medication Assistant, and the Housekeeper.**

**Each home/sister home will have guides and mentors that will be part of your home:**

**They are a resource for the homes because they will be a part of your home; they also have specialty knowledge that will help keep your home within the foundations of the homes regulations and policies.... We will go this in more detail later.**

**Home Resource: we actually have other Nurse Administration such as MDS Nurses, Skin Nurse, and Office Staff to bring to the homes.**

**\*Mentor: Keep in mind during learning circles, observations: Regulations, policies, foundation of the home. these are the individuals who are always ensuring that we are in compliance with various regulations and policies (along with the others such as nurse leaders, environmental and nutrition) \*pic?**

**Nurse Leader: is an administrative nurse who is aware of the regulations, policies and procedures of your home as well as the nursing standards.**

**Life Enrichment Guide: They help guide the life that goes on in the home: we will actually have a session because this is so important that we all are part of building a meaningful life on our homes with each resident as we find out about their history, their lifestyle choices**

**2<sup>nd</sup> Materials communicating our value of Home and the Home model: (on-going)**

**a. add to Move In/Admissions packet for residents and family**

**b. add to HR for all employees hired**

**Some of the commitment to values:**

**We value person-centered care, focusing first on each individual's unique personality and how they wish to live each day.**

**We value elders, families and staff as integral team members working together to create a fulfilling and meaningful life for all.**

**We value self- led teams that decide among themselves the most appropriate individual and team responses to the needs and desires of elders**

**We value "home" as relating to each individual's hearts desire and strive to enable the choices and quality of life elders enjoy in their own homes each is respected as an individual and shares in decision making.**

**We will acknowledge and remove barriers of good communication. We will actively listen.**

**We will be self-aware.**

**We will demonstrate a commitment to life-long learning.**

**We will be willing to be coached and to coach others**

**We will grow in our sense of ourselves as a team and become skillful at team decision-making and problem solving.**

**We will grow family relationships. We deeply respect the family relationships involved-residents and their families; families with other families; commitment of our own families; and the family nature of household life. Relationships are the bedrock of our happiness as a household. Involvement is the key to building relationships**

**\*\*Living and Working in Harmony-Training Guide for Self-led Teams by Laverne North is part of the Meadowlark Hills kit and would be excellent in service teaching material (9)**

**(Learning circles: still follow your protocols on HR, HIPPA need to know)**

\_\_\_\_\_9 Copyright ©2006 Action Pact, Inc. LaVrene Norton, MSW. Living and Working in Harmony Training Guide for Self-led Teams. A component on Household Matters, A Good Life 'Round the Clock. Pp 22

We will work to create a healthy and happy culture of home. We will always talk performance, not judge the person. \*This you will I am sure work on with your HR policies and there are times, that a performance such as too many call in's on the weekend need a learning circle to discuss with the home the consequences of scheduled members not showing up, or perhaps there is a need for more peer mentors or a family conference is scheduled and a learning circle of the direct caregivers meet before the conference (part of the 2016 regulations). Again, do not talk of a person but of performance that might affect the home or the care. (10)

### **3. Learning Circles (on going)**

**4. Household staff room:** (through years, some places do not have a room for each home to give.... So some will put up roll top desks or built ins to make space on the home. If you don't have staff room: use the grid in a notebook. This is one area we are building the home; first through a break out session where you will do the Self-determination guide and then your designated nurse leader will put the information on the Grid... I came up with this over 10 years ago, so that new and older staff can log onto the grid what the resident wants and have a visual for the home; this is needed to see only and using initials and or a numerical system with a ledger for the staff to know who each resident is.) This is updated when resident expresses change or condition changes. It helps in training and also looking at the overall activity on the home for the staff.

### **5. Stand up Meeting (2-3 times daily)**

### **6. Neighborhood Council (weekly)**

**7. Planning Circle: Weekly. Guide for household on what needs to be done. (This will be covered in LE training session)**

### **8. Life Enrichment Gatherings and Community Events (Daily)**

### **9. Move In Process (on-going)**

### **10. In-service (monthly) \_\_\_\_\_**

**11. Monthly Residents Council \_\_\_ 12. Quarterly Council (also the new QAPI, and 5 star programs)\_\_\_\_\_**

**Not only will you be learning about these elements of the Foundation of the Home but you will be working together to build or maintain your home each week; through the homework and breakout sessions**

**Chapter 1 / Session 1 DVD**

**Sample Tools for building Home**

**#1 Casting the Vision for “Welcome Home Project” Foundations and #2 Orientation checklist includes: Orientation checklist includes: Learning Circle, Traditional vs Home Handout, Commitment to Values and Home, Honoring Home, Designated Staffing Guide**

**Chapter 1/ Session 1 DVD**

**Building Home/Homework:**

**Orientation checklist**

**Designated staffing for each home and/or sister home**

**Designated staff area**

## Casting a vision for “Welcome Home Project”

### A. Your Journey for making a Vision of Home a Reality

1. Organizing your daily, weekly, monthly, quarterly and annual work, meetings to include the residents lifestyle choices for making Home.

2. Organizing Home, Designated Staffing, Mentors and Guides, Homemaking, Life Enrichment into each home while Maintain Quality Standards in Clinical care & Regulator

### B. The FOUNDATION of the HOME (Organization as I have researched and based upon the organizations I have previously developed to promote Quality assurance)

1. Designated Staffing **On going** \* And attachment 6  
Training New *Household Orientation On going*  
*\*attachment 1: Learning circle (Source: National Household Model) 5*  
*\*attachment 2: Household Model Verses the Traditional model (Source: National Household Model) 6*  
*\*attachment 3: Values handout for Stakeholders in the Household Model (Source: National Household Model)7*
2. Commitment to Home materials for both staff and families<sup>10</sup> - On **going**  
*\*Attachment 4*
3. Household staff room: Self-determination/Grid
4. **Daily** Report: Stand up Agenda/ Communication Book & Household Staff room
5. **Weekly** Neighborhood Council: Mentors, Guides... Household representatives
- 6.. **Weekly** Household Planning Meeting
- 7.. **Daily** Life Enrichment Gatherings and community events *\*attachment 5*
8. **Monthly** 2 hour in-service  
*\*attachment 10: Ideas for monthly Household in-service training, Agenda for monthly in-service business on the HOME and DVD's*
11. **Monthly** Home Residents Council
12. Quarterly QA Council QAPI

Welcome Home Project Sample New Household Staff Checklist to add to your Orientation:

1. Orientation Checklist

**HOUSEHOLD CAREGIVER ORIENTATION CHECKLIST**

Name \_\_\_\_\_ Date: \_\_\_\_\_

Trainer \_\_\_\_\_ **HOUSEHOLD CAREGIVER**

Name \_\_\_\_\_ Date \_\_\_\_\_

Trainer \_\_\_\_\_

I have met my Mentor: \_\_\_\_\_ Life Enrichment \_\_\_\_\_

Nurse Leader \_\_\_\_\_

Team leader \_\_\_\_\_

Environmental \_\_\_\_\_

Nutritionist \_\_\_\_\_

\*\*\*\*\* I have met all the residents \_\_\_\_\_. I will have read about all the residents My Story for the Life Enrichment \_\_\_\_\_ and report back to Household at Stand up meeting. Put on the calendar.

\*\*\*\*\*| will be at Planning meeting with residents & Life Enrichment on \_\_\_\_\_ (day) at

\_\_\_\_\_ (time).

\*\*\*\*\*| will be at learning circle on \_\_\_\_\_(day) and \_\_\_\_\_(time)

The Learning Circle is a revolutionary key in the creating HOME in the current Long Term Care Environment.

“Wherever people gather, they naturally sit themselves in a circle. When someone new comes along, someone says, ‘Hey, pull up a chair,’ and everyone moves a bit, creating a larger circle to make room for the new person to join. A circle is the most conducive form for allowing conversation within a group.

In a learning circle, no one person’s voice holds more value than another. Everyone is heard as equals, building a sense of respect and team. Each participant is given opportunity to speak without being interrupted or judged. This form of communication draws shy people out and encourages those who are more talkative to listen. Everyone has a chance to examine both their own views and those of other circle members, broadening perspectives and the base from which relationships are built and solutions are discovered.”<sup>5</sup>

The Learning Circle is used for various purposes. It is used to:

- Introduce new Household Residents and their families to the Household Staff.
- Introduce new Household Staff to the residents, their families and other Household Staff.
- Resolve challenges or find answers to questions by staff, residents and their families.
- Discovery Life Enrichment ideas and possibilities.

The Learning Circle changes everything. It is where all issues and decisions are determined by the residents with both the understanding and support of the family and Household Staff.

### **Learning Circle Rules**

Identify a facilitator for the circle. The facilitator's role is as follows:

- **Pose the Question.**
  - **Ask for a volunteer to start.** This allows someone who is ready to share to be first. It also offers structure and gives the facilitator a starting point.
  - **Go around the circle once.** Go from right or left of the first volunteer, and give everyone a chance to answer or comment on the question. Allow people to pass if they are not ready.
  - **Return to anyone who had passed.** This gives them another chance to speak now that they are ready.
  - **Open up for discussion.** Encourage others to comment and you may comment as well, but don't preach or teach. Try to listen more than you talk.
- Wrap up.** Summarize in some fashion, by pointing out what you have learned from the circle, or discussing when the circle meets again. It is always okay to acknowledge the group in some manner — what fun or how informative it is to get together in the circle.

\_\_5 LaVerne Norton, MSW, Living and Working in Harmony-Training Guide for Self-led Teams (Meadowlark Hills of Manhattan, S 2006) p. 54

Attachment 2: Household Model Verses Traditional Model

**Differences Between Traditional Nursing Homes and Household Model Homes**

**\*Source: National Household Model<sup>11</sup>**

TRADITIONAL	HOUSEHOLD
<b>Impersonal</b>	<b>Personal</b>
<b>Meaningless</b> Boring.	<b>Meaningful</b> You won't be sitting passively in a lecture format all day.
<b>Institutional</b> Keeping the institution running smoothly is all important.	<b>Person Centered</b> People come first, not the institution.
<b>Disengaged</b> Impersonal care given to residents you don't really know.	<b>Connected</b> This is what you envisioned when you chose to care for elders.
<b>Powerless</b> Goal of staff is to do scheduled tasks to the elders.	<b>Empowered</b> Living life with elders is the focus.
<b>Spectator</b> Staff are expected to quietly do as they are told.	<b>Respected</b> Staff are honored, respected, & included, as in a family.

No longer are staff told to sit back quietly and do as they are told but instead are involved and expected to be.

The Household Model creates a climate of learning, growing and involvement and this applies to the philosophy of training as well.

Not doing for but doing with — being. Fellowship with one another. Natural. Normal. Daily living. Like a family. Or a home.

Only through our employees, working together as a team, can we create the seamless response to needs and expectations of our residents and thereby achieve home.

Consequently we must attract, involve, retain and empower talented and loving staff. We take these responsibilities seriously. The first step after hire is to orient.

New Employee

Date

Orientation Facilitator

---

<sup>9</sup> Copyright @2006 Household Matter's A Good Life "Round the Clock." LaVerne Norton, MSW, and Steve Shields, Action Pact, Inc. CD Disc.

### Attachment 3: Values Handout

#### **Family, Friends and Staff Commitment of the HOUSEHOLD MODEL Values:**

As a Household Member, I will support and enhance the values for Home as a Stakeholder, which are:

1. "We value person-centered care, focusing first on each individual's unique personality and how they wish to live each day.
2. We value elders, families and staff as integral team members working together to create a fulfilling and meaningful life for all
3. We value self-led teams that decide among themselves the most appropriate individual and team responses to the needs and desires of elders.
4. We value 'home' as relating to each individual heart's desire and strive to enable the choices and quality of life elders enjoy in their own homes. Each is respected as an individual and shares in decision making.
5. We value community, where members live, work and socialize; where they are actively engaged and determine for themselves how to give and receive within their friendships, households, neighborhood, city, state and country.
6. We value growth – in education (knowledge) as both a means and an end. By deeply investing in staff, resident and family growth, we further community, enhance possibility of individual fulfillment and set an implicit standard that guides our behavior as an organization." <sup>6</sup>

<sup>6</sup> LaVerne North, MSW, Living and Working in Harmony-Training Guide for Self-led Teams (Meadowlark Hills of Manhattan, S 2006) p. 22

## **Household Member Contract**

- We will work to create a healthy and happy culture of home.

- We will always talk performance, not judge the person.

To make our household a place we all want to be, we must work to be non-defensive, but even more importantly work to talk to people in a way that they do not become defensive. We should always concretely discuss a performance issue – that may have negative impact on our team, our day, and the residents – but we must do it in a respectful non-judgmental fashion. This is extremely difficult, but the skill can have great rewards in our work life if we succeed.

- We will work to achieve **shared meaning** in all interactions.

We all have meaning to the words we speak, and we infer meaning from what we hear from others. It does not naturally follow that what you meant to say and what the person thought you meant are the same thing. This is an interactive obligation. The more we work to understand each other and have shared meaning, the more pleasant our household will become.

- We will **acknowledge and remove barriers** of good communication.

A busy household has a lot of natural barriers to good communication. This is true in our personal homes and definitely here is this household – our residents' home. We must work to reduce the barriers – in our own bad habits, in our natural differences and in the environment.

- We will **actively listen**.

- We will use self-awareness.

- We will all work to skillfully and lovingly **give** valuable **feedback**. We will bravely solicit and **receive feedback**, looking for the intended value for ourselves in our personal and profession growth.

- We will demonstrate our commitment to life-long learning. We see ourselves as a learning organization and will analyze problems with an educational mind-set, and gradually improve our knowledge of adult education theory.

- We will be willing to **be coached** and to **coach others**.

- We will grow in our sense of ourselves as a team and become skillful at team **decision-making** and problem solving.

- We will grow family relationships. We deeply respect the family relationships involved – residents’ and their families; families with other families; commitment of our own families; and the family nature of household life. Relationships are the bedrock of our happiness as a household. Involvement is the key to building relationships. We will grow in our knowledge of relationships and our skills in involvement.
- We will assure that the pleasures and activities of daily life are rich and abundant in our household life.

• As a household member, I will enhance the values for Home which are:

1. We value person-centered care, focusing first on each individual’s unique personality and how they wish to live each day
2. We value elders, families and staff as integral team members working together to create a fulfilling and meaningful life for all
3. We value self-led teams that decide among themselves the most appropriate individual and team responses to the needs and desires of elders
4. We value ‘home’ as relating to each individual heart’s desire and strive to enable the choices and quality of life elders enjoyed in their own homes. Each is respected as an individual and shares in decision-making.
5. We value community, where members live, work and socialize; where they are actively engaged and determine for themselves how to give and receive within their friendships, household, neighborhood, city, state and country
6. We value growth – in education (knowledge) as both means and end. By deeply investing in staff, resident and family growth, we further community, enhance possibilities of individual fulfillment and set an implicit standard that guides our behavior as an organization

I, \_\_\_\_\_, do hereby agree and commit to follow and embrace being a member of the \_\_\_\_\_ HOME as a Household member. It is my pleasure and my duty to fulfill these obligations.

\_\_\_\_\_  
HOUSEHOLD MEMBER

\_\_\_\_\_  
DATE

\_\_\_\_\_  
WITNESS

Attachment 6: Designated Staff

**\*Handout for “Designated Staff & Chain of Command protocol  
\_\_\_\_\_ Home**

Nurse Leader or Team leader:

Life Enrichment Guide:

Environmental Guide:

Mentor

Community/Clinical Mentor:

6-2

Household Nurse \_\_\_\_\_

Household CMA Caregiver \_\_\_\_\_

Household C.N.A. Caregiver \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2-10

Household Nurse \_\_\_\_\_

Household CMA Caregiver \_\_\_\_\_

Household C.N.A. Caregiver \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10-6

Household Nurse \_\_\_\_\_

Household CMA Caregiver \_\_\_\_\_

Household C.N.A. Caregiver \_\_\_\_\_

\_\_\_\_\_

The following is a sample protocol to post for the household staff, you may already have designated staffing or you may need to adapt your staffing policy to conform to having designated staff, possibly floater from sister homes.

**Protocol for fulfilling employee responsibilities to scheduled days:**

1. As a household caregiver, each and every person's duties on the home and for the care of the resident are essential and important; therefore it is your chief duty to show up on the days that you are scheduled.
2. Each home will have a schedule for designated caregivers assigned to a home or sister home; however, there can be situations arise that you are needed to help another home. We are family and help where needed to benefit the resident and others.
3. Each home will maintain their policies and protocols:
  - A. Schedule will be distributed by \_\_\_\_\_ of each month.
  - B. Requested days off policy
  - C. Parameters for calling in

**Protocol for dealing with problems on:**

**This is determined by your organization for Foundation of Home and policies; however, each home has the extra resource of their own Mentor, Nurse Leader to assist the Home nurses, C.N.A, cma , other staff, residents and resident families.**

For instance:

1. When a CMA or C.N.A. or housekeeper, PT has a problem: first, go directly to the Household nurse. ( 6-2 \_\_\_\_\_, 2-10 \_\_\_\_\_, 10-6 \_\_\_\_\_)  
Most any issue they should be able to handle. Second, if for some reason the nurse was unable to handle the situation; then go to the Home Nurse Leader: \_\_\_\_\_
2. When a Household e nurse has a problem, go to Nurse Leader and will call Learning Circle to bring the parties together to come to a solution or restoration of the situation.
3. At this point, Nurse Leader will contact the current Community Mentor or Clinical Mentor (currently \_\_\_\_\_) .The community &/ or clinical mentor will be a part of the learning circle. If needed, to call in other Mentors and guides such as \_\_\_\_\_ for Environmental, \_\_\_\_\_ for Nutrition, \_\_\_\_\_ for Personnel or \_\_\_\_\_ for scheduling... or a specific member of the team will be given assignment to contact them.

Ready to Go: Smart Staffing Protocol

# “Welcome Home Project”

## **Chapter Two.....**

**Overview of concept and what will be accomplished.....**

**Dialogue for in house direct teaching.....**

**Forms can us to build and maintain home.....**

In Chapter 2 and DVD Session 2, we continue to breakdown and further explain the details of the home model in an effort to develop a clearer concept. We begin this session by reminding you that taking on a task such as this makes you a pioneer for your work and contributions in making this vision a reality- to create home. As pioneers, you clearly understand and believe that the institutional model that has been guiding this system is not good enough. You know we can do better!

Don't let the task of making this change overwhelm you. This is our gift to you! We can't think of a better way to thank you for your work and commitment to citizens of this state that need us. As care givers and leaders, we hope and are strongly motivated to cast a vision for the people within this great state. The Welcome Home Project is an organizational guide to assist each of you to achieve a home. It is not necessary to invent your own model, which is a daunting task in and of itself. By sharing this kit, we are giving you the tools to make your own homes. From the beginning steps of developing a Steering Committee to the formation of your Neighborhood Councils, learning and planning circles with your residents and staff, every step along the way is laid out and thoroughly explained in each session. Please, come join us in this vision and this quest for a better life for those we care so much about as we embark on Chapter 2.

As mentioned, in Chapter 1, *every house is built on a foundation. It is your relationships with your residents that make this house a home.* As caregivers, you will also strive to maintain the home by creating and nurturing your relationships with those residents residing in the home. Maintaining the home is often the most important task you will have. You must constantly ask yourself, "Are we still a home?" Unlike the institutional model, which often views the resident as the greatest obstacle in this setting, in the home model your work and resulting joy will always revolve around your primary interest and goal in creating a happy home for and honoring each individual resident. In order to continue maintaining the home, you will be required to evaluate it on a regular basis. This is done by participating in the Neighborhood Council and weekly learning circles, as well as regular in-service trainings. We will focus more on these aspects of evaluation later in this book.

Despite being interested and willing to become a pioneer by starting the Welcome Home Project, you might be thinking that your facility and building is not conducive to such a transformation. But that's exactly what we love about our building and structures- ours is just like yours. Greenbrier is not perfect, nor is our building, but none of us can just start over by constructing a brand new facility. What you can do, and what Greenbrier has done, is create and maintain a real home, inside the structures and buildings you already have in place.

The value of our home and the vision Greenbrier has created is inspired from the Meadowlark Hills Kit based in Kansas. At Meadowlark Hills, everyone has a voice to make decisions and build stronger bonds between people for their household. In the curriculum guiding their work, you can find the following quote:

“We all know that our general policies and environment of the facility effect other people the we work with or that live here and that is why it is so important that we are all stakeholders in Home- the staff, the residents, their families, and community members. The only way we can do that to make solutions and impact our daily lives is if everyone’s voice is heard can we make informed decisions and build stronger bonds between people for our households. Nothing inspires confidence as well as an attitude of ‘We’re in it together.’” 10

10 Copyright © 2006 Household Matters, A Good Life Round the Clock, Manhattan Retirement Foundation d//a/ Meadowlark Hills Retirement Community: LaVrene Norton, MSW and Steve Shields, Action Pact Press: CD Disc.

As mentioned in the previous chapter & DVD sessions, a very vital aspect of the home model is the concept of learning circles. Obviously, the above quote reiterates this idea. The learning circle inspires all members of the home to take a leadership role. Some of the standing rules in learning circles include there being no tables or anything within the circle that blocks other’s views. No interrupting is allowed and there is also no crosstalk or talking to others in the circle who should be listening. For those that wish to pass their turn, this is always an option. In addition, the facilitator in a learning circle encourages the participants and regularly reminds participants of the rules to make the learning circle manageable and productive.

As you establish and hold learning circles, you will find that another significant feature of the home model is your designated household staff. It is imperative that you establish what each household staff member does as a part of the home. Staff members include the administrators who are now referred to as mentors, administrative nurses, and dieticians and social workers now termed life enrichment, nurse leaders and environmental guides under the new model. To determine who to place in these positions, you must determine which staff members fit best into your established homes. In some cases, when homes share a common living area you can create “sister homes” and staff can cover residents in both homes if need be. Each of these staff members participate in weekly planning activities and celebrations including the aforementioned learning circles as well as the weekly Neighborhood Council meetings. The Neighborhood Council initially begins as a Steering Committee when you first begin your research of the home model. As time goes on, you add additional staff including the leaders and guides to form the *Neighborhood Council*. *The purpose of the council is to support a rhythm into each of the homes; it is the heartbeat of each home.* The purpose of these meetings is to bring items and ideas to the mentors who then communicate back with various staff leaders to ensure that communication and change is spread into each home in an organized pattern. Neighborhood Council members also regularly participate in two hours of in-service training each month and Nurse leader participant in a daily stand up meeting between the shifts which will be described as we end Session 2 DVD.

As you begin to move forward into Session 2 DVD, you may still have many questions or fears on what to expect. With such a major transformation ahead, how can you provide quality care to all of the residents in your home? *First, begin by getting that institutional mindset out of your mind. Break down the entire home and begin considering the new homes you can create. Members of your staff must not provide care to all 90 or 100 residents in your home. Each team is only responsible for their designated home and the 17-24 residents in that home. The homes have the same staff working in the home each day, caring for and getting all the information needed to the residents. Staff is guided through this process before each shift in the stand-up meetings, through communication with one another and a wonderful tool called the grid.*

The grid is a tool used to log the choices made by the resident on the 'self-determination form.' The grid is placed in a designated staff room. No longer are there nurses stations, instead there is an area, similar to a break room, where all staff communicate to one another using the grid and other tools we will address in future sessions. The grid covers a wall and lists every resident and their room numbers in the home. There is also a sample Grid located in Chapter 2 tools that can be kept in a notebook. Helpful information is placed on the grid and updated as needed. A resident's typical schedule from wake up through bedtime, special needs such as dietary needs, medical needs, etc. are visible to all household staff here. Also listed on the grid are the residents' hobbies, interests, likes and dislikes. The grid is updated every 90 days or as needed by a significant change in condition or an expressed change by the resident. Aside from the grid, each staff room also has a communication notebook on hand. In this notebook is information on each resident, including self-determination and life enrichment forms completed with the resident. Also noted here are brief descriptions of the residents' day, including their activities and medical concerns. This helps staff to stay focused on the resident and keeps an open line of communication between all staff members. It also helps the staff to easily review past days when the resident is experiencing various changes while in care.

All of these materials assist the staff in the daily stand-up meetings which occur at the conclusion of one shift and the beginning of another. This time allows staff to further address what has occurred over the course of the day. In this session, you will see an example of a stand-up meeting and what occurs over the course of the short time staff can spend to update one another. Finally, you will see a tour of the facility at Greenbrier, including the Rose Garden Café. Being able to envision your building as you watch this tour can create some inspiring ideas and strategies. When you begin thinking that the task is too overwhelming, remember that using the institutional model causes residents to become disengaged and powerless because they're given no choice. Not only do residents suffer, staff is also powerless because every decision and schedule is being made for them without their input. As you set out to train the caregivers on these exciting changes in your home, never forget the pioneer you now are and the changes you can incite to improve the lives of so many others. We can do better.

## Session 2 Part 1 Dialog

*Again, I want to congratulate you for being leaders, illustrated by your commitment and dedication to build and to maintain your homes, for your residents, the caregivers, and the families. You know, your residents are so special. Have you ever really thought about what they've done, what they've accomplished? Some have been farmers, schoolteachers, pastors, government officials, nurses, doctors, business people, owners; also they're someone's parent, or spouse, maybe a sibling, grandparent, or a great-grandparent. They're very special and they deserve home. Let me ask you while you are sitting here in your circle, you can raise your hand or you all might decide you want to stand: How many of you have we taken care of one of your family members in long term care? My grandmothers, both of them, have lived with us; my mother and my dad had health circumstances arise where they needed 24 hour nursing and skilled care. I am so thankful for the grace and the kindness and the care that my family has received and you are heroes for what you do. And our residents are very special and they are someone's family.*

*We are all committed to this overall arching umbrella of home over everything we do, our jobs on the home, our chores, our services no matter what department provides it, the policies, the regulations, everything we do, we do it with this arch of home and adding to all of our jobs: the duty of a homemaker. You see now we look at our work in the organization we're at, through eyes and with a vision for home. When you come into the quote building, and you look down quote the hallway or enter into a room, you do not see things the same, you're going to see it through the eyes of home, because this building is someone's home or many peoples home. This hallway leads to a specific room that is their home. When you observe the interaction of residents or household staff together, you are observing a household family.*

*The rewards for building these relationships on your home is going to yield a greater satisfaction from everyone. It's going to build purpose and meaning because you are making such a difference in each other's lives. We are not going to be perfect, but we're going to strive (we're going to strive) to take our daily routines and work, our weekly, monthly, quarterly, annual, events, meetings, regulations, and we're going to build in what you already have the foundation of the home.*

*We're going to begin with the self-determination form, the grid, and the stand-up meeting. Designated Caregivers on the home must know the residents on their home and they're able to help maintain this through the self-determination form. This self-determination is a key upon moving in to find out what are the choices, what are their lifestyles. You will use this to work as a home and put these choices and plans onto a grid that we've developed. Now this self-determination form that you're looking at, you may already have one, you may want to just take this as a sample and make your own that fits your particular home and it will be part of when someone moves in and it will be filled out and from this information you're going to find out what their choices are: when they want to get up, when they want to be bathed, how they want to*

*be bathed, what daytime and evening activities they enjoy, do they need assistance, many things that you can look at as your looking at this on screen and reading.*

*We invented what I call is a grid and we take the self-determination information and we log it onto a grid. When we first started, we did it by the people when they wanted to get up, but we found out that when someone moves it just messes up the grid. So as you'll see on the grid, it's by resident room number and therefore it doesn't take as much time to maintain it. The grid is a visual tool and it is going to show the residents routine from the time they get up through bedtime and all the choices that they have in living out their day.*

*As you look at your grid that you're going to make or if you want to use a pattern like ours; it's going to tell about the level of assistance they need, whether it's in the dining area or its in transferring or its in bathing, it's going to tell of products of what size they were if they have incontinent products or glasses or hearing aides, it's going to tell of the activities they like and if there's things that they enjoy doing independently in their room, maybe what channel of shows or what are their special shows or if they like to call certain people at certain times. The grid is kept in our staffroom; we chose to move all of our staff onto the homes and no nurse's stations. However, I know that some of your facility layouts may not be able to accommodate that, that's when you can use this and put in a notebook: remember HIPPA, remember privacy and the need to know.*

*The grid is updated as needed or during a significant change or when a resident says "Hey I don't want to get up at this time anymore; I want to get up at this time." And we change it. It's a wonderful visual of the entire work of the home based on all the residents' choices and remember your home is a set number of residents with a designated staff, but the guide, the grid is such a visual guide to the total work on the home. It's also so wonderful when you have a new household member come in to orient them, everything they need to know is right there on that grid. It's a wonderful supervisory tool for the nurse leaders, the mentors, the life enrichment, the household nurses, to ensure that the staff and everyone is fulfilling the choices of the resident.*

*These materials that we have just talked about, the foundation of the home with the self-determination, the grid, the staff hold area, where everyone can have access to this information, it's also important and it adds to what we call the stand-up meeting. I remember in 2004 and years and years before that, one of our greatest challenges was communication between shifts and also with that communication is follow up from one shift to another. So this is very important, this is just our version, but you need to have your own and fit yours, but we have stand up meeting and every home as we talked about is set up the same, every stand up meeting uses this form, and every household nurse is trained and a nurse leader is in one the stand-up meetings every day to ensure that we're maintaining this standard. Because if you had to have someone go to another home, every home is set up the same, it's the same process, the same grid, the same stand-up meeting and it just helps with that continuity even if they have to fill in to help another household because of an emergency. So you can see on the stand-up meeting, it involves*

*reports from all kinds of things that you're going to think is important, we put on their falls, any labs outstanding, any isolation infections, just reminding people of residents that are having extra pain or that need thicken liquid, special assignments are given out. And we also have a buddy system, just reminding everyone to visit with your buddy during the day and what's going on in life enrichment, different things like that and you can make yours fit your organization, this is just a sample for you.*

*It's so exciting when you start doing your stand up meetings, you start doing your planning meetings, all the parts of the foundation, because what you are going to find is leadership just emerges. I still, after this many years, am amazed at all of our leaders; everyone's a leader and it just comes out, because they have their observation that they can share, you have a situation at stand up or challenge. You discuss and everyone has ideas and a lot of times, their ideas are the best ideas: the people in the learning circle. So you are going to find this is very rewarding and it's going to make your work and your communication, and the quality of your care well done.*

*I began running around in 1971 as a kid and at that time, one of the names for nursing home was called rest home. And I always have valued the fact that even as a child this was the residents' home, I knew they needed nursing care, because I pretty well worked about every job growing up in nursing homes/rest homes. But I want to just say a word of encouragement to all of you that I know I would have never been able to accomplish the work that we've done creating the welcome home project, a guide to organize and maintain home without the inspiration and without the education that we did in researching through Meadowlark Hills.*

*This is a perfect illustration of the excellence of their materials and this is leadership versus management and I think you can see as I talk about how leadership emerges. Under management, and this is just exactly the way from when I began back after my masters from the 80s to 2004, this is exactly the way we did business, is it was a management versus leadership. Management: they plan, they budget, they decide everything, but leadership sets direction and that's what your household staff and residents are doing. They're setting direction; they are developing the vision of what they want to see accomplished in the relationships, in their celebrations, in their care on the home. Management: even though we need this, we have to have our policies and our organizations, but they, management is very controlling and takes full responsibility of all the staffing. Leadership means that we align with people, we communicate with people, we need to tell people- if you're scheduled and you just decide you're just not going to show up, it hurts. It hurts all the other caregivers; it hurts the residents, so we create leadership and cooperation with each other. Management: they just control and problem solve. I remember sitting in an office with groups of people trying to decide everything and then doing a memo and sending it down the chain, but leadership: they're motivated and they're inspired to help be creative and coming together and work out solutions. You see... this is management (on*

*top) and this is leadership bottom) and we are turning it upside down. Don't be afraid if you're an owner or administrator, you're not going to lose any control. You're going to have the set policies, you're going to have your regulations, but you're just going to see leaders emerge in every person that works in your organization.*

## Session Two Part Two :

### Foundation of the Home: Neighborhood Council

*Every house is built on a foundation. It is your relationships with your residents, families, other household caregivers that make this house a home. As caregivers, you will also strive to maintain the home by creating and nurturing your relationships with those residents residing in the home. . Maintaining the home is often the most important task you will have. You must constantly ask yourself, “Are we still a home and maintaining the basic foundations of the home?” Your work with the residents, household member will bring every member lead to purpose, meaning, dignity and joy. The work of everyone will always revolve around your primary interest and goal in creating a happy home for and honoring each individual resident and household caregiver – member. In order to continue maintaining the home, a key foundation of the home is: the Weekly Neighborhood Council.*

1. We have a weekly neighborhood council and the purpose of the council is to spread information to homes from the entire organization and vice versa
2. It also gives opportunity to share success stories and ideas that other homes might want to use
3. Focuses on quality matters that help maintain the home through various reports

We broke out reports weekly and you may choose to follow this pattern or do whatever you are currently doing.

Week 1: Everyone turned in the QA's for his or her jobs and departments

Week 2: We review the café, Move In's and Household \_\_\_\_

Week 3: Discuss by home and total Quality measures such as infections, skin, and falls on the homes

Week 4: Break out session where go to the home and check on the designated staff, the stand-up meetings, the various parts of home

Specific home challenges or issues are taken care of on each home with Mentors, guides following your organizations policies.

## Session 2 Part 2 Dialog

*We're sitting here with part of our neighborhood council, all of these individuals were part of our steering committee and they are going to tell you exactly what their job is, but what their role on the home is and this is neighborhood council, one of our foundations for home.*

*Gayle Thorpe, HR Director/Mentor Rogers Home*

*"I'm Gayle Thorpe and I'm the HR Director at Greenbrier and I'm the mentor of the Rogers Home and each mentor has special things that they do every day on the home. I go down in the mornings and I go in the afternoons (mentor rounds). The staffing is my main job at Greenbrier so I go down first of all and check the staffing. The staffing is important because if there's not staffing, you don't have the help on your home that you need, the adequate help (smart staff/willingness to help). The staff sometimes need some help, like maybe making a bed, maybe emptying trash, but it's our job, even though we have an office, the staff need to know that we're going to come out and help them if it's needed so I go down and I've made beds, I've emptied trash, and I've done a few other things on the home and it's great to be able to just be there and be a help mate to them. Then I check the activity board to see what we're going to do through the day, whose doing it, what are the times that we do it and then I go down at meal time and I help push the residents if they need to the dining room, by the way, the home I'm on has its own private dining room and that's a fun thing for them. They get to be served right there in their home. Then in the afternoons, mornings, and nights we have a stand-up meeting and the stand-up meeting lets the staff that's coming on know what the staff that's going off has done for the day. That's important for you to know what's happened with the residents, it's important for you to know if there's been any serious problems through the day, anyone sent to hospital, those things are important for that oncoming staff to know. Then on Thursdays we have a planning meeting, that's a fun meeting, that's a meeting where everyone gets to volunteer; "what do you want to do for the next week?" and it's fun. You would be surprised what your staff will come up with that they can do. You know creating relationships is a big job of mine. When you create a relationship, you are creating it first with your staff, then with your residents and then with your families and that's important. One more thing before I end my session here is I got to tell you about a little lady on the home that I absolutely love. She wears hats all the time and I was going down the hall one day and I said "I just love your hat that you have on, you look darling in the hat" and she said "I have on two ya know" and she did. She had on a hat with a big brim and a cowboy hat and I said "you know what, I wish I could wear hats and look just like you do" and she said "well here, you can just try mine on." So here I am with these two hats on and she said, "You need to take those off, you look terrible in hats." So I just love her to death and she's been a special lady in my life and I have really enjoyed her. So I love being a mentor, I love dealing with the residents, and I love dealing with the staff, it's a great job."*

*Denise Logan, Activities Director/Life Enrichment Guide*

*"My name is Denise Logan and I am the activity director. My duties on Brooks and Murray home is life enrichment guide. I'm in charge of the small gatherings on the homes in the mornings. We help guide the household staff in creating and maintaining relationships on the home. We observe staff and the resident interactions; we deal a lot with the nurse leaders and the mentors of the home. We visit families with the family guides and we are in charge of the large community events in the afternoons. The weekly planning circle, which is a circle where we meet with staff and residents and the residents choose the activities that they would like to have*

*for the following week. We're also involved with neighborhood council and we also have a role in our monthly in-services."*

*Barbara Tate, Dietary Manager/ Nutritional Mentor*

*"I'm Barbara Tate, I'm the dietary manager for the Rose Garden Cafe. I'm the nutritional mentor for the Murray/ Brooks home. I have a buddy that's on Murry/Brooks, I visit with her daily. I attend the planning circles every week where we plan activities with residents and staff. I attend resident council one day a month and that's where we have a special of the day and the residents help me decide what they want on the menu for the month. We have Neighborhood Council every week and that's where we discuss weight loss, weight gains, skin breakdowns, how many residents are eating in the rose garden cafe, how many people need assistance with meals, that's all discussed monthly in that meeting."*

*Glenda Schumacher, Environmental Guide*

*"I'm Glenda Shumacher and I'm the environmental guide. I have a home and its Rogers and I just love the residents. I love them all, but I had a special one that I fed in Rogers, but she has since left us. I would help in the dining room if they needing feeding in there. My husband and I teach a bible study on Wednesday night and we have a resident that I have kind of become fond with so we come early enough that we eat with him and he really enjoys it. I think he even looks forward to it probably because I don't think he has too many, but we really enjoy it. We would love to have the other residents come eat with us to."*

*Sheree Jones, Employee Coordinator/Mentor*

*"My name is Sheree Jones, I was the employee coordinator and Autry/Guthrie mentor. Dido on a lot of what Gayle said, the mentors responsibilities were to help on the homes as much as they could and in any area possible be it serve meals, make beds, take trash, help with activities, anything they needed, that's what we did."*

*Lori: "On the learning circle, you have a right to pass, so I'm passing."*

*Jim Thorpe, Administrator/Mentor*

*"I enjoy every part of my job from dealing with residents, families, even state, I like it all and what I really enjoy is talking with the families because I do the admissions (move-in) too and I enjoy meeting the families at first and telling them what we have to offer, because Greenbrier has a lot to offer. One of my jobs is to make sure our mission statement is followed and that is for our residents to have a meaningful lifestyle and we believe in that, but we also believe in another thing. We believe in home. Simply put that is everyone has a right to home when they come into the nursing home. You know you think about it, those folks have left everything and when they come into a nursing home, you know it used to be going on 26 no 27 years ago, when we would bring the resident in, they would have to make changes in their lives in order to fit into our schedule. Boy has that turned around, hasn't it; everybody would agree that we are a whole lot more like home then we were when I started 26/27 years ago and I'm thankful for that because I see the results in these little folks that we care for everyday that we bring out that mission for a meaningful lifestyle for every single one of them in the home. I've got a lot of roles, I've got a lot of duties, one of the duties that I dearly love is to go down, i used to be a mentor on rogers but now I'm a mentor as the administrator to each one of those homes and as a mentor and as you*

*folks serve on the homes beyond your role, you have a mission to support that home and what a support I'm looking at. I talked to a person this morning and i said what is home ot you? and they said Jim i look at it a lot different probably than most in this home because if you remember they said i was under a bridge living as a home. i said what was that like. They said it was cold, it was dark it was fearful and i felt very hopeless and i thought my life was coming to an end. They lived two years in Dallas homeless they found a church that would let this person stay on the back steps, and once in a while would be able to come in and clean up and do the things that a person needs to do. and then they moved to Oklahoma City and was still homeless and a nursing home found out about the person and went and picked them up and moved them into the nursing home. A few years later, three years later I received a call from the VA saying this person is homeless but now they are in a nursing home but would like to move to Enid and Mr. Hackett and I went down and talked to them. She had a selection of three different homes, they chose Greenbrier. This morning that person told me that was the biggest effect on her life she ever had, because she was not afraid, she had food, she had a place to put her head, and she felt so safe and was glad to have us.”*

*Brandi Davidson, Current QA Nurse, Original Nurse Leader, 16 years*

*“I've been in many roles, but today I'd like to speak of nurse leader role. As a nurse leader, we are on the homes for at least four hours a day monitoring that we are giving safe care and the best care that we could possibly give, following policies and procedures, also being a role model and education staff as we need to. Were available to families and residents at all times for those issues that may or may not come up. We try to take some of the load off of the charge nurse on the floor by inputting orders, holding monthly lab for them and the residents, assisting with physicians' clinics, things like that. We also attend stand up at least once a day, sometimes twice a day to maintain and make sure we are following the stand-up report that everyone is given a duty on the home, to ensure adequate care. Also if a staff member on our homes should call in, we try to step in and fulfill that role so we can continue the continuity of care on that home. Also during stand up, we have a form that we used called the stand-up agenda where everyone is assigned their duties and we make sure that everyone is performing those as assigned. We also have a buddy that we visit daily and some of us are known for going out and buying special goodies for them, because they can't just go out and buy those things for themselves.”*

*Syd Smith, Registered Dietitian*

*“My name is Syd Smith and I am the Registered Dietitian of Greenbrier Village and my role is to not only do assessments and see that we are following federal and state regulations, but i see my role as the liaison between nursing staff and dietary staff and everything that goes into the environment, everything that goes into the care of providing nutritional care into that person so I enjoy knowing the staff in the rose garden cafe. I also try to develop relationships with the staff on the homes, families so that I know more about that resident, if their having a problem, they are a great resource and hopefully I'm a good resource for them. I see myself as on the home a nutrition mentor, my assignment is rogers home as well as the skilled nursing unit and I attend the planning circle, I go down at meal time and check to see how the meal is going, try and look for things that I feel like we need to improve on or if there are specific needs that the staff recognizes or the residents mention, then we try to address those quickly and get those taken care of. I do in-service training with the staff as well and I have a buddy on the rogers home and I enjoy visiting with her, checking with her, see hows shes doing and helping with the large*

*community events and just trying to make the food service that we provide in the meals, not only just food going into their mouths, but an experience, one that is like home and that they will enjoy and when we do that then they are healthier from a nutritional stand point and are happier.”*

*Rheadonna Lorenz, Activities Professional/Life Enrichment Guide*

*“I started here as a CNA and I got bumped up to a CMA then restorative aid, now I'm in activities and my main role on Autry/Guthrie home is I'm their life enrichment guide. I try my hardest to not only enrich the lives of our residents, but also our caregivers on the home, making sure they know their buddies, know the families, and always making sure that a birthday is never forgotten. We plan fun events, we're always in competition with Murry/Brooks, all the time. We have small gatherings on the homes that the residents choose what they want to do and sometimes i don't get all of the participation that I would like, because sometimes they just don't want to do anything, but we just try to keep going and encouraging them to come out, have a good time and then we do the big community activities in the afternoon and they really like that because for them its like a big block party where they can all get together and have fun but I make sure that the staff need anything, I'm right there to help, kind of like Gayle and Sheree, you know I can help make a bed and do a lot of things on the homes, but we just try to continue to enrich their lives every day.”*

*You have heard from the charter members, mentors, and guides; this is not the entire neighborhood council, because your neighborhood council will have a poster which will show all of these people are part of the neighborhood council so each home or sister home has their own mentor, nurse leader, life enrichment, nutrition, environmental and then there's nursing support; people that are MDSs or QA or skin or pain, those nurses are also assigned and other support teams like receptionists, if you have a NAHCA coach, or other HR people; everyone is going to be a part of a home.*

*As you have heard many of them say; basically the neighborhood council: the mentor, nurse leaders, life enrichment, they will have daily things on the home and then of course everyone who is on a home will also strive to be at the weekly meetings, be a buddy, be a part of a small gathering or the celebrations and the neighborhood council, and in-service.*

*So as you listen to this, you are probably thinking, "How am I going to do this with my job?" But this again is now a part of your job, because you being involved on the home as part of the foundation of the home as neighborhood council is going to reduce a lot of the challenges, the turnover, the problems that you had before starting the home model.*

*This neighborhood council, we meet weekly and the purpose of the council is:*

*1. To spread information to and from the home to the neighborhood council and visa versa.*

*It is so important that we take information, success stories from the home and bring them to the neighborhood council. You heard Rhea and Denise talk about some of the competition, same thing with nurse leaders, they might have competitions on who has less falls, who has less skin tears, or who has less turnover. It brings great ideas and then they can take that back onto their home.*

2. It also focuses on quality matters that help us maintain the home. For instance we have a weekly report and these reports are what keep the heartbeat of the home going, because these neighborhood council members, coming from their homes into one group bringing about these four weeks of reports keep the maintenance of the home going. Without this, the home could easily fall apart.

#### *Week 1*

*So the first week, everyone turns in a QA for their particular job, because if you don't have it listed out what needs to be done so that the work/services are completed, you may forget something. So you are your own organization may have QAs for each person.*

#### *Week 2*

*We review on the second week the café report that Barbara was telling you about: who is eating in the café, how many people need assistance, how are we doing on the staffing, do we need to put through more certified feeds, that type of thing. Also the life enrichment are going to go over who is moving in, who they are, getting to know them, their interests.*

#### *Week 3*

*The quality assurance measures are printed for each home so we know what is going on with the residents on each home.*

#### *Week 4*

*Each group goes down to their home and they go down for the purpose of supporting the staff so the mentor, the life enrichment, the nurse leader will say, "Is there anything we can do to help you?"*

*Yet while they are there, as you can see on this form, their also going to be looking at: is the grid updated? are they maintaining the stand-up meeting? Do they have a schedule of the life enrichment events? Are there any safety notices that aren't posted that need to be posted? They're not going to do it in a survey mode, but in a support mode.*

*We have developed from this neighborhood council, this is a sample of a form that we use that there are times when more support is needed and so we have a home schedule where the mentor, the nurse leader, they can write down a day that this might be an okay day if someone needs me on the home because someone is very sick or they have several people moving in, we will come down and help just as you heard before, passing ice, emptying trash, doing a small gathering, helping serve a meal, whatever it might be, we're there to do that.*

*And I think you'll find as we go now to our second learning circle, I want them to give you a testimony, because each of them for ten years now have been doing this. The response from the residents and the families, and the staff by seeing them on the home for support.*

#### *Learning Circle Two*

*Brandi Davidson: "The staff, families, and residents all appreciate the fact that we are out on the home, it is like one big family, we all work together to make it successful, they feel like we have an open door policy but instead of having to come to our office, we are out on the floor so*

*they can come to us with anything at anytime. We also enjoy it, because i know in particular I've had a family come to me that happen to move their family member from another facility and they were in shock seeing us all out there and they think its really neat that were all out there working together."*

*Syd Smith: "What I notice when we have gatherings or the staff is together and families are there is that there are relationships that have been built and there's a comfort level like Brandi mentioned that no matter what the situation is, whether its good or bad, they realize that we truly care about their loved one, that we have worked to develop those relationships, were working always to provide excellent care and when we do have situations that develop that we work hard to do our best to try in resolve those in a way that everyone is pleased with and I know for myself when i go down and say it's meal time for the staff, they know that I'm not there just observing but there to participate and if they need help in any way, I'm willing to step in and help them and its not just i see them as caregivers, we are all caregivers."*

*Rheadonna Lorenz: "We are all there to take care of the families and if the nurse is in a situation or if shes behind a closed door for something, they know they can come and talk to us, you know or help if mom needs help or dad needs help and just helping out with anything."*

*Gayle Thorpe: "One of the things I see is the institutional environment versus home and it was much different ten years ago versus today and the home, the families feel comfortable asking anyone questions that they see out on the home, that's what's so neat about it. Actually, we are one big family, we are staff, residents, and family and that to me is home and I think they love it."*

*Denise Logan: "I think the biggest thing I have seen in the 14 years that I've been here as the life enrichment activity director is with all of us pitching in on the home and doing certain duties like if the CNAs need our help with anything- passing ice, making beds, whatever, it has freed everybody's job up enough to where there's many times CNAs have lapse time, there's not a lot of lights going off or anything, they will even help with our activity and they enjoy it and the residents love it because there's life enrichment, there's CNAs, there might be a med aide, you know whoever. We come together as a family in our activity program."*

*Barbara Tate: "We have great re pore with the residents in the dining room because they see us out so much and working all the homes and so they feel like they can come to us for anything and I just love it, its family."*

*Glenda Schumacher: "What i see is the closeness that has brought the families and residents together and before we had the home concept, it was like you didn't know too much about the residents because you didn't help with it , but with this concept we are really getting close and what I have is when they move in, we'll go to do something they'll go "oh, you do that? I thought that was something we had to do", and were like no, well help you with it and take care of it and I've always had compliments from the families is that the home smells good."*

*Jim Thorpe: "You know I don't know if you guys realize it or not, but sitting here, there's well over 150 years of experience in everybody in this group, well over that. Again, I go back to when*

*I first started where I knew I could some things in activities, I know that now. In dietary, I know some things I can do in dietary and enjoyed. Almost everyone here has an office, but your office time is cut big time so you can go down and do the things that you enjoy doing, that you were meant for, out of your heart. When you get one on one with a resident and your heart meets theirs can you imagine what that's like for them. I have families come to me and say, "You know Syd talked to me the other day, I didn't know who she was until she introduced herself and started talking. Glenda in housekeeping and laundry, she mixes with the people and that's wonderful. That causes my job as the administrator the pressure to go way down, because everyone of you takes that pressure off."*

*Break Out Session*

## **Session 2 Part 2 Break out session Instructions:**

- 1. Go over list of interviewable residents and have each staff sign up for a resident they know and do self-determination. (We do this according to our buddy list that is already established for the residents and staff)**
- 2. Nurses can help finish up during the week**
- 3. Begin building your grid: stat with those who want to get up earliest as that shows how the day on the home will start, continue in order of that time. (Tip- We update the grid in the daily stand up meeting when applicable. To have the quality assurance, our Nurse Leaders review weekly on the grid during one of the daily stand up meeting to ensure accuracy and changes.)**

The Neighborhood helps keep the heartbeat of the home in rhythm.

The Neighborhood helps illustrate how we can get the 'institutional' idea out of our head by "how can we do this when we are licensed for \_\_\_# residents?" How we can do this so individually for the residents living out their day with their lifestyle pattern they choice? You do it with one home not the entire building with one designated staff trained and following the foundations of the home such as the self-determination form and putting the information for the residents onto a home grid. Your staff will have a set number of residents and taking care of the same people and having the information you will get people to the café or taken care.

Quote: " We all know that our general policies and environment of the facility affects us, however each of us affect other people that we work with or that live here and that is why it is so important that we are all stakeholders in Home, the staff, residents, family and community. The only way we can do that is to make solutions and impact our daily lives is if everyone's voice is heard." Copyright 2006 Manhattan Retirement Foundation  
aba Meadowlark Hills Retirement Center Laverne Norton MSW and Steve Shields,  
Active Pact Press

Sample Self-determination form  
Sample Grid  
Sample Stand up Agenda  
Neighborhood Council Weekly Reports/Agenda  
Community Mentor Weekly QA  
Willing to Help Program

Chapter 2 Part 1 will include: Self-determination guide, Grid

Chapter 2 Part 2: Neighborhood Council weekly reports, mentor weekly QA, Pattern of home support, A poster of all home support.

Homework:

Self-determination

Grid

Stand up meeting

**Mentor Weekly QA**

**Name:** \_\_\_\_\_

**Home:** \_\_\_\_\_

**Week of:** \_\_\_\_\_

DAILY	Mon	Tues	Wed	Thurs	Fri
10:00 a.m. Rounds: Check on Home, Smart Staffing Protocol, Assist as needed 6/2 shift					
Check at Meal Time and assist with residents as needed					
1:45 p.m. Check activity board, help assist with taking residents as needed to afternoon activity					
2:00 p.m. Rounds: Check on Homes, Smart Staffing protocol, Assist as needed 2/10 shift.					
Attend a Weekly Stand up Meeting at 2:00 p.m.					
1:45pm Thursday Planning Circle					

**\*While on rounds, check staff attitude, uniform, name tags**

**\*While on rounds, check residents appearance including facial hair, clothes, nails, etc.**

**How do things look on the home?** (Lifts, wheelchairs, furniture, tears on anything, chipped paint, etc.)

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Make a poster that is updated monthly at Neighborhood Council week four of the overall Home support:

**Home Resource & Support**

\_\_\_\_\_ Home / Sister Home

- Mentor**
- Nurse Leader**
- Life Enrichment Guide**
- Nutrition Mentor**
- Environmental guide**
- Nurse support**
- Support team**

**Home Resource & Support**

\_\_\_\_\_ Home / Sister Home

- Mentor**
- Nurse Leader**
- Life Enrichment Guide**
- Nutrition Mentor**
- Environmental guide**
- Nurse support**
- Support team**

**Home Resource & Support**

\_\_\_\_\_ Home / Sister Home

- Mentor**
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- Nutrition Mentor**
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- Nurse support**
- Support team**

**Home Resource & Support**

\_\_\_\_\_ Home / Sister Home

- Mentor**
- Nurse Leader**
- Life Enrichment Guide**
- Nutrition Mentor**
- Environmental guide**
- Nurse support**
- Support team**

Everyone is expected to participate in home, no matter their jobs; which translates to going to the weekly planning, the home celebrations, having a buddy on the home, in service training and if applicable part of neighborhood council . Others have more daily duties on the home:

**Mentor Duty:**

- See new form.. daily items

**Nurse Leader:**

\_\_\_ Hours on the home daily supporting sister home nursing care

Direct and watch interaction of staff with residents

Watch interaction of home nurse with C.N.A.

Daily stand up between 6-2 and 2-10

Planning meeting

Neighborhood Council

**Life Enrichment Duty:**

Stay on the homes for small gatherings, documentation

Guide the Household Staff in creating and maintaining relationships with value of Home

Observe staff/resident interactions...any follow up please communicate to Nurse leader or mentor

Visit families with Family Guide.

Large events in afternoon in Community

Weekly Planning

Weekly N.C.

In-service

**Home Support..... PEER MENTORS**

The Home support will be doing a daily visit with their assigned Buddy

The Home support will be at the weekly planning meeting

**The Home support will be at the in-service**

Times when more support is needed on the homes because of vacations, move in's, emergencies:  
 Write out who is available to go support the staff whether it is passing ice, emptying trash or doing the  
 small gatherings, helping with meals or if certified to feed can help or if nurse can help even more:  
 your organization will decide.

For Week of: \_\_\_\_\_ or specific day

Home: \_\_\_\_\_

<b>Home Team Daily Floor Time</b>	<b>Mon.</b>	<b>Tues.</b>	<b>Wed.</b>	<b>Thur.</b>	<b>Fri.</b>
<b>Mentor:</b>					
<b>Nurse Leader:</b>					
<b>LE Guide:</b>					
<b>Nutrition :</b>					
<b>Environmental Guide:</b>					
<b>Nurse Rep:</b>					
<b>Support:</b>					
<b>Support:</b>					

## **Peer Mentor Duties:**

### **Welcoming**

- 1. Greet the new orientee & introduce yourself**
- 2. Give welcome bag with nametag**
- 3. Give NAHCA paperwork and explain what NAHCA is and the benefit to C.N.A.s and C.M.A.s**
- 4. Explain career ladder and relate importance of in service, work attendance and distance learning**
- 5. Obtain password from IT for Electronic Medical Records**

### **Orientation**

- 1. Introduce mentee to rest of staff on the home**
- 2. Acquaint the mentee in with areas for supplies, bathing, laundry, biohazards, trash disposal**
- 3. Provide explanation of other departments, titles, and what they earn in terms of overall operation of the facility**
- 4. Show orientee how to order meal**

### **Training**

- 1. Familiarize orientee with care plans for residents and introduce to each resident on home**
- 2. Use training skill checklist to demonstrate proper care in areas of incontinence care, use of lifts, assisting with feeding, infection control, oral care, privacy, medication pass (CMA) , pain observation**
- 3. Observe mentee in above skills and reteach if necessary**
- 4. Coach mentee for increased efficiency**
- 5. Explain care center's policies and procedures**
- 6. Show mentee how to access NAHCA website to do distance learning**
- 7. Show mentee how to access Electronic Medical Records and chart**

### **Transitioning**

- 1. Ensure mentee that he/she is well supported and they can come to preceptor for advice, suggestions and help (give contact information)**
- 2. Check up with mentee for 90 day period to ensure they are successful in their job and feel confident**
- 3. Fill out Preceptor Success Journal and turn in to in-house coach**
- 4. Have mentee fill out Preceptor Evaluation and turn into in-house coach**

# **Casting a vision for “Welcome Home Project”**

**Self Determination Form****Resident** \_\_\_\_\_**Home** \_\_\_\_\_**Room #** \_\_\_\_\_

1. Do you wear dentures? \_\_\_\_\_  
hearing aides? \_\_\_\_\_  
glasses? \_\_\_\_\_
2. What time do you want to get up? \_\_\_\_\_
3. What time do you want to receive your morning medications? \_\_\_\_\_  
Evening medications? \_\_\_\_\_
4. Do you prefer your medications to be crushed or whole? \_\_\_\_\_
5. What days do you wish to be bathed? \_\_\_\_\_
6. What time do you wish to be bathed? \_\_\_\_\_
7. Do you need assistance bathing? \_\_\_\_\_
8. What daytime and evening activities do you enjoy?  
\_\_\_\_\_
9. Do you wear incontinent products? \_\_\_\_\_ Pull up/size \_\_\_\_\_ Brief/Size \_\_\_\_\_
10. Are you able to transfer by yourself? \_\_\_\_\_
11. Does the nursing staff use an alarm system on you? \_\_\_\_\_
12. Do you like to take naps? \_\_\_\_\_ Time \_\_\_\_\_
13. What time do you like to go to meals? Breakfast \_\_\_\_\_ Lunch \_\_\_\_\_ Dinner \_\_\_\_\_
14. Are you able to walk or do you need a device or person for assistance?  
\_\_\_\_\_
15. What time do you like to go to bed at night? \_\_\_\_\_

Attachment # \_\_\_\_ The Grid

Resident	Dentures, Hearing Aides and Glasses	Time Up 6-2 Dressing Assist	Morning Med Times Crush or Whole	6-2 Bath Time Level of Assist	Activity Likes 6-2	Continance and Supplies used	Transfer Ability Alarm Use
Rm#							
Rm#							
Rm#							
Rm#							

Nap Times	Meal Time Preferences	Ambulation And level of assist	Evening Med Times Crush or Whole	2-10 Bath Time Level of Assist	Activity Likes 2-10	Evening Shower Time	Bedtime Preference

# Appendix 7a: Daily Stand up Agenda

(Sample Stand up Agenda: use as a beginning point for  
your QA care & communication daily )

6:15 a.m.

**STAND UP – SHIFT CHANGE REPORT/ASSIGNMENTS**

Date: \_\_\_\_\_

**Report on Falls:**

**OUTSTANDING LAB RESULTS:**

**Isolation Review:**

**Report on Infections:**

Skin Report: Assessments/Assigned

**Thicken Liquids:**

**Pain Report:**

**STANDUP CIRCLE/ASSIGNMENTS**

#1 HOUSE **ASSIGNMENTS** **(Name)** **Task Assigned:**

***baths, feeding, ice, shaving, trash, books, catheter, batteries***

NURSE \_\_\_\_\_

\*CMA \_\_\_\_\_

CNA \_\_\_\_\_

CNA \_\_\_\_\_

HOUSEKEEPER \_\_\_\_\_

\*new employee \_\_\_\_\_ Peer Mentor \_\_\_\_\_

Dietary Orders: Meal orders for kitchen. Breakfast \_\_\_\_\_ Lunch \_\_\_\_\_

#2 LIFE ENRICHMENT ASSIGNMENTS Remind of Buddy Visits \_\_

\*new resident moving in: \_\_\_\_\_

Small gathering on home: list event \_\_\_\_\_

Community event: Time & Place \_\_\_\_\_

**Learning Circle: Decisions/Questions**

**ENCOURAGE STAFF TO USE THEIR COMMUNICATION BOOK**

**ASK FOR VOLUNTEERS FOR SCHEDULING NEEDS 6-2, 2-10**

**\*Restock med. cart at end of shift.**

2:15 p.m. Date \_\_\_\_\_

**STAND UP – SHIFT CHANGE REPORT/ASSIGNMENTS**

Report on Falls:

**OUTSTANDING LAB RESULTS:**

Isolation Review:

Report on Infections:

Skin Report: Assessments/Assigned

**Thicken Liquids:**

**Pain Report:**

STANDUP CIRCLE/ASSIGNMENTS

#1 HOUSE **ASSIGNMENTS** **(Name)**

**Task Assigned:**

*baths showers, feeding, ice, shaving,*

*trash, books, catheter, Evening Snacks*

NURSE \_\_\_\_\_

\_\_\_\_\_

\*CMA \_\_\_\_\_

\_\_\_\_\_

CNA \_\_\_\_\_

\_\_\_\_\_

CNA \_\_\_\_\_

\_\_\_\_\_

Dietary Orders: Meal orders for kitchen.

Evening \_\_\_\_\_

\*new employee \_\_\_\_\_

\*Peer Mentor \_\_\_\_\_

#2 LIFE ENRICHMENT ASSIGNMENTS

Remind of Buddy Visit\_\_

Small gathering on home: list event \_\_\_\_\_ Community event: Time & Place \_\_\_\_\_

\*new resident packet \_\_\_\_\_ \*new resident family packet \_\_\_\_\_

**STAFF TO USE THEIR COMMUNICATION BOOK/ ASK FOR VOI. FOR SCHEDULING**

**NEEDS** \*Restock med. cart at end of shift.

10:15 p.m.

**STAND UP – SHIFT CHANGE REPORT/ASSIGNMENTS**

\*new employee \_\_\_\_\_

Peer Mentor \_\_\_\_\_

Report Falls:

**Thicken Liquids:**

**OUTSTANDING LAB RESULTS:**

**Pain Report:**

Isolation Review:

**Report on Infections:**

Skin Report: Assessments/Assigned

STANDUP CIRCLE/ASSIGNMENTS

#1 HOUSE **ASSIGNMENTS** **(Name)**

**Task Assigned:**

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_

*Wheelchairs, pass ice, clean ice cart,, Books, clean combs and brushes*

## Leadership v. Management

In creating an agenda:

<b>Management</b>	<b>Leadership</b>
<u>Planning and budgeting</u> – establishing detailed steps and timetables for achieving needed results and then allocation the resources necessary to make that happen.	<u>Establishing direction</u> – Developing a vision of the future often the distant future and strategies for producing the changes needed to achieve that vision.

Developing a human network for achieving the agenda:

<b>Management</b>	<b>Leadership</b>
<u>Organizing and staffing</u> – establishing some structure for accomplishing plan requirements, staffing that structure with individuals, delegating responsibility and authority for carrying out the plan, providing policies and procedures to help guide people and creating methods or systems to monitor implementation.	<u>Aligning people</u> – communication the direction by words and deeds to all those cooperation may be needed so as to influence the creation of teams and coalitions that understand the vision and strategies and accept their validity.

Execution:

<b>Management</b>	<b>Leadership</b>
<u>Controlling and problem solving</u> – monitoring results vs. plan in some detail identifying deviations and then planning and organizing to solve these problems.	<u>Motivation and inspiring</u> – energizing people to overcome major political, bureaucratic and resource barriers to change by satisfying very basic, but often unfulfilled, human needs.

Outcomes:

<b>Management</b>	<b>Leadership</b>
<u>Produces a degree of predictability and order</u> and has the potential of consistently producing key results expected by various stakeholders (e.g., for customers, always being on time; for stockholders, being on budget.)	<u>Produces change often</u> to a dramatic degree and has the potential of producing extremely useful change (e.g., new products that customers want, new approaches to labor relations that help make a firm more competitive.)

11 Copyright ©2006 Action Pact, Inc. LaVrene Norton, MSW, Living and Working in Harmony Training Guide for Self-led Teams. A component on Household Matters, A Good Life 'Round the Clock." Pp 14.

## Appendix 5c **Weekly Neighborhood Agenda & Reports**

Rhythm of Neighborhood Council..... is to teach and promote household leaders, the home and effective quality assurance. The purpose of the council is to bring all the homes together to communicate with each other events, move in's and successes on the home. It serves also to hold everyone accountable for maintaining their QA's and the home tasks. The third purpose is to spread information for the entire community from the council to each home so that true communication be completed.

The Neighborhood Council is not the place to air any problems or challenges going on in a particular home unless they have found a solution that can help other homes: those type of situations should be handled on the home according to your policies but with the Home mentor, guides and the appropriate household staff that should be involved in the learning circle to solve or according to your policies a private conference.

Week 1: Monthly QA report turned in by all Neighborhood Council

Week 2: Rose Garden/ Dining Report  
Life Enrichment Report/ Move In review/report  
Report new resident/family welcome/packet & celebration

Week 3: Quality Assurance reports :  
Hand out Sheets for each home to put on the "bulletin boards"  
Everyone turn in QA that is in calendar

Week 4: Breakout session: Household Staff Evaluation form  
In-service group

**Week 1**

**Neighborhood Report: Monthly QA \_\_\_\_\_Month/Yr**

1. \_\_\_\_\_ Administrator/ Community Mentor
2. \_\_\_\_\_ DON/ Clinical Mentor
3. \_\_\_\_\_ Move In Coordinator
4. \_\_\_\_\_ Nurse Leaders (list by home or sister home)
5. \_\_\_\_\_ Life Enrichment Guides (list by home or sister home)
6. \_\_\_\_\_ Home support Nurse Admin (list by home or sister home)
7. \_\_\_\_\_ Home support Nurse Admin MDS
8. \_\_\_\_\_ Home support Nurse Admin Skin/Infection
9. \_\_\_\_\_ Home support Finance Office (list by home or sister home)
10. \_\_\_\_\_ Home support Business Office (list by home or sister home)
11. \_\_\_\_\_ Nutrition Guides- Dietary Manager (list by home or sister home)
12. \_\_\_\_\_ Nutrition Guides- Dietician (list by home or sister home)
13. \_\_\_\_\_ Environmental Guides- Maintenance (list by home or sister home)

Week 2

Neighborhood Report: Move-In Report \_\_\_\_\_Month/Yr

By Home: \_\_\_\_\_(Home) LE Guide\_\_\_\_\_

(1) Name of New Resident:\_\_\_\_\_

Occupation:\_\_\_\_\_

Family (number/ names of those who may visit regularly):  
\_\_\_\_\_

Interesting fact about resident:

By Home: \_\_\_\_\_(Home) LE Guide\_\_\_\_\_

(1) Name of New Resident:\_\_\_\_\_

Occupation:\_\_\_\_\_

Family (number/ names of those who may visit regularly):  
\_\_\_\_\_

Interesting fact about resident:

By Home: \_\_\_\_\_(Home) LE Guide\_\_\_\_\_

(1) Name of New Resident:\_\_\_\_\_

Occupation:\_\_\_\_\_

Family (number/ names of those who may visit regularly):  
\_\_\_\_\_

Interesting fact about resident:

By Home: \_\_\_\_\_(Home) LE Guide\_\_\_\_\_

(1) Name of New Resident:\_\_\_\_\_

Occupation:\_\_\_\_\_

Family (number/ names of those who may visit regularly):  
\_\_\_\_\_

Interesting fact about resident:

**Week 2**                      **Neighborhood Report: Café Report** \_\_\_\_\_ **Month/Yr**

***Breakfast***

# Independent _____ _____	By café _____	By home _____
# Need encouraging__ _____	By café _____	By home _____
# to feed__ _____	By café _____	By home _____

***Lunch***

# Independent _____ _____	By café _____	By home _____
# Need encouraging__ _____	By café _____	By home _____
# to feed__ _____	By café _____	By home _____

***Dinner***

# Independent _____ _____	By café _____	By home _____
# Need encouraging__ _____	By café _____	By home _____
# to feed__ _____	By café _____	By home _____

Report on :

(1) **Daily Café learning circle: any notes to take to Neighborhood Council**

(2) **Observe the protocol for serving:**

	<i>Breakfast</i>	<i>Lunch</i>	<i>Dinner</i>
<i>Rose Café Staff</i>	_____	_____	_____
<i>Home staff:</i>			
_____ <i>Home</i>	_____	_____	_____
_____ <i>Home</i>	_____	_____	_____
_____ <i>Home</i>	_____	_____	_____
_____ <i>Home</i>	_____	_____	_____

**Week 3      Neighborhood Report: Quality Indicator \_\_\_\_\_ Month/Yr**  
**(List by Home)**

Do whatever your organization is doing to track, monitor and respond to the following on the homes. This report will help with the new requirements or create your report or a grid that can track the following, can also be used for part of Facility Assessment & OAPI

By Home (Have a sheet for each home):

Restraints \_\_\_\_\_

Skin \_\_\_\_\_

Infection \_\_\_\_\_

Unintended Weight loss \_\_\_\_\_

Catheters \_\_\_\_\_

Consipation \_\_\_\_\_

Falls # only \_\_\_\_\_

EVALUATION OF \_\_\_\_\_HOME

I. Maintain home foundation:

Go down to Household staff room: Go through Room and check....

- 1. The Grid
- 2. Standup meeting and notebook
- 3. Bulletin for Life Enrichment: Family Matters. Keeping the current planning of small gatherings, announcement of events or special celebrations and copy of community events calendar.
- 4. Bulletin for Safety Matters. Is the list of residents in the falling program listed, skin program, unintended weights, infection control
- 5. Small Gatherings
- 6. Community events
- 7. Weekly Planning
- 8. Monthly Celebrations on the home
- 9. Monthly In-service
- 10. Maintaining Learning circles to deal with Home issues and solutions:
- 11...Home designated staff includes everyone being on a Home. Environmental any vacancies of above Home \_\_\_\_\_ support:

II. Ask the Household Staff: Anything we can do to better support you as:

Mentor, \_\_\_\_\_Nurse Leader\_\_\_\_\_

Life Enrichment \_\_\_\_\_Environmental\_\_\_\_\_

Dietary \_\_\_\_\_and the other Home support\_\_\_\_\_

(this is never a gripe session; a time to encourage and support the staff)

III. New Residents: moving in: addressed at Stand up agenda, Life Enrichment promoting Move In protocol on home/ Move In packet given to families by Move In Coordinator

Do you know the residents moved in since last month?

Do you know their family members/visitors? \_\_\_\_\_ If there is a pattern to their visits?

What have you done to support the resident?

What have you done to support the family/visitor?

**Chapter Three.....**

**Overview of concept and what will be accomplished.....**

**Dialogue for in house direct teaching.....**

**Forms can us to build and maintain home.....**

## CHAPTER 3 Welcome to Chapter 3 of the Welcome Home Project

As we embark on Chapter 3 and Part 1, notice that you have reached a halfway mark in these sessions. Hopefully you are continuing to get excited about the prospect and process of change in your facility. You may be imagining and seeing changes already and how the vision and umbrella of Home brings more purpose & meaning to everything. The two foundations that will be explained in this session is Life Enrichment and the Move In process; both of these are vitally important in Welcome Home. As pioneers, we again want to encourage you to continue in the efforts you have started- you are making life better for your residents, their families, and your staff. In Session 3 Part 1, we continue focusing on life enrichment, as we did at the close of the last session. This is such an important aspect of the Welcome Home Project because the goal is to encourage, support and thereby add quality of life to all of residents who live on the home and all the caregivers who work on the home.

We begin this session by breaking down what life enrichment really means. As the old adage goes, "life is precious." Most of us consider life a gift don't we? Life brings with it so many experiences, opportunities, memories, and blessings. Anyone who has been able to live a long life knows that life has a purpose and can be a blessing to so many.

When considering the word enrichment, we typically think of something that is meaningful, enjoyable, and special. Enrichment improves the mundane experience that living life can sometimes become. Imagine a meaningless life. You have probably even experienced times where you felt like your life was a broken record- wake up, eat, work, eat, work, eat, relax, sleep- repeat, day after day. That is life without enrichment! When your life is placed on autopilot you have difficulty recalling a joyful or exciting moment in your day- you are missing enrichment in your life. Enriching lives in your homes takes everyone working together. Your staff and your residents in the home are unique and gifted and have varied interests. Imagine the enrichment that can be experienced when everyone works together and knows one another more intimately. By gathering personal information about and getting to know your residents you are building relationships with them and creating opportunities for purpose, meaningfulness, and memories. In addition, you build self-esteem, bring contentment, promote dignity, and foster hope in them. Now that's enriching to one's life! Regardless of your job in the home, it is everyone's job to add enrichment of life for all residents through relationships with them, a genuine concern, daily gatherings, celebrations, and other events.

You will also see in Session 3 Part 1, what Life Enrichment should look like on the Home. You will watch a learning circle for planning, a learning circle for enjoyment. I want you to keep in mind how important it is to know any special needs or limitations of any resident on your home, **for instance;**

## **5) Learn Sensitivity Training**

**\*\* Lori's explanation of the end:**

- 1) Know the person**
- 2) Know their limitations**

**The Beauty of our home- we are making sure we do home**

**Being sensitive/understanding the resident =**

**Knowing how to communicate w/**

- A) vision impaired**
- B) hearing impaired**
- C) dementia**

. Be sensitive during meal time, small gatherings, celebrations or large events on the home to anticipate special needs from a resident who may have limited range of motion, is hard of hearing, has a cognitive impairment. By understanding any support or assistance the resident may need to feel self-esteem, dignity and pride as they are in the group will provide for positive experiences. Also remember, everyone loves choices, they love to have their opinions ask and everyone appreciates a sincere encouraging word or affirmation. If a resident is unable to get themselves back to their home; make sure that you provide the security of ensuring they return when they are ready. As you are aware of their abilities or needs; as you learn about 'who they are as individuals with interests, hobbies and accomplishments; you can help them build new friendship or maintain friendships with others as well. Relationships are a key in enriching our lives.

Being aware of and acknowledging limitations in an appropriate way communicates to the resident in a dignified and respectful manner that you know him/her and you know when he/she requires assistance. We can help build up and still challenge without being demeaning or thoughtless of one's needs. For all the reasons mentioned above, you need to know who your residents are at their core. These details (My Story/Social History form from the move-in process) are all kept in the Life Enrichment Guide book and a copy in the resident chart in the staff room on the home. The reason behind this is because bonding with residents is so much easier when staff members know details about that person. You become more compassionate and caring when you know your resident has 16 grandchildren, was a veteran of war, or what their achievements have been and are.

It is also at this point that members of your staff must now determine when the best time to have the weekly planning meetings is. You must schedule them around shifts in order to have the most number of staff present as possible and you will want to have your resource book available at each of these meetings. For those on your staff who are unable to attend the weekly planning meetings, be sure to update them at the monthly in-service trainings so that they can be informed of celebrations and activities among the residents and not feel as if they are out of the loop. In the Home Model and as a family, it's important everyone be aware of what's occurring in the home.

Before the breakout session for Part 1, enjoy watching the first planning circle and the second learning circle for enjoyment. Provided in handouts are some simple Life Enrichment ideas, a planning guide and even questions you can use for the gathering of a circle for enjoyment. **In conclusion, Life enrichment is a way of life on the home. It is a part of every relationship on the home. In the ways we treat each other and in the ways we communicate with each other: we can build enjoyment of life. Remember we communicate verbally with word and non-verbally with facial expression, tone of voice and ways we touch someone.**

In Session 3 Part 2, you will learn about an initial and significant process—the Move-In. To better understand this process, it's necessary for you to delineate between the Home Model and the Traditional Model once again. In the past, we've admitted residents into our facilities and then found ways to "fit" the new resident into the system (bathing schedules, dining room seating, planned group activities) but in the Welcome Home Project, all those processes are overhauled and reconsidered.

Consider a time in your life when you had to move and make changes in your life. Maybe it was as a child with your family, or when you went to college or got married, maybe it was a new job or simply a new office. Regardless of the situation. The question is, were you admitted into your new home? Were you admitted into your new office space? No! You moved in and were often times greeted and invited by those around you to get more comfortable and familiar with your new surroundings. Maybe you were excited to choose how you would decorate the area, how you could make the space most comfortable for yourself, or what activities and events were going on close to your new home that you could participate in. This is the same experience residents have when they move into a facility utilizing the Home Model. As you will see in this Session 3 Part 2, the Home Model fits the care system to what the residents choose and desire and is based on how they want to live. As a result, the resident plays a major role in planning their move to the new facility. Staff members, as well the resident's family, also play an important role in the Move-in.

There is some grieving that takes place when you have to uproot, change your routine, and experience unexpected things. Overall, the process is bittersweet and it is your responsibility to remind residents of the joy and sentimentality of the life they have led up to the point of moving into a facility like yours... and the joy and excitement of what is to come! It is the responsibility of those closest to the resident to offer them moral support and to control their own emotions to ensure that the change is a positive experience. One important aspect of making the transition and moving in is allowing the residents to reminisce, not only initially, but throughout their time in the home. Reminiscence is a coping mechanism that is used to re-experience aspects of one's life. It is obviously incorporated into the Move-in process, but also needs to be

readdressed in your ongoing communication with the resident such as through one-on-one contact, learning circles, and other small gatherings.

There are two steps involved in moving in. The first is that the staff indicates and shows that it wants to work with the residents and their family to understand the need to plan the move and the need to give the resident choices. You will learn 'your role' in the move in process no matter what your job or chore is on the home. You will feel more confident and know how much you are helping the resident and their families. Secondly, a move-in packet is provided to all new residents and their families. This consists of a welcome poster signed by all residents and staff in the home, a life enrichment calendar, a brochure explaining daily living at your home, as well as gift certificates to the Café and an invitation to monthly Welcome Home Project Dinners for the family members.

When you face a move, you also face other adjustments and receiving support is invaluable. The most vital thing staff can provide during the adjustment is respect, compassion, and consistent support. If you can assure these things, the adjustment can flow very smoothly. Three major adjustments are outlined in Session 3 DVD that you can expect from the individuals you serve. When you relocate your life, you enter an entirely new community. The physical setting is new and the resident must learn to adjust to his/her setting. Consider providing a map of the facility or taking the resident on a personal tour, repeatedly if need be. If the resident knows you and feels comfortable around you, the more likely the physical surroundings will not be so overwhelming.

Another adjustment is the social aspect and getting the residents acquainted and comfortable with those around them, particularly staff and other residents. By having a consistent staff of individuals in the designated homes and those staff knowing the residents personally, they can help to develop very close relationships in the home between residents. The idea of staff members getting to really know the resident is central to his or her success in transitioning to a new home. The staff holds the keys to making this process easier for all the residents involved.

The third and final adjustment residents must face involves their own identity. Residents must enter new relationships and share a lot about themselves with others in an effort to feel at home. This often takes a lot of courage and confidence when you are new to an environment. One way to assist the residents in defining their identity is through the use of the tool, My Story. My Story is an interview that occurs with the resident and is recorded for them and the other staff members. Family members are also asked to give input and share ideas for the story. My Story asks about the resident's past (families, schooling, careers, and hobbies) about likes and dislikes (foods, activities, music, television shows) as well as their routines, habits, needs, and coping strategies. One copy is kept in the resident's room and the other is placed in the Life Enrichment Resource Book to be shared with other staff.

In this session, you are going to learn how to take your understanding and what to communicate to the family and to the new resident on the home. Your role in the move in is very important and will have a positive reinforcement and impact. You are going to hear about My Friend Vera that I made in 1982 and how even to this day; she inspires me in sharing how important it is to getting ‘to know each person.’

Before the end of Session 3 Part 2, through breakouts and homework, you will have been assigned a resident and will complete the My Story and with that resident. Each of these are provided in the materials and you can modify them for your own use. The purpose of the self-determination form is to find out what your resident wants and desires on a daily basis. It needs to be updated regularly. After completing the interview and forms you will then put this information on the grid. This will enable staff to develop appropriate life enrichment gatherings based on the individual resident’s wants and needs and also to monitor compliance with each individual resident. Commonalities will often be found among the residents once this information is placed on the grid. For instance, one gentleman shared that he enjoyed putting together model cars. Once this life enrichment project occurred, several other residents learned that they also enjoyed the same hobby. They now have developed their own “club” in the home for those interested in the model car sensation.

You will be hearing about my experience of my developing what at the time I called an “interest Sheet” to find out about the history of the resident, their interests and hobbies; which today in Welcome Home is like the “My Story.” Between all the information you gather on the Home during the move in; it will tell you what they want and who they are. You will see how logically the information is used to direct the caregivers and equipt everyone to build meaningful relationships and quality of life on the home through the Grid, the Self-determination , My Story, skills for communicating during the move in and the Buddy program.

\* **Totality Theory and How we take the 6 aspects of totality to build Understanding of people, build Life Enrichment gathering and community events., Because it reflects some of the barriers , needs, desires.**

During many years of teaching the Activity Directors Class, I like to explain what \_\_\_\_\_ has developed as the Totality Concept of a person’s make up. This theory allows us to understand that we are all alike no matter our age; we all have the same six aspects and needs that make up who we are and what we need in those areas for meeting our needs or understanding each other. I love the fact that no matter who we are; we can relate to each other with this knowledge. Even at your breakout, you could talk about what these needs Vera had and how we could have increased her enjoyment and quality of life through our care, our life enrichment and our relationships.

As you completed the homework in Session 3 Part 2 , you likely understood the importance of My Story in understanding the life enrichment of each individual resident and how it builds relationships on the home. We must look at life enrichment as a complete and total program.

**\*So many things about life are not bound by our age: we all have many of the same needs: wanting to feel loved, love others, feel useful and needed. It is also true that as we give we often receive something very important and that is a feeling of warmth, joy, blessing for helping someone, doing our job well, speaking kind words of hope or encouragement. These are part of our job now on the Home with all those who live or work on our home. That is why Life Enrichment is so important. It develops opportunities for the home, It develops relationships** All humans have six needs, from birth through the end of life. These are commonalities everyone shares with the residents. 1) First are their physical needs. Everyone needs shelter, food, sleep, exercise, and medication. 2) All have social needs. In the Traditional Model the social needs of residents were defined without their input, but in the Home Model, the residents are given choices of meeting those social needs and then their choices are honored and respected. Some residents may prefer small group interactions and others larger groups while still others may prefer to have alone time more often. 3) All have intellectual needs and like to share thoughts and opinions. Opportunities to be creative can certainly enrich someone's experience. When you communicate with a resident, ask open-ended questions rather than yes & no questions and encourage thoughts and expression of self. 4) Everyone also has a spiritual need and some belief or understanding of a higher power. Fostering and discussing that may be very important to your residents. For many residents, their faith is a positive coping mechanism. 5) Psychological needs are an inherent part of life. People want to feel safe and secure in themselves and feel worthy of love. There's no better feeling than knowing that someone loves and cares for you. 6) Finally, all have sexual needs. For your residents, it likely takes form in feeling good about the way they look or what they can do. Female residents like to primp and get their hair done, while male residents like to be able to be helpful and strong or solve some problem. There is also a need for touch. Is the resident's need for intimacy being met or are they being deprived of it- that physical human contact? Hugging, patting the back, or holding their hand tells the resident that they are cared for and loved.

The home is made up of relationships and all of our relationships and choices are a part of life enrichment." Your resident should always have the power and desire to choose, because this is one of the greatest freedoms in anyone's life. Relationships are only improved when personal choices can be made. Listen to the DVD description of first meeting Vera in the early 1980s. She wasn't just a resident in the home or a room number, she became so much more as a relationship evolved from getting to know the person and spirit of Vera. As your staff really attempts to get to know your residents, they will learn new things about them and they will get ideas about how to nurture that relationship. When

you experience your residents differently, when you can treat them as a household family, you can't help but want to enrich their life to the best of your ability. Allowing meaningful choices will greatly enhance this experience.

As Session 3 ends, a life enrichment guide shares additional, helpful information. She explains how the Getting To Know You through My Story or your own Social Service history used in your Move In materials are evaluated and used to create a weekly calendar for community events in the homes based on what the majority of residents desire to do. This calendar is posted for the residents and also in the staff room. A life enrichment notebook for each home is also created. The first section contains protocol for new residents and the second section holds the My Stories, as well as a picture of each resident. The life enrichment guide also describes small gatherings in the home. In the mornings, residents may share coffee, engage in reminiscing, or conduct a learning circle. The afternoons are reserved for larger community gatherings such as bingo, church services, or celebrations. At the conclusion of Session 3, you will conduct a breakout with residents and your life enrichment guides by holding a learning circle to determine what small gathering residents would like to participate in. We hope you enjoy and will benefit from Session.

**The Initial My Story:** As you do your break out session, you will go back to your Buddy and you will find out about 'Their Story,' what it is that makes them unique, a one of a kind masterpiece What are the things they are interested in.

By gathering this information about each other on the home: we do two things:

1. We build relationships
2. We build the Home with opportunities for purpose, meaning and joy...and we build memories...we build self-esteem, dignity and we promote motivation & hope.

You will bring this back to the Life enrichment Guide on your Home, who can add these ideas to the weekly planning agenda or some small gathering on the Home.

**Maintaining My Story:** After you do this for the first time, Life Enrichment will keep this up for the new residents moving onto the Home.

**In-Service Exercise during the year:** When you re-watch this session during in-services, this is where you can implement the buddy's of residents to go and speak with them and update their self-determination form.

Now you are ready to do your weekly planning circle and plan for beginning your small gatherings and celebrations on your home.

Enjoy!







### **Session 3 Part 1 Dialog**

*We are going to be looking today at a couple of foundations of the home. The planning circle, the move in process and these all kind of come under what we call life enrichment. I love those words: Life Enrichment; when it comes to delivering services in long term care. First of all, let's just look at those two words separately. Think about life, life is precious, it is a gift and there is a destiny in which we are all called and have a purpose for. We may not understand sometimes the condition of life, but we do know that we are here for a reason and it is a very special gift. Enrichment: I love that word enrichment. We have been given God given gifts and talents. We have been given a personality and through life experiences, that has grown or we have worked hard to develop more interests. We have been given five senses and all of these together enrich all of the things that we enjoy; whether its foods or smells or feelings or people or passions or hobbies. Life enrichment. So how does life enrichment come together on the home?*

*Life enrichment on the home takes all of us working together. It may be simply an encouraging words, a smile, or a pat on the shoulder. Or when I get someone, I'll put my hand out and if they respond with their hand in mine, I will put my hand over theirs and give them a little pat, because you know touch reaffirms we care about each other and there are safe places to touch. When you get a little older, we sometimes have a touch deprivation so that is a wonderful way to enrich someone's life on the home.*

*Enjoying all of the unique and special giftedness of those who live and work on the home, it truly makes our home very interesting; a fascinating place to learn, and to be inspired by others and for YOU to be an inspiration. The result of having life enrichment on the home is:*

- 1. You are going to build meaningful relationships*
- 2. You are going to give the residents and each other the opportunity to help one another, to be there for one another*
- 3. That is going to result in everyone who lives or works on the home to feel dignity, self-esteem and self-worth. And no matter what our age is, every one of us have these needs.*

*Every one of us need to know that we are loved, that we are able to love, that we have a sense of purpose and meaning and usefulness and so life enrichment on the home is very important.*

*Now what we are going to look at quickly is how we are going to see life enrichment on our homes specifically and who is responsible. First of all, how do we see it?*

- 1. Through the welcome home materials during the move in process. You're going to have a move in coordinator who is going to encourage and promote the planning of the new residents' home. So as a new resident moves in, the resident and their family are already aware of our value of home, our designated staff.*
- 2. The life enrichment guide is going to direct and support the staff with resources so that you have small gatherings, so that you have planning circles.*
- 3. You will get to know the person, their story, their lifestyle assessment, Just as previously through the self-determination you found out their choices of what they wanted to do in some of*

*their medical or assistance that they needed. This will give a more totality to understanding who this person is.*

*4. They are going to provide a calendar of the small gatherings, the celebrations, and the community events on the home through the planning circle.*

*So these elements of bringing life enrichment to the home is going to involve the role of your life enrichment guide. They are going to do several things:*

*1. They are going to facilitate the weekly meetings, the planning circle on the home which is going to bring the residents and the staff together to decide what they are going to do.*

*2. They are going to put these plans together and post them in the staff area so that everyone knows what is going to happen on the home.*

*3. They are going to be on the home with the residents and the staff building relationships. The life enrichment guides are just as important at building relationship with the staff and the residents and bringing the two together. They are also going to be on the home for the small gatherings, they'll help facilitate those if a staff member is unable to volunteer, they will be facilitating those depending on what your staffing is each day.*

*4. They will also keep a calendar of events, the community events, the small gatherings up in the staff room and up on the home so everyone knows the opportunities available.*

*5. They are going to through the planning meetings coordinate the celebrations, provide the resources for the celebrations on the home and they are going to help again with the move in process.*

*Life enrichment is everyone's job on the home. The life enrichment guide is there to guide you and provide the resources and the support that we just talked about. Life enrichment is everyone's job, just like being a homemaker is everyone's job. So what does that include? What should you be doing? You should be visiting with the residents, you're going to have a buddy and of course you are going to develop a relationship with that buddy, but you're also going to visit. Be conscious when you're on the home doing your particular chore or level of care of services; remember to visit with them, know who they are, you may know about their family or their hobbies. Talk about things that are engaging, ask open-ended questions, get their opinions, find out something about them, they have a lot of wisdom; they could teach you some things and they have a lot of stories. They are a history book that is living. Join in the small gatherings, when we first began, we asked out staff to volunteer, but sometimes it gets pretty hectic and their number one job might be that I need to answer a light, I need to assist with feeding, but they can when their finished and there is not a light on or their not in a room and a small gathering is going on, they can sneak in. They can sit down and exercise or join in a learning circle or they can sit down and watch the movie of the week, whatever it might be; the residents and the staff will enjoy that time together.*

*The celebrations on the home, no one is going to want to miss out on them, they are so much fun, that is part of your role as life enrichment is enjoying those celebrations. No matter what your job, it's all of our job to be aware that we get to offer an enriching life opportunities. I've always found what's good for the resident is good for the staff and what's good for the staff is good for the resident; this is a perfect illustration.*

*We are getting ready to join a planning circle that were going to show you how we do this and then this week you'll be starting your own planning circles. But before we do, I want to show you on your screen just a couple of things you can be working on in your own homes of choices of things you can do on your own homes. Let me tell you, the reason I got this idea for a planning circle and its such a key to home is that I noticed when my kids were in high school that we were going in many directions. My husband is a professional and he has lots of appointments and dates that he has to be at certain things so we decided that we would get together on Sunday night. Sunday night was our night that we were going to sit down and everyone is going to tell us what is going on for the week. Do we have something coming up? The home needs to do the same thing. There might be times were you know that in a week you are going to have a new person come in or in a week you are going to know its someone's birthday or something that's going on and so the getting together on the home and saying hey what is going on in the next week and also making plans, because we had to plan to eat together. We had to plan if we were going to go out of town. So the same concept of the things that you do at home, we do on our home.*

*So let's look at some of the things you're going to be planning. You're going to be looking at who has a birthday, who is coming onto our home, whether it is a staff member, whether it is a resident, because remember even at the stand up meeting, you are going to be talking about everyday. We don't want to miss welcoming someone to our home. And you're going to be looking at the community events that are going on, but then you're going to see there's things that you are going to do on the home, choices of small gatherings, like learning circles and I used to teach for many years at the state level and one of my things is orientation of time. If we were going to go to the grocery store, we would know that it's 4th of July, we would know that its Easter, we would know that its Thanksgiving or Christmas. Why? Because there's symbols out there, there's visuals, so I think sometimes learning circles are fun. Like in January, New Year's or snow. In February, Valentine's or talking about different love songs. You can take the different seasons and create learning circle questions. Spring: gardening. I live an area where there's a lot of wheat, cattle, or there's oil. We could talk about different things in your culture where you live. We could create and ask, hey what do we want to talk about in our learning circles this week. Also, so many things that you can do; you can have a book club, you could have a ladies red hat club, you can have a mens' garden club, you could have dominoes, you could have cards and puzzles, you could have karaoke, you could have all kinds of great reasonable resources on DVDs, hymn sing alongs or old songs or songs of 50s, 60s, 70s, 80s, movie nights. One thing we did and you will talking about this and you should constantly talk about this is what do we have that we could open up? We opened up a General Store, we opened up a little video area, a library. It's nothing fancy, but it's where our homes can go and check out books, check out videos, go take a day and if they need a toiletry item and we happen to just donate those items, but you may be able to have organizations donate those and those are all things that you can plan at your small gatherings. So let's join our planning circle.*

*[Learning Circle Planning Halloween Party]*

*Rheadonna: "All right now it's time to plan for the holidays, are we ready? Okay can you believe that next Monday is Halloween? Was it every hot when you used to take your kids trick-or-treating?"*

*Dorothy: "I remember it snowing one time."*

*Rheadonna: "Snow, yes we've had snow, remember the snow? well this coming Monday well probably have a lot of our little goblins in shorts, because it's going to be warm. But what we need to talk about is our party that you guys want that you guys discussed last week at the playing circle, now this week you really need to plan on our party for Monday. So what would you guys like to do for your Halloween party on Monday? So what would you like to do for the party?"*

*Dorothy: "I make a pretty good witch."*

*Rheadonna- "Ookay so do you want to go as a witch for Halloween?"*

*Dorothy: " Yes."*

*Rheadonna: "Okay we can do that! Jeanetta what about you?"*

*Jeanetta: "Treats."*

*Rheadonna: "What kind of treats would you like to bring?"*

*Jeanetta: "Popcorn balls."*

*Rheadonna: "Okay everyone likes popcorn balls. Okay, I'm going to write down, Jeanetta popcorn balls. Ola, what about you? What would you like to do?"*

*Ola: "Eat the candy and the popcorn balls."*

*Rheadonna: "Okay so you're going to be in control of making sure everybodys eating everything, okay? Alright, Marge, what about you? What do you want to eat at the party?"*

*Marge: "Oh at the party, I'll eat anything."*

*Rheadonna: "How about some sugar cookies?"*

*Marge: "Oh yeah , but I don't have any place to make anything."*

*Rheadonna: "That's okay, you tell me what kind and what brand and I'll go pick them up, how's that sound?"*

*Marge: "Now or later?"*

*Rheadonna: "Later, because if we get them now, you guys will already eat them. Loraine, what kind of treats would you like at the party?"*

*Loraine: "Candy, but I won't have any way of buying it."*

*Rheadonna: "That's okay, that's alright, that's the thing, with these parties don't forget I have the money that's allotted for it so you give me the ideas and I'll go buy it, okie doke?"*

*Loraine: "Plenty of candy with nuts in it."*

*Rheadonna: "Candy with nuts, alright."*

*(Cameraman in background: "Like a payday? Snickers?")*

*Rheadonna: "Snickers, everyone likes snickers. Alright Jared, what would you like?"*

*Jared: "Well everyone's naming food, what would you gals want to drink? You didn't think about that."*

*Rheadonna: "Marge said she didn't think about that. Diet coke, okay I can bring some diet coke."*

*Bea: "I know what kind I like, white chocolate macadamia nut."*

*Jared: "Oh the white chocolate macadamia nut cookies. Oh, okay so we'll get diet coke, anybody want regular coke?"*

*Lorraine: "Dr. Pepper."*

*Jared: "Oh and Dr. Pepper, got to have some Dr. Pepper, okay. We got that established and she went out of turn, but that's okay, she wants white chocolate macadamia nut cookies."*

*Rheadonna: "Okay white chocolate chip, we always get out of turn when we do these, because we're all planning. Because when it comes to your brain, you just want to hurry up and say it. That's the fun part. Okay, well I'm going to get the paper plates and the napkins and your tablecloths. Now do you ladies want to dress up for Halloween, for this Halloween party? I think we should."*

*Dorothy: "It would be fun, but who has the costumes?"*

*Rheadonna: "Well we can get the little like headbands to go on your head and that could be a costume. Would you like that?"*

*Dorothy: "I guess so, I'm a pretty witch anyways."*

*Rheadonna: "Okay, I'll see if I can find you a little witch hat on a headband. Now Janette, what are you going to dress up as?"*

*Janette: "A princess."*

*Rheadonna: "A princess, she's going to dress up as a princess. Ola?"*

*Ola: "A cat."*

*Rheadonna: "Marge?"*

*Marge: "She took mine."*

*Rheadonna: "Well we can have more than just one."*

*Ola: "We can have two cats."*

*Rheadonna: "The thing about it is, you guys are on sister homes, so you can be a cat for Autry and you can be a cat for Guthrie."*

*(Cameraman: "Sister cats.")*

*Rheadonna: "Sister cats, that will work. Loraine what would you like to dress up as?"*

*Loraine: "A queen."*

*Rheadonna: "A queen, let me see if I can find you a tiara. I'll see, Jared?"*

*Jared: "Well I'm going to be an M&M. Not the rapper, the candy."*

*Rheadonna: "Okay, are you coming as chocolate, red, blue, yellow?"*

*Jared: "Blue."*

*Rheadonna: "Okay, Bea what would you like to be for Halloween?"*

*Bea: "What would I like to be for Halloween... well, a ghost."*

*Rheadonna: "A ghost, okay if I can find a little headband that's got a ghost on it, would you wear it?"*

*Bea: "Sure."*

*Rheadonna: "Alright we can decorate up your face."*

*(Cameraman: "There's got to be a bed sheet laying around.")*

*Bea: "Like the picture of the ghost you have laying on the doors."*

*Rheadonna: "Yes, do you guys like the door decorations I put on your guys' doors?"*

*Ola: "Yes, (looking towards Dorothy) if you look like that witch, we don't want her."*

*Rheadonna: "Alright well it looks like we have everything planned for our party for Monday. Now that evening we're going to have your dinner early because supper will be done early because we open the front doors to the public at 6:30 sharp. So what's so neat about this especially the ones that have not been here through the years with us. The line will go clear down and almost wrap around the whole building. We have got families here that are parked clear out on North 10th Street. This is an annual thing; we are in the 29th annual year of this tick-or-treat with the community."*

*Marge: "What about if your just living here? I got a granddaughter, but of course she's got kids."*

*Rheadonna: "Oh yes, we make sure that we put that in the newsletter that your son got and it is inviting all of the residents' grandchildren, great-grandchildren and great-great-grandchildren, even the staff will bring their kids."*

*Marge: "Do we get refreshments for all them or what?"*

*Rheadonna: "No, this is just for them to come in and you hand out candy to them that evening over. And all you girls, we will take you over to the activity room where we're going to be at later on today to fill up*

*the buckets, because we've got to have a certain way for them to come in and exit out to make it easier so there won't be such a cluster down the halls. So everybody from Autry and Guthrie will go into the activity room and I'm going to put you in a big ol shoe horn and we're going to give you the buckets to hold and you'll give out a couple pieces of candy, okay?"*

*Marge: "That'll be fun."*

*Rheadonna: "You think that will be fun? Okay, then after all that stuff for Monday, what would you girls like to do Tuesday morning for a small gathering on the home?"*

*Dorothy: "Throw up."*

*Rheadonna: "You think you'll throw up from all the candy you just ate the night before. How about we just do coffee and just reminisce about the night before, how does that sound?"*

*[Group saying yes, good.]*

*Rheadonna: "Coffee with reminisce about tick-or-treat."*

*Jared: "You can talk about all the Halloween costumes you seen the day before."*

*Rheadonna: "Yes, we can reminisce about Halloween. Alright and what would you guys like to do that Tuesday night?"*

*Dorothy: "We're going to be doing something every night?"*

*Rheadonna: "Well if you want to, I mean if you guys want to participate in a small gathering, but let's give somebody some ideas that in case maybe you don't want to attend, maybe somebody else might want to. How about kickball? You guys like kickball in the evening?"*

*Dorothy: "Yeah we did that last year. "*

*Rheadonna: "Alright, kickball. Now Wednesday morning, what would you guys like to do for about 15-20 minutes?"*

*Dorothy: "Eating breakfast."*

*Rheadonna: "This is after breakfast."*

*Marge: "Trying to keep from sleeping in your chair. I'm good at that."*

*Rheadonna: "Alright, how about we just do donuts? Some donuts and hot coffee? Marge, I know you like hot coffee. Okay let's do some donuts and coffee. And Marge you want to help me out with that?"*

*Marge: "Sure."*

*Rheadonna: " Alright, I'm going to put you in charge of the donuts."*

*Ola: "Just eat one though."*

*(Cameraman: "That's why you sleep, you eat all the donuts.")*

*Rheadonna: "Okay and then Wednesday night we try not to plan anything because you guys will be eating supper and getting ready for your Bible study with Glenda Schumacher in the back dining room right so we always put down that Bible study. Because that gives you guys enough time to get back and get ready to go there. Alright Thursday morning, would you guys like to do about 15? I think it's if we're going to do all this eating, can I making a suggestion? Let's do sittersize Thursday morning. How about we do some sittercise, get some exercise in there and it only take us 20 minutes to get that done and I'll direct that one. I would let Jared do it, but he gets wore out after 10 minutes. Okay Thursday night, what would you guys like to do?"*

*Jared: "When's the last time they pulled the old parachute?"*

*Rheadonna: "Oh, it's been a little bit, because the other home have the parachute. I think we can get it. How about some parachute? Get out there and shake that parachute, remember when Gracie likes to go underneath it in her wheelchair? Yeah, lets do the parachute."*

*Marge: "I've never done the parachute, because I haven't been here when they did it."*

*Ola: "Me neither, but we'll participate. We'll enjoy it."*

*Rheadonna: "Well that's true. Jared I'm going to put a 2/10 staff member on that, we need to make sure we pull that up when we have our stand up meeting for that day. Okay now Friday morning, Jared what would you like to do with these gals since your one of our nurse leaders."*

*Jared: "Well I would like our new bowling set, I wouldn't mind trying that out, that would be fun. It's a little plastic bowling se. They had a blast with it on the other hall."*

*Rheadonna: "Okay now I'm going to tell you this much, It will wear you out because I have had a community activity with them and you have got to bend down, set up the pins, bend down, grab the ball so I better not hear you whine."*

*Jared: "Well its got to be better than sittercize."*

*Rheadonna: "Okay and then Friday night we're going to keep it open again because you've got devotions with Kenneth that night in the activity room okay. So that would still give you enough time, same time 6:30 in the activity room that way you guys can go enjoy your dinner, your supper that night and then go back freshen up and then the 2/10 staff will take you over, okie doke? And on Saturdays I know you guys like to just watch your westerns, do we want to keep it on that? Jared- I know some of these girls like to watch football."*

*Rheadonna: "I know, okay anything else? Anybody have any issues or anything we need to bring to the table? Dorothy, you have any issues or anything?"*

*Dorothy: "No, I can't think of a thing."*

*Rheadonna: "Janetta, Ola, Marge, Lorraine?"*

*Lorraine: "I'll pass for now."*

*Rheadonna: "Okay, Jared?"*

*Jared: "I'm good."*

*Rheadonna: "Bea, do you have any issues?"*

*Jared: (To Bea) "Do you have any issues you would like to discuss?"*

*Bea: "Oh, no."*

*Rheadonna: "Well alright, I guess we're done, now we can head off to our next activity for the day."*

*Dorothy: "Which is what?"*

*Rheadonna: "Filling the buckets."*

*Marge: "Where are they going to fill them?"*

*Rheadonna: "In the activity room. Alright, let's rock and roll."*

*I hope that you see how enjoyable that it is to bring the household together, the people who live and work on the home. You can see it in their faces, you can see how it builds the comradery, how it builds a warmth, a relationship, a common bond and you can see the joy and the loving kindness that is there between them. Now were going to join a small gathering, again if you notice the planning circle and this small gathering, they're going to be doing this gathering as a learning circle for enjoyment. I have always kind of looked over these last ten years that there's kind of three types for me of learning circles: 1. Which would be like the stand up meetings or when you have something on the home for business or coming up with solutions or dealing with a challenge or sitting with a family in a conference doing it as a circle. 2. The planning 3. Enjoyment, I hope you enjoy watching this small gathering.*

*[Small gathering including life enrichment, residents and staff: discussing the holidays and how they spent them as children]*

*Denis,Life Enrichment: "Good morning everybody. We're going to have a circle this morning discussing holidays and how we spent them when we were children. So we're going to start with Barbara Tate."*

*Barbara Tate, café Manager: "I'm from a big family so for Halloween we always made our own costumes, we never bought costumes, but all of us would go out trick or treating together as a family and we would stay out until like midnight and we would instead of using like little plastic bags or anything, we would use pillowcases. We wouldn't come home until our pillow cases were full. It was such a good time."*

*Karen: "Well when I was small like Barbara, from a larger family and I was the oldest so I was always the one that got to instigate all the costumes and what they were going to use and where we were going to go. and a lot of times in some of the smaller towns they pick us up and take us to the larger town so we could fill our pillow cases a lot more and we used to fix our own pumpkins, have pumpkin contests to see who can get the biggest one, the littlest one, the scariest one, that's mainly what I remember."*

*Denise: "Bonnie, how did your family celebrate Halloween?"*

*Bonnie: "Well, my grandmother raised my sister and me and we were out on a farm there in Canton so only my sister got to go on Halloween, because I wasn't old enough to go and so that's about all I remember."*

*Denise: "Mildred what did you do on Halloween?"*

*Mildred: "Well most of the time I just sat in the yard and played, we lived next to the cemetery so we had it there all the time, we lived outside of town so there were no neighbors or anything, so it was Halloween and we enjoyed it "*

*Denise: "Dara what did you do?"*

*Dara, home Nurse Leader: "So I'm from a small town and we would, mother would come to the school and get us ready for the Halloween parade at school. I can remember anxiously waiting to be able to trick or treat for the time school let out till this time to trick-or-treat. That's what we did."*

*Barbara: "Well I I just remembered that I was always afraid of spooks and everything on Halloween and my sisters would go upstairs to the attic where the masks were and I would stay downstairs. I would hide out with mother, because it all frightened me, it really did. For some people they probably think it's wonderful and I didn't like it."*

*Denise: "So did you go trick-or-treating at all?"*

*Barbara: "Yeah, I did as I got older."*

*Denise: "Adrian do I dare ask what you used to do on Halloween?"*

*Adrian: "It was simply amazing, I can't believe there were so many people around. I was born and raised on a farm and we didn't get to go to town to the big cities. We just went to the neighbors around, the closest one was a half of mile and some was being wild so we didn't get to see two or three of the neighbors, but everyone one of them, I didn't have a mask on, but all the people said "you look so good in your mask." And that's about it, but it was fun."*

*Life enrichment is a way of life on the home and it takes everyone working together, those who live there and those who work there. It's illustrated in the way that we treat one another, the way that we communicate. You see our words are very important; words can build people up or they can tear people down. In our homes, let's just use the words that are going to build people up. Now it doesn't mean that if you have a problem that you don't go through the proper channels, follow your standards and address it, because that's harmful too, to allow people to not do their job or certain things going unchecked. You want that integrity. But also not only do we communicate with words, we do it with our face, our expressions, our tone of voice. I might say, "Oh it's really good to see you today." (Bad) or "It's really good to see you today!" (Good) Our body language and even our touch. You know when you are helping a resident, be gentle. I know sometimes we have to do things, we try to just verbalize to them that we are trying to be as gentle as we can, just re-encourage that. Just remember life enrichment, it's going to be very rewarding for you, for your residents, for their family. It's going to be building up your home just as you would your own home in so many ways. Life enrichment is important, its meaningful and it develops and maintains the home and all of the relationships in it.*



### **Session 3 Part 2 Dialog**

*Every part of the home, the foundation of the home is important. The move-in is very important, because it involves the resident and begin the whole process for their choice of how they want to live out their life on the home. I have to go back for just a minute to life enrichment, because that is what we are doing for the resident. We're providing for all the needs that they are going to need, we're going to document and do all of that, but it will be underneath the home umbrella in which life enrichment is so important. Just remember we talked about life is a divine gift and it's very precious and no matter where we live or what our age is; we can experience blessings. We can be a blessing and life no matter where we are can be filled with some abundance of relationships and joys and pleasures and that's a good thing that gives us a lot of hope and faith.*

*When we wake up in the morning, everyone one of us do it; I usually first of all go to the bathroom. I never look in the mirror; I'm very scary looking when I look in the mirror and then I'll go eat, but then I may need to go brush my teeth, put my makeup on, I mean all of the things we do all day long. What if that was all we did is we went to the bathroom, brushed our teeth, we ate, we went to the bathroom, I mean that's all we did. It would be very boring, but in our homes and in our lives, we choose to enrich our lives and we have passions and we have dedications and we have things that we love and people we love and that's what we need to remember when people are moving in on the home. What is it that is their story? What is it that they have been involved in? Who are the people in their lives that they love? That's what we're going to learn today as we look at the move in.*

*The first thing I want us to do is to compare moving in on the home versus being admitted into a traditional nursing home. You may be like us and were more traditional in the way that you admitted people and that would be that they came in, we used those words; "We're admitting you." They had a room assignment, whatever opportunity was open for the bath or shower on the day and the time, they were put in on that list, in the dining room, whatever was available, that's where they sat and before the cafe, there weren't very many choices. There are so many things that are the traditional home, they don't just find out... what is it the resident wants.*

*In our Village, I learned this many years ago, especially at our apartments for independent living. We have different sizes of apartments and they would come in and measure the room and then they would go home and they would see exactly what was going to fit where and they were planning the move and I know sometimes we only get a weeks' notice and even sometimes a days' notice, but we still are planning a move and we do it through the Move In Guide, used to be called the Admission Director and you may still have one called the Admission Director, but hopefully you will change that name.*

*So the move in coordinator has a letter that they give to the families that I have given permission, it's in their book to use that talks a little bit about how to go through the home, what to look for, how to plan the move, some of the things that can help the families on reminiscing as their going through the home that's full of memories and memories are a good thing and the families as were going to look at and the residents they're going through various emotions and that's what you're going to learn on how to understand the move in. But as they plan the move, they're going to decide on what to bring to make that new room into their home. So we're going*

*to plan the move, no matter how much time we have, we're going to fill it with the things that they want to decorate and make it into their home.*

*When you move in, we're using a self-determination guide, we're putting that upon the grid, but we're also finding out their lifestyle choices, we're getting to know them. We're asking them on their self-determination, "What time do you normally get up? What time do you normally take a nap? Go to bed? What do you like to do on bathing? What's some of your favorite food? What do like to eat? Things about do you have a favorite TV show? Do you have a group you enjoy belonging to? What are your hobbies?" We are finding out what they like and wanting to support them in their move.*

*Now I want you just to raise your hand and tell me, how many of you want to live in the more traditional, being admitted, just put in where you fit in on their schedule? Now raise your hand if you would rather be moved in and be able to make a home. And third, think about your family member or think about our family members that are moving the residents in, which one do you think they would rather have?*

*We're going to talk now about your role in the move in process as part as the home care giving staff. We need to understand the move-in. Each of us have a role in our interactions and household family members are going to help our new residents and family. When we being our relationship with a new residents and the families moving into our home, everyone will benefit. I always like to say the first impression is the lasting impression.*

*Our role in the move-in begins with understanding. Most of us have working awhile in this area, we've seen what families do when they move-in: they are in the room, they are helping put things away, they are decorating, they are helping their loved one feel comfortable, but stop a minute. Can you imagine how they're really feeling? Inside, while they are doing all of these things, they are thinking, is my spouse, my mom, my dad, my grandparent, are they going to be safe? Are they going to be treated with dignity? Are they going to be cared for?*

*Inside the family, there are two corresponding feelings. One of grief; we all grieve over losses in our lives or we love people and they can't live at home anymore because their needs have changed and the care that you give is so appropriate, it's needed and they're going to flourish in many ways through nutrition, through socialization, through safety. Where at home they might have been struggling with depression, with loneliness, not being able to eat or get their medicine on time, but families are still grieving over knowing that their loved one is aging and that time is limited with them and so the time that we have them, we want to fill it with good things and new memories, because life isn't over. Second thing is they are feeling guilty. They are feeling guilty as in am I doing enough? Am I doing the right thing? So your role is understanding: 1. How the family feels and what you're going to be able to say to them. 2. What the resident is feeling. The resident, I have taught this for a long time, is in my opinion readjusting to three things. They are readjusting to the physical setting, they're readjusting to the social setting, and they're readjusting to establishing their identity.*

*I remember in the 1980's reading a book by Doug Manning and his insight into relocation. I have expanded and taught on this for years. So, let me just give you an illustration*

*of how you can relate to this. Have you ever moved from one community to another? When you do, I remember moving to the town that I live in and learning the streets. There was this one part in my neighborhood, the streets were not straight, they curved, it was so confusing and it confused me, but once I figured it out, I was feeling more at home. Same thing, you may have a resident, they live in your town, but when they come to live in your home, your homes are joined by community sites like cafes, activity centers, maybe an exercise gym, a business area where they go to do business, they have to learn all of that and its up to us to help them find their way, hopefully you have a map and you show them, to go to the cafe you're going to turn right and when you leave the cafe, you are going to turn left. You're going to help them get to and from locations until they learn their way around.*

*The second thing is socially, you know it is like a new community. When you go to a new town, you have to make new friendships and that's our job. I found that especially when they are relocating to your home and making the adjustment that if you can find someone on your home that they have something in common with, that they can become a friend with, it really helps that relocation process and over time as your building your home and having your small gatherings, relationships with happen. You can see how that's really going to help the resident.*

*The third thing is the identity. If you leave one community and you come to a new one, no one knows what you've accomplished, no one knows your talents, people have to find out about them and the great thing is on the move-in process, we're finding that out at move-in, the life enrichment, the move-in coordinator, we're letting everyone know about that person and at the first planning meeting after the resident moves in, everyone will really get to know that person, we're going to invite them to that planning meeting, if they feel comfortable, we're going to enjoy welcoming them.*

*So now that you kind of understand the family, what they're feeling, the residents, their feelings, let me tell you what you can do, very powerful way to help the new resident and family. Your job is to communicate verbally by putting things in their mind at rest. You're going to tell them how much you love being on this home and being part of the designated staffing. You're going to tell them about some of the gatherings, celebrations or events that have happened and you're sure that they too will enjoy. You're going to brag on some of the choices of the dining in the cafe. You're going to tell them about the mentors and guides who get out of their offices and participate on the home and that they will have a special buddy that will be there for them. You're going to invite them to the gatherings. Assure them that you will help them get to and from until they learn their way around. They're not going to be left. You're going to make sure that the family knows where the staff room is and who you are. You're going to tell the families when they come in, "Come in and do one thing that you know your resident enjoys or will bring pressure to them." It might be they have a favorite food or maybe they like going outside so go outside. It may be they love calling people in their family so when you're here, make those phone calls together. That is going to ease the family's guilt, because then they know that they'll do one thing that just adds to the quality of their loved ones life. That I actually learned myself for feeling so guilty, my grandmothers were here and here I was raised since 14 years old, but my grandmother was total care and I always taught a bible study every Tuesday and she would always sit at my right side, but she can't get out of bed anymore and I was just devastated every time I went into her room, because she lived here with us and that was all the time and it was just*

*one day, I was like.. Lori you know what she loves. She is a primper, she loves making sure she has her makeup on and her hair done so some days I would fix her hair, put a little makeup on, some days even though she wasn't aware of it I made sure I put lotion on her skin. She loved music, I would bring in and turn on some music, all the things I knew my grandmother did, she loved her bible- I would read to her, she would get letters- I would read those letters to her. I made sure I did one thing and when I left, I did not feel guilty because I knew I had done something. That's something you can tell the families.*

*In addition to your job of understanding, to communicating, your job is to be kind and professional . Again you show that kindness, it sure is a great healing balm, trust me I know. I have had four people in very serious health conditions and I've been treated very kindly in many medical places doing research or whatever, it makes a difference so smile, be kind, be helpful and if you tell someone you are going to do something, follow through and get it done. Having sensitivity and being concerned about your interactions with others is important especially in the move in. I grew up as I've already mentioned since I was a kid running around and when I got out of college, I came back and joined our family business and I was so surprised that there was nothing going on for the residents so I decided, this young whippersnapper you know, that I'm going to develop what I call interest sheet or getting to know you form. So I developed this and I later ended up teaching it for years and it took me two months and I interviewed all the residents. I wanted to find out who they were, who their families were, what their hobbies were, what their interests were and then I was going to develop a program that reflected their interests. Little did I know... life enrichment.*

*Well there was a lady, her name is Vera and I just love her and its probably been now 35 years since Vera has left this earth and gone to her eternal home, but she lives inside of me as an inspiration. But I saved Vera until the very end and it wasn't because she inspired me, I was afraid of Vera and I was afraid of her because of what she looked like. She was about not even five feet tall, but however tall she was, she was that wide and she was legally blind so she had glasses that were so thick, she had at that time a catheter, she had crippling arthritis and she had no hair, but the hair that she had, she put it up into a bun and if you saw her in the back, all you would see is a conglobation of bobby pins and you would think as a child and being around nursing homes, why would I be afraid? But I was, because of what she looked like and what her condition was so she was my last interview. So I went in and I found out Vera was a pioneer school teacher, she taught in Tulsa, OK for over thirty years, she never married, on the weekends she loved second graders so much that she was a Sunday school teacher. The very first year I met Vera, our governor George Nigh came and awarded her a pioneer teacher of the year award. She didn't have her own children, but she loved her family. She sacrificed and put all of her nieces and nephews and even her great nephew to school. But what she did, is she loved the poems and she couldn't see and I was getting married and I didn't know it, but she was writing a poem about Lori and every day she would write it and when her sister would come, she would recite it. I still have that poem in my office. She loved children, she loved music, I could tell you many more things about Vera, but let me ask you this: the Vera that I told you about if we just had her medical and self-determination; do you see her different? But now that you know Vera, the person that loves her family, the teacher, the person that loves children, that loves her Bible, that loves music, that loves poetry, that loves playing games; do you see Vera differently? Would you know how to move Vera in and help her? Would you know some other residents or staff or*

*even family members that might enjoy getting to hear Vera's story or they too were teachers or they too were Sunday school teachers or they to love poetry? Can you see the difference in knowing a person and that's what we want to do on home as we move someone in we want to get to know who they are and that's why their stories are so important. You're going to have a breakout session and you're going to be working on getting to know your residents and throughout the whole time that you're maintaining home you need to keep working on learning more about the residents.*

**In-Service/Life Enrichment Test: Watch Session 3 Part 2**

1. Hand out Quiz for Session 3 Part 2 Welcome Home (5:56-11:16)

1. Two Feelings:

\_\_\_\_\_ (Grief)

\_\_\_\_\_ (Guilt)

2. What can you say:

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2. Read this excerpt after they finish their quiz

Our role in the move-in begins with understanding. Can you imagine how they're really feeling? Inside, while they are doing all of these things, they are thinking, is my spouse, my mom, my dad, my grandparent, are they going to be safe? Are they going to be treated with dignity? Are they going to be cared for?

Inside the family, there are two corresponding feeling. One of grief. Second thing they are feeling guilty.

3. Hand Out Card

- You're going to tell them how much you love being on this home part of the designated staffing.
- You're going to brag on some of the choices of the dining in the café.
- Tell them about the mentors and guides who get out of their offices and are on the home.
- You're going to invite them to the gatherings. (Be excited about telling them what we have going on)
- Assure them that you will help them get to and from until they learn their way around.
- You're going to tell the families when they come in, "Come in and do one thing that you know your resident enjoys or will bring pleasure to them." That is going to ease the family's guilt, because then they know that they'll do one thing that just add to the quality of their loved one's life.
- In additional to your job of understanding, communication, your job is to be KIND and professional.

**Quiz Session 3 Part 2 Welcome Home**

1. Two Feelings that the Families Feel While Moving in their Resident:

1. \_\_\_\_\_

2. \_\_\_\_\_

2. What Can You Say:

1.  
\_\_\_\_\_

2.  
\_\_\_\_\_

3.  
\_\_\_\_\_

4.  
\_\_\_\_\_

5.  
\_\_\_\_\_

6.  
\_\_\_\_\_

### **What Can You Say to Residents and Families**

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- In addition to your job of understanding, communication, your job is to be KIND and professional.

**I love the words that are used for long term care services: Life Enrichment...  
Look at these two words separately first.**

**Life:           Life is Precious**  
                  **Life should have a purpose**  
                  **May not understand: but a destiny to fulfill/work on earth not done**  
                  **We are all here for a reason**  
                  **Each Day is a gift**

**Enrichment: we have all been given gifts, talents, personality, abilities as well as 5 senses, taste, sight, touch, smell and hearing to enjoy the beauty of creation, art, interests, passions and people.**

**So Life Enrichment on the Home takes All of Us Working Together**  
                  **It may be an encouraging word, smile, pat on shoulder, hand all of us**  
**living and working on the home**  
                  **Enjoying all the unique, special and gifted of those who live and work**  
**on the home. This truly, makes our home so interesting/fascinating to learn or be inspired**  
**by others. And you too may be the inspiration.**  
                  **We bring these together on the home to make our life Enriched.**

**Results of Life Enrichment will be the building of relationships; opportunities to enrich each other's lives all of which results in the self-worth esteem & dignity for everyone.**

## **II. How Life Enrichment is organized on each home**

- 1. Welcome Home materials for moving in Move In coordinator will encourage/promote 'planning their home' as new residents move onto the home. LE Guide will help build relationships and ensure the person is known to the household staff.**
- 2. Life Enrichment Guides, supports and provides resources**
- 3. Getting to know the person, lifestyle assessment and My Story**
- 4. Calendar for small gatherings, celebrations on the home & Community Events**

**III. Whose role is Life Enrichment on the home: Role of Life Enrichment Guide on the Home plays a special role for the support & maintenance of Life Enrichment on the home**

- a. Facilitate weekly Planning on the home: bringing residents and caregivers together**
- b. Posting the plans, getting supplies and resources arranged**
- c. Being on the home to visit with staff, residents so as to enhance relationships and happy home**
- d. Be on the home for the small gatherings and facilitate**
- e. Post the required calendar for events in the staff room/area. Assist on the events**
- f. Celebrations on the Home**
- g. Assisting new residents move in process onto the home and household planning to introduce**

**III. Life Enrichment is Everyone's Job!**

**Visiting one on one with their Buddy, visiting with residents during care, building relationships with families of the residents**

**Join in on Small gatherings**

**Celebrations on home.**

**No matter your job - it's all our job to add Enrichment of life through Our relationships, daily gatherings and celebrations.**

**The foundation of the home during the move in: getting the self-determination, the history or lifestyle assessment and getting this information on the grid, in the care plans and communicating at stand up meetings as well as doing learning circles will help all staff to know the whole person.**

**We are going to join in a planning circle but first: look at some of these ideas that the Life Enrichment guide can bring to the home as resources for small gatherings:**

**Also this is a sample planning form that our homes use each week. At the end of this training, you can have a learning circle or anytime throughout home as things change and adapt your weekly planning form to best meet your homes.**

**(\*\*12/17 Lori edit the rest of this chapter)**

## **Home social gatherings/interests/hobbies**

**Ideas for Planning upcoming week:**

- \*Birthdays to celebrate (Staff and Resident) (special table, ritual....)**
- \*Welcome to new household members (resident, their family, staff)**
- \*Look at upcoming Community Events (activities) Schedule**

**Learning Circle questions: resident choice topics, questions, some may be seasonal**

**Things to read: Bible verses with a short devotion.....**

**Dominoes, board games, or various card games**

**Music sing alongs with DVD or instrumentalist**

**Various clubs: a red hat ladies club**

**Mens club**

**Book club**

**Crafts, or sewing or Gardening**

**Puzzles, Trivia, word games, reminiscing**

**Have singalongs with volunteer musicians or DVD's or even \_\_\_\_\_**

**“At the Movies” a special movie for the week**

**Exercise so many fun ways to exercise**

**Manicures**

**Read together My Story or fill out each week**

**If you have community sites inside your building such as a library plan on going to check out books, or a General Store, day to go to general store, or a video room to check out movies for movies on the home.**

(\*Book only) **Role of Life Enrichment Guide on the Home:**

1. Will guide, support, and help provide training and the resources for the Home residents, staff, families in order to achieve Life Enrichment on the Home. Such as be the member of the Home to ensure the weekly planning is consistently being done, that all members of the home on both shifts & the Home support is there. Ensure that the supplies and funds for events are available for the celebrations and small gatherings on the home. Responsible to know that all the My Story's are being maintained for the residents on the home as well as completed on a timely basis for the new residents moving onto the home.

2. Life Enrichment is the guide , expert and resource, however;  
Life Enrichment is Everyone's Job!

All caregivers and support for the Home should be visiting with the residents on the home, building relationships and maintaining relationships.

All caregivers are to volunteer once a month to lead or participate in a small gathering on the home.

All caregivers are to participate in the monthly Celebration on the home.

**VIII No matter your job - it's all our job to add Enrichment of life through**

**Our relationships, daily gatherings and celebrations. All caregivers should read all the My Story's of the residents on the home, can write encouraging thoughts in the extra pages at the end of the My Story. Read the My Story out loud to the resident as an enjoyable life enrichment/**

**IX. L.E. Guide, will :**

- 1) Complete the Weekly Planning form & staff monthly small gathering check-off
- 2) Will post the weekly planning in household staff room
- 3) Will get the supplies and resources to the volunteer for the small gathering or celebration; as well as make sure they are trained and know feel comfortable .
- 4) Will post Monthly Community calendar
- 5) Maintain the My Story in Resident Rooms and in notebook for staff

**Understanding the Person:**

**Sensitivity Training and  
our role in providing L.E. on the home.**

**4) Lori's Explanation of:**

**\*\***

**Totality Theory and How we take the 6 aspects of totality to build Understanding of people, build Life Enrichment gathering and community events., Because it reflects some of the barriers , needs, desires.**

**5) Learn Sensitivity Training**

**\*\* Lori's explanation of the end:**

**1) Know the person**

**2) Know their limitations**

**The Beauty of our home- we are making sure we do home**

**Being sensitive/understanding the resident =**

**Knowing how to communicate w/**

**A) vision impaired**

**B) hearing impaired**

**C) dementia**

If you have ever felt a little “bummed out,” down or depressed....you might of just experienced what life is like without enrichment or meaning..... It is when life seems meaningless and all you feel like is : I sleep, I get up, I use the bathroom, I eat/drink, I wait for the passing of time.....and I repeat all these things again..... Life seems empty...

**Life Enrichment on the means just that:**

**Life.....** Is more than just waiting for the passing of time, eating, drinking, going to the bathroom, sleeping and repeating these things. Life is a divine gift.... Life is precious and is meant to be abundant and overflowing with purpose and blessing. This is true no matter what your circumstances are, where you live or what your age is. Life is meant to be valued as a gift. Have you ever heard this: Yesterday is history, tomorrow is a mystery but today is the present. That is why is it a gift. For many of the people who live on your home, their faith is probably the most important part of their life and their belief that they are “still here” for a purpose: that their life is not in vain but God is still working on them and working in them. For your residents on the home one of their favorite verses may be :This is the day the Lord hath made let us rejoice and be glad in it.”

When we see life as a gift each day and it is special....we actually see and respect all those around us; acknowledging that we all are here for a purpose. Life is meant to be more than the passing of time....24 hours....a day....Life is meant to be full and rich with enjoyment.

Enrichment ..... because none of us want to just wake up....make it through the day...go to bed and repeat..... Inside all of us are special gifts, talents, personality, roles, interests and hobbies. Science has proven that “none of us are the same” all our DNA is different..... And knowing we are each unique adds a lot of interest to life. Enrichment in life and on the HOME is what makes life full and meaningful. That is why we need to get to know each other:

What are those things we have in common, what are special talents or interests ..... And even as we live and work together on the home...what are the special personality gifts: like encourager, hostess, mother, leader, etc....

By gathering this information about each other on the home: we do two things:

1. We build relationships..... Let me give you an example.....Vera

2. We build the Home with opportunities for purpose, meaning and joy.....and we build memories...we build self-esteem, dignity and we promote motivation & hope.

The joys of each day come from the giving and receiving of relationships on the home and the activities and experiences we share as we celebrate life...through learning circles, through special teas like the Mothers’ day, or other holiday celebrations, through the birthday party for the household members..... Even through the games, the exercises...whatever it is that your home enjoys doing together and reflects their interests.

**(\*\*Lori this is moved over from original book: compare...dictate... to finish this section of chapter.**

**Part 2 MOVE IN** plays a huge role in the LIFE ENRICHMENT for every member of the home:

**Life Enrichment on the means just that:**

**Life.....** Is more than just waiting for the passing of time, eating, drinking, going to the bathroom, sleeping and repeating these things. Life is a divine gift.... Life is precious and is meant to be abundant and overflowing with purpose and blessing. This is true no matter what your circumstances are, where you live or what your age is.

**Enrichment .....** because none of us want to just wake up....make it through the day...go to bed and repeat..... Inside all of us are special gifts, talents, personality, roles, interests and hobbies. Enrichment in life and on the HOME is what makes life full and meaningful. Our words to each other on the home are very important, our words can either build people up or tear them down; they can cheer on and comfort .

**Look compare and look at the difference of Move In on Home and the Traditional Nursing Home and being Admitted:**

**Move In Process.....** begins the Home journey for each new resident, their family and our caregivers.

### **Moving into Home:**

***You move In and make your room your home, decorate it, plan for it***

***You are asked through the self-determination form how you want to live: when do you want up, when and how do you want to bathe, when you want to go to bed,***

***You decide when you want to eat, where you want to sit, who you want to sit with, you decide what you want to order and eat.***

***You decide what lifestyle activities and routines you want to do based upon your interests and pursuits in life.***

***You are asked all throughout the day by the household staff: what do YOU want to do.***

***You live on a home with the same household caregivers.***

### **Traditional nursing home:**

***You are admitted***

***You fit into the routine and schedule of the nursing home***

***You are fit into the slot available on the day and time for bathing***

***You eat at the time the dining room opens, you sit where they tell you to sit and you eat what they put before you.***

**Raise your hand: Do you want the Home approach?**

**Raise your hand: Do you want the Traditional?**

**Now “if you were a family member” which of the following places would you want to be a family member of a person living in that setting (their mom or dad, spouse, etc.)**

In the Move in process, the family and resident will have received materials and tour regarding the values of home, explaining the household staff. They have received materials to help plan their move and support the transition they are going through.

**Move in : I Learned this from years at our Village, especially with those moving into our Independent Apartments....the planning of the move....**

**As for you.... Sometimes we only have a week notice or a day or so. Planning the mom is still important**

**We need to understand the move in and each of our roles / interaction as the household family can help the new residents and their families. When we begin our relationship with the new resident and their families moving onto our home then everyone will benefit.**

**Your role in the move in process begins with UNDERSTANDING... of course we have move in QA items for every department or service to ensure all the paper work, assessments, documentation Is done and the self-determination and getting to know them through the lifestyle assessment is complete but while all this is going on we must deliver this with Home in mind but also with kindness:**

Most of us have worked awhile in this area of care and have seen what families do when they move in. They are in the room, and helping put things away, decorating, helping their love one feel comfortable..... Can you image how they must be feeling? They are scared about “how will my mother, dad or spouse be treated” will they be cared for with compassion and dignity , will they be safe, will their needs be met..... Also they themselves are “grieving” this is sad for them to have their loved one not have the health they once did or be at the younger times in their life. Families may too be feeling guilty that they cannot do as much as they would love to do. So in summary two simultaneous feelings families are facing are grief over the medical condition and the move as well as guilt: am I doing enough, am I doing the right thing. Here is what we want our household caregivers to do with all our new families when they “move in” their loved ones in our HOMES. Offer support and encouragement verbally and non-verbally. Remember Each family and resident has been toured and given the household materials. Be sure and tell them we are part of the designated staff and we will be getting to know each other all the time, how much enjoy this home.

Realize the relocation of the resident: adjusting to three aspects of the relocation:

**\*\*Add explanation and ways to help**

**Lori’s Explanation = on 3 adjustments to moving**

- 1) Physical Setting
- 2) Social Setting
- 3) Identity

Your job is to **communicate verbally** the following to put their minds at rest:

- \*Tell them how much you love the home and the designated staffing,
- \*Tell them about some of the gatherings, celebrations or events.
- \*Brag on the choices in the café or dining.
- \*Tell them of all the mentor and guides who participate and that they will have a special buddy.
- \*Invite them to the gatherings and assure them you will help them get to and from until they learn their way around.
- \*Make sure the family knows where the staff room is, who you are.
- \*Tell the families when they come, do ‘one’ thing that brings the resident pleasure or something they enjoy whether it is special snacks, food, going outdoors, calling family, etc.
- \*Remind families to go back to the Home brochure, to the letter and other materials to support them.

**Your job is to treat them with a kindness and professionalism;** they need to see that you are trained by the way you conduct your care and your interaction with them. **: Smile, helpful, kind and follow through on anything you say you will do the move in day . Your kindness matters and helps build relationships.**

**Sensitivity training for helping the new resident on the home.**

**We know the difference of moving in and being admitted. We know how important it is on our household to know the resident from the move in process with the self-determination, lifestyle, getting to know the resident and the grid. But let me illustrate this with a very special person: Vera. I met Vera when I was 21 in 1982. I had grown up since 14 in nursing homes and worked laundry, dietary, housekeeping, activities, bath aide and office. When I came back after I had been to college, I was surprised that there were no real activities; so I put together a getting to know you history and interest form (used to teach for years at ss and act school)... It took 2 months to interview all the residents and my goal was to take what they wanted and develop an activity program for them,. I saved Vera until last... you would think after 7 years I would feel comfortable but Vera scared me. She scared me because of what she looked like:---  
So I went in and this is what I found out\_\_\_\_\_**

**Do you see Vera differently now? Sure you do and do you think you look at Vera differently now? I know I did . This is why we must know 'who they are' just as we know what their medical description and care plan is.**

**Let this motivate you personally to read what the Life Enrichment gathers about the resident and then talk to them about their identity , achievements and families.**

**This knowledge put into action is important for a new resident relocating: I have seen three adjustments that we can understand to help the resident:**

**Consider again Vera, the resident that I admitted she was scared of in the last session. I described Vera physically first and claimed that she avoided Vera. Later I learned that Vera had been a 2<sup>nd</sup> grade teacher and received a Teacher of the Year award from the Oklahoma state governor. She had touched countless lives, not to mention all the nieces and nephews whose college educations she paid for because she never married and had children of her own. As I came to know Vera and her life story, I began to see and appreciate all the blessings Vera had given. I no longer viewed the resident's condition or diagnosis, but saw the person, the life, in Vera as she made efforts to get to know her. It is so important that you get to know the people and take care of the whole person, not just their physical needs.**

## **Break out session:**

**Before interviewing the resident or if non-interviewable, a family member; do a learning circle which will be enjoyable and ask the household members in the first circle:**

***Facilitator:* \_\_\_\_\_ Ask....tell me a resident on your Home who loves to “Primp?”  
(Call on two caregivers to share)**

**Mention, how rewarding it is to see smiles on our faces as we think about how special our residents are that live on this home. Now let’s answer this:**

***Facilitator:* \_\_\_\_\_ Ask....tell me a resident who likes to help others?” (Call on two caregivers to share)**

**Explain, this is just a sample of how important it is to know our residents, appreciate their purpose and unique personality as well as how this helps us build our relationships in a positive meaningful way on the home**

Follow Up from meeting:

Calendar: fill in resident birthday, staff birthday and staff anniversary, the learning circle topic/question will be on the calendar M,W,F.....

The Home support will be doing a daily visit with their assigned Buddy

The Home support will be at the weekly planning meeting

The Home support will be at the in-service...

That means if you are at NC...you are part of a home.... Even those not here today but have an office job...they will be put on a home and they will also do the weekly 3 items above.

In addition, a housekeeper and dietary dining room aide will be at the in-services and planning mtg

Welcome Home Project Tour & Move In  
Welcome Home Project New Resident & Family  
Life Enrichment and planning circle handout  
Life Enrichment planning: Year at a Glance  
"My Story"

Home work:

Appendix 9: Pre-Move In Information

*Welcome Home Project Pre-Move In Packet.....*

***A personal word from the “Welcome Home Project”  
developer Lori Long, M.Ed. Gerontology***



Dearest Family,

We would like to take this time to offer some encouragement and moral support. Personal experience as well as working with many older adults and their caregivers has shown this to be a bitter-sweet time in not only in our lives but theirs. The same feelings as when a child leaves home or you relocate to a new community and start again.

Over the years, I have learned that while remembered events, reminiscences about different people and shared memories can cause us to feel sorrow and joy, we have the capability to control those emotions and feelings through “Reminiscence Therapy” and the intention of providing positive and healing powers to our heart. At this point in your journey you must make the decision that your mind and attitudes are powerful and can make a difference to your loved ones. Use this special time to REMINISCENCE and re-experience the love, warmth and memories that have helped shape the home. Remember, that our memories are a divine gift and that it is a time to give praise and thanks for a life filled with family, friends, love and yes the struggles of life that have brought out our faith and character.

This is also a time for the remaining items that your loved one is not bringing into their new home. These still have wonderful memories attached and what a joy for the family members to gather and reminiscence and take home a keepsake that will visibly remind them of the love shared.

Through the past 26 years of watching older adults (including my own Grandmothers), I have found that the transition from their home to our home is often challenging emotionally as well as physically. Once the process is complete, however, you will often find that they are much more at peace and settled as things are now in the right places and they are home

I hope this simple bit of advice in choosing to look for the “richness of life and how blessed life has been” will help you and your loved one find more opportunities for special moments and new memories in their “new home”. I hope this leaves you with a better understanding of what you are experiencing and yes, you are perfectly “normal” and all of us go through this same process. We understand that this is a very exhausting time for both you and your loved one, but with patience, and the skills in your mind, attitude and faith the transition process will go smoother. I have been through this as have many others.

Now we can begin to get their new home ready and enjoy living out together each day that we are blessed with.

Sincerely,

Lori Long, M.Ed. Gerontology

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Family "Creating HOME" Worksheet  
developed by Lori Hackett Long, M.Ed. Gerontology

**Family and Resident worksheet to do together and return \_\_\_\_\_ :**

Go through this room together and let your loved one show you and plan what they want to take to make their new home:

What is your favorite furniture?

Go through the home and pick out the furniture that can be moved to their new home and fit into the space:

- \*bed
- \*chair
- \*tv
- \*shelves
- \*side table
- \*bedding
- \*drapes

If you went through your home, could you gather your most precious treasures of pictures, knick knacks, etc... That you would want to bring to this new home?

- \*bathroom wall knick knacks
- \*pictures, other wall items
- \*knick knacks for shelves
- \*lamp

\*\*\*\* Maybe add to My Story: **“WELCOME HOME PROJECT”**

What are some things you do at in your home:

\*How & When do you celebrate Birthdays?

\*Do you like to have gatherings at special balls games i.e. favorite teams?

What did you do?

What type of refreshments?

Who would you have?

\*How do you celebrate things in people's homes: marriages, anniversaries, babies born in your home?

\*Can you give us some of your favorite recipes = Letter to L.E. Guide so we can incorporate in our Café Specials

## Life Enrichment

If you have ever felt a little “bummed out,” down or depressed . . . you might of just experienced what life is like without enrichment or meaning. . . . It is when life seems meaningless and all you feel like is: I sleep, I get up, I use the bathroom, I eat, I drink, I wait for the passing of time . . . and I repeat all these things again . . . . Life seems empty. . .

Life Enrichment on the home means just that:

Life . . . . Is more than just waiting for the passing of time, eating, drinking, going to the bathroom, sleeping and repeating these things. Life is a divine gift . . . . Life is precious and is meant to be abundant and overflowing with purpose and blessing. This is true no matter what your circumstances are, where you live or what your age is. Life is meant to be valued as a gift. Have you ever heard this: Yesterday is history, tomorrow is a mystery but today is the present? That is why life is a gift. For many of the people who live on your home, their faith is probably the most important part of their life and their belief that they are “still here” for a purpose; that their life is not in vain but God is still working on them and working in them. For your residents on the home one of their favorite verses may be: “This is the day the Lord hath made let us rejoice and be glad in it.”

When we see life as a gift each day and it is special . . . we actually see and respect all those around us; acknowledging that we all are here for a purpose. Life is meant to be more than the passing of time . . . . 24 hours . . . a day . . . . Life is meant to be full and rich with enjoyment through the giving and receiving in relationships, talents, hobbies, beliefs and more.

Enrichment . . . . because none of us want to just wake up . . . make it through the day . . . go to bed and repeat this mundane pattern every day. Inside all of us are special gifts, talents, personality, roles, interests and hobbies. Science has proven that “none of us are the same” all our DNA is different, and knowing we are each unique adds a lot of interest of life. Enrichment in life and on the HOME is what makes life full and meaningful. That is why we need to get to know each other: what are those things we have in common, what are special talents or interests. We all have God given gifts, talents and abilities as well as ability to experience life through our five senses. As we live and work together on the home . . . what are the special personality gifts: like encourager, hostess, mother, leader, etc. This really makes our home very interesting and family to learn or be inspired by others. We all bring this together on the Home and make our own life enriched as well.

By gathering this information about each other on the home: we do two (2) things:

1. We build relationships . . . .
2. We build the Home with opportunities for purpose, meaning and joy . . . and we build memories. . . we build self-esteem, dignity and we promote motivation & hope.

The joys of each day come from the giving and receiving of relationships on the home and the activities and experiences we share as we celebrate life . . . through learning circles, through special teas like the Mother's Day, or other holiday celebrations, through the birthday party for the household members. . . . Even through the games, the exercises . . . whatever it is that your home enjoys doing together and reflects their interests.

Think about the things that enrich your life and bring you joy. No matter what your age, you deserve those things that bring you happiness and contentment. Each Household Staff member seeks to discover the life enrichment interests of each of their residents.

The Household Staff is also there to encourage families in their support and involvement in enriching the lives of their loved ones.

## **Home Weekly Planning Circle**

The following is a sample form to use at each Home and Sister Home planning circle.

You can use it to fill in your own Home schedule for small gatherings and community events

## HOME PLANNING CIRCLE WORKSHEET:

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**Seasonal Learning circle for fun...building relationships of Home**

**Celebrations**

**Movies**

**DVD Television series**

**DVD music sing a longs & CD's** sing a long can play on the DVD player

**Reminiscent Box**

**Learning Circle**

**Games:** list specific i.e. Uno, dominoes, chicken foot, checkers

**Exercise:** list specific Kick ball, parachute, ball toss, volleyball

**Trivia**

**Devotionals**

**Book/reading club**

**Current Events:** newspaper/magazines

**History channel** Channel \_\_\_\_\_

**Animal Planet Channel** Channel \_\_\_\_\_

**Add any ESPN** football, basketball, baseball shows....

**add any Holiday Home** celebration

DVD: Bible Study, Music, Movies, Old TV series: Andy Griffin, Lawrence Welk, etc.

.....

**January: \_\_\_\_\_ Life Enrichment ideas for Home, learning circles, themes and reminiscent boxes**

**Holidays during this month:** New Year's Eve  
Snow  
Winter

**Decorating Home idea:** Have snowmen from Christmas or leave the snowmen)

**Special theme or activities**

**Sports:** College Bowl Championship / NFL Playoffs

**Questions for "learning circle" around the theme or time of year**

1. What do you remember about New Year's eve?
2. What was winter like?
3. Did you ever make a snowman?
4. What's your favorite college football team?

**Reminiscent Box or Boxes ideas:**

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**Home and Family Matters**

**Week of \_\_\_\_\_**

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**February: Life Enrichment ideas for Home, learning circles, themes and  
reminiscent boxes**

**Holidays during this month:** Valentine's Day  
"Love" Family, friends, spouse

**\* \* \*start planning garden & flowers\*\*\***

**Decorating Home idea** Hearts & Roses

**Special theme or activities:**

**Sport:** NFL Playoffs

**Questions for "learning circle" around the theme or time of year**

1. During your grade school years: what did you do to celebrate Valentine's Day?
2. Favorite flower and why?
3. What type of hobbies or crafts have you enjoyed?
4. Tell a story about a sweetheart?
5. How were you proposed to? Or do you have a story about how someone you know what proposed to in a unique way?

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***March*** Life Enrichment ideas for Home, learning circles, themes and  
reminiscent boxes

Holidays during this month: St. Patrick's                      Sometimes                      Easter

Decorating Home idea: Shamrocks                      Sometimes                      Bunnies/Eggs

Special theme or activities: (theme dinner on March 17<sup>th</sup> in Cafe?)

Sports: March Madness" College 64 down to Sweet 16, Final 4 then Championship

Questions for "learning circle" around the theme or time of year

1. What do you think about when you think of "St. Patrick's Day?"
2. Anyone grow up with family vegetable garden?
3. Have you ever read the Farmer's Almanac?
4. Who is going to win "March Madness" college Basketball?

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**Celebrations**

**Movies**

**DVD Television series**

**DVD music sing a longs & CD's** sing a long can play on the DVD player

**Reminiscent Box**

**Learning Circle**

**Games:** list specific i.e. Uno, dominoes, chicken foot, checkers

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**Trivia**

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**Book/reading club**

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**May: \_\_\_\_\_ Life Enrichment ideas for Home, learning circles, themes and reminiscent boxes**

Holidays during this month: May Day                      Mother's Day    Memorial Day

Decorating Home idea: Just Home décor

Special theme or activities: Mother's Day Tea

Sports: Baseball season starts

Questions for "learning circle" around the theme or time of year

- 1. When did wearing hats or gloves stop?**
- 2. What was the May Day tradition you remember?**
- 3. Why are Mothers special? Tell us about your Mother or grandmother**
- 4. Enid has Tri state:**
  - a. anyone in the band?**
  - b. Memories of tri state?**

Reminiscent Box or Boxes

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**June: Life Enrichment ideas for Home, learning circles, themes and  
reminiscent boxes**

Holidays during this month: Father's Day

Decorating Home idea: Just Home décor

Special theme or activities:

Sports: Baseball golf, track, swimming

Questions for "learning circle" around the theme or time of year

1. Who has a “fishing story”
2. The weddings you have attended, what is something memorable, unique or even funny
3. Why are Father's so important to us? Tell us about your father or grandfather
4. Wheat Harvest time . . . what are some of your thoughts about Harvest time.

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**July : Life Enrichment ideas for Home, learning circles, themes and  
reminiscent boxes**

Holidays during this month: Fourth of July

Decorating Home idea: Maybe a few flags

Special theme or activities

Sports: Baseball

Questions for "learning circle" around the theme or time of year

- 1. What does our American History/Heritage mean to you?**
- 2. Share how you celebrate 4<sup>th</sup> of July**
- 3. anyone been to the City fireworks display?**
- 4. What is your favorite summer fruits and vegetables?**

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**August: Life Enrichment ideas for Home, learning circles, themes and  
reminiscent boxes**

Holidays during this month: School Days

Decorating Home idea

Special theme or activities: Back to School

Sports: Football starting

Questions for "learning circle" around the theme or time of year

1. What is your favorite season of the year and why?
2. tell about your school days
3. What sports did you play in school or even as an adult?
4. If you had advice to share with school kids today, what would it be?
5. What is a teacher's favorite "teacher gift?"

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**September: Life Enrichment ideas for Home, learning circles, themes and  
reminiscent boxes**

Holidays during this month: Labor Day

Decorating Home idea: Pumpkins, leaves, scarecrows

Special theme or activities

Sports: Baseball Finals...World Series

Questions for "learning circle" around the theme or time of year

1. How have you celebrated Labor day?
2. Tell us about family reunions in your family
- 3.
- 4.

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Use this agenda form to help with organizational “master calendar”  
\*\*\*\*\***Ideas but not limited to for small gatherings:**\*\*\*\*\*

**Seasonal Learning circle for fun...building relationships of Home Celebrations**

**Movies**

**DVD Television series**

**DVD music sing a longs & CD's** sing a long can play on the DVD player

**Reminiscent Box**

**Learning Circle**

**Games:** list specific i.e. Uno, dominoes, chicken foot, checkers

**Exercise:** list specific Kick ball, parachute, ball toss, volleyball

**Trivia**

**Devotionals**

**Book/reading club**

**Current Events:** newspaper/magazines

**History channel** Channel \_\_\_\_\_

**Animal Planet Channel** Channel \_\_\_\_\_

**Add any ESPN** football, basketball, baseball shows....

**add any Holiday Home** celebration

DVD: Bible Study, Music, Movies, Old TV series: Andy Griffin, Lawrence Welk, etc.

.....  
**October: Life Enrichment ideas for Home, learning circles, themes and  
reminiscent boxes**

Holidays during this month: Halloween

Decorating Home idea: same as September

Special theme or activities: Trick or Treat

Sports:

Questions for "learning circle" around the theme or time of year

1. What was the tradition of “Trick or Treating”?
2. Favorite fall foods and recipes
- 3.
- 4.
- 5.

**Reminiscent Box or Boxes**

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*After the weekly planning meeting, fill out the following sheet "Home and Family Matters" for each week. Then post a copy in the care givers work room for the staff and by the staff hall sign as well as the living area...so families and residents will have this weekly communication and feel free to attend. Encourage members of the household know they can come and do a gathering or come sit in between chores on the home; including mentors, nurse leaders, guides on the home.*

## **Home and Family Matters**

**Week of \_\_\_\_\_**

<b><u>Day</u></b>	<b><u>Morning Home Gathering</u></b>	<b><u>Community Event</u></b>
Sunday	_____	_____
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____

**HOME PLANNING CIRCLE WORKSHEET:**

**Instruction for Life enrichment if Monthly Calendar of Community events set, fill this in so can communicate. Also Find out any birthdays from HR staff and Med Records Residents and have filled in.**

**Before meeting: fill in blank for: 1. Upcoming Birthdays next week, 2. Upcoming Holidays, 3. Decorations, 4. Special Community Events**

**\*\*Note to LE.... Get list of resident and staff birthdays for June..... staff anniversary dates..... (includes resident birthdays, staff birthdays, staff anniversary date, welcome to new resident & family, welcome to new staff.....on that week)**

<i>Monday</i>	<u>Small Gathering AM</u>	<u>Community Event PM</u>	<u>Birthdays</u>
<i>Tuesday</i>			
<i>Wed</i>			
<i>Thursday</i>			
<i>Friday</i>			
<i>Saturday</i>			
<i>Sunday</i>			

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**Current Events:** newspaper/magazines

**History channel** Channel \_\_\_\_\_

**Animal Planet Channel** Channel \_\_\_\_\_

**Add any ESPN** football, basketball, baseball shows....

**add any Holiday Home** celebration

DVD: Bible Study, Music, Movies, Old TV series: Andy Griffin, Lawrence Welk, etc.

.....  
**November: Life Enrichment ideas for Home, learning circles, themes and  
reminiscent boxes**

Holidays during this month: Thanksgiving

Decorating Home idea: leave pumpkins & leaves

Special theme or activities: special Thanksgiving Family meal

Sports:

Questions for "learning circle" around the theme or time of year

1. The first Thanksgiving?
2. What inspired you with the Pilgrims
3. How do you celebrate Thanksgiving
4. Let's make a thanksgiving list of friends & family recipes & see what was most popular
5. What are you thankful for

*Reminiscent Box or Boxes*

*After the weekly planning meeting, fill out the following sheet "Home and Family Matters" for each week. Then post a copy in the care givers work room for the staff and by the staff hall sign as well as the living area...so families and residents will have this weekly communication and feel free to attend. Encourage members of the household know they can come and do a gathering or come sit in between chores on the home; including mentors, nurse leaders, guides on the home.*

## **Home and Family Matters**

**Week of \_\_\_\_\_**

<b><u>Day</u></b>	<b><u>Morning Home Gathering</u></b>	<b><u>Community Event</u></b>
Sunday	_____	_____
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____

**HOME PLANNING CIRCLE WORKSHEET:**

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**Before meeting: fill in blank for: 1. Upcoming Birthdays next week, 2. Upcoming Holidays, 3. Decorations, 4. Special Community Events**

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**Add any ESPN** football, basketball, baseball shows....

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DVD: Bible Study, Music, Movies, Old TV series: Andy Griffin, Lawrence Welk, etc.

.....

**December: Life Enrichment ideas for Home, learning circles, themes and reminiscent boxes**

Holidays during this month: Christmas

Decorating Home idea

Special theme or activities: Christmas Stove  
Family & Home Christmas Party

Sports:

Questions for "learning circle" around the theme or time of year

1. Tell about either your Christmas morning with your Children or when you were a child?
2. What does Christmas mean to you
3. How can you help someone this Christmas
4. What is your favorite Christmas song
- 5.

*Reminiscent Box or Boxes*

*After the weekly planning meeting, fill out the following sheet "Home and Family Matters" for each week. Then post a copy in the care givers work room for the staff and by the staff hall sign as well as the living area...so families and residents will have this weekly communication and feel free to attend. Encourage members of the household know they can come and do a gathering or come sit in between chores on the home; including mentors, nurse leaders, guides on the home.*

## Home and Family Matters

Week of \_\_\_\_\_

<u>Day</u>	<u>Morning Home Gathering</u>	<u>Community Event</u>
Sunday	_____	_____
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____
Saturday	_____	_____

# Community Sites/Activities

Convention Center.....Show Time..... Groups, guests...music other.... Birthday Celebrations

The Gym.....Exercise Class (PT at Skilled)

The Spa.... Choice of spa treatment each week

Rec Hall..... Bingo, Dominoes, Cards, Games

Church

Video Store

Grocery Store

Beauty Shop

Computer Bar

Bedlam Snack Center

Doctors office/Clinic

Other specific community events :

Men's Poker Night

Women s' Neighborhood .... Each neighborhood prepare a snack, dessert

Home social gatherings/interests/hobbies

Family Planning for upcoming week:

- \*Birthdays to celebrate (Staff and Resident) (special table, ritual....)
- \*Welcome to new household members (resident, their family, staff)..... Dinner (Special table and program..... Time to visit after wards)
- \*Outings to Grocery Store/ snack center
- \*Volunteers to check out “video” for Movie/show times at HOME (decide show times)
- \*Manicures
- \*Letter writing and Journaling “MY STORY” –written by Lori Long
- \*Kitchen: breakfast menu for next week.....desserts
- \*Look at upcoming Community Events (activities) Schedule
- \*Learning Circles: resident choice: reminiscing topics/seasonal, etc.

Community Events (activities)

\*mornings: \_\_\_\_\_(\*name/room) \*afternoon: \_\_\_\_\_(name/room) \*evening:( name/room)

“Home is where the heart is”

Where have you been on the home? Have you done any celebrations with the resident/staff, one on one or life enrichment? What about the staff as a whole or is it the same people....

Life Enrichment guides:

Fill out a weekly “Home and Family Matters” for each week of the month. Bring this to the month previous to the events....in-service for monthly Household planning meeting . Every member of the household should sign up for a small gathering including mentors, nurse leaders, etc.....

Then post a copy in the care givers work room for the staff and by the staff hall sign as well as the living area...so families and residents will have this weekly communication and feel free to attend.

## Examples of Choices for the week day small gatherings

**Celebrations** (Tues for Murray/Mc & Brooks, Rogers/Skilled...Thursday for Autry/Guthrie)

**Movies**

**DVD Television series**

**DVD music sing a longs & CD's** sing a long can play on the DVD player

*Reminence Box*

**Learning Circle**

**Games:** list specific i.. Uno, dominoes, chicken foot, checkers

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**Current Events:** newspaper/magazines

**History channel** Channel\_\_\_\_\_ **Animal Planet Channel** Channel\_\_\_\_\_

**Add any ESPN** football, basketball, baseball shows....

**add any Holiday Home** celebration

#10c

Dear Families of Homes of \_\_\_\_\_(name):

We are so excited about a project that we your household caregivers are working on for your loved one. We are making a book called "My Story" that will be given as a gift for your loved one to enjoy in their room. We are going to put this book in a binder and add additional blank pages at the back for caregivers, family, and friends to write encouraging notes or place special cards. This book can be read by the resident or to the resident.

It is important that we express to them how special they are as a person as well as this gives all of us a personal connection and opportunity to incorporate the unique detail of their life history into our daily relationships or conversations.

We are asking that you fill in as much as possible and then during the month of September one of our caregivers on the Home is going to finish the book with your loved one. We hope to have all of these copied and presented to the residents for Christmas.

If you have any questions, call \_\_\_\_\_ and ask for your Life Enrichment Guide for your Home.

## **My Contribution to Life Enrichment on The HOME**

### ***I. My Story***

This booklet is information we used called “getting to know you.” It is important for all of us who are caregivers to know and incorporate into our daily conversations during just being with the resident or giving specific kinds of care. It helps us to connect to each person we are caring for.

This booklet will be in the chart and a copy in the room. During your visits please read it together at any time and add little notes or cards to the empty pages at the end.

### ***II. Reminiscent Box***

We have Reminiscent boxes that we use each week. When we see “an object or item” it releases memories & feelings to enjoy. We want to encourage you to put together a Reminiscent box that your loved one can keep in the room so we caregivers: our staff and your family can enjoy this activity together with your loved one. Please call our Life Enrichment guide at \_\_\_\_\_ when it is ready to bring out.

Ideas for these boxes are: picture books, mementos, recipes, music, old photo albums, awards or even Themes: such as, gardening, sewing, knitting, fishing, tools, jewelry.

### ***III. Information from Past to help with the Present***

a. Did the person spend time outside, either for work, recreation, hobby?

If yes, what time of day and for what.

b. When the person got upset and needed something to help them cope...release the stress or tension. What would they do?

Did they take a walk?

Do housework?

Do laundry?  
Read?  
Do yard work?  
Eat?  
Drink?  
Take it out on others?  
Hobby? If yes, what hobby

c. When did they bathe? Anything special they enjoyed or liked to enhance bathing?

d. Did they have a routine in the way they “dressed” themselves... i.e. socks first, pant, then shirt....

e. List favorite foods

f. Did they snack, when and favorite snack food.

g. The following are some of the Life Enrichment we do at the Home. Mark those that your loved one enjoys:

Individual/One on One

Small Group

Community

## **My Story Overview/Instructions**

For our facility, we combined our original My Story paper and our social history/activities page. This helped our facility combine a regulation with our Welcome Home.

My Story Instructions for Life Enrichment/Overview for Administrator:

1. When new residents moves in- the life enrichment director will meet with them to introduce their selves and set their first visit together. Most of the time, it is the day after they move in.
2. The Life enrichment will have their first meeting with the resident and follow the following form. After this first meeting, life enrichment and the resident will set their second meeting.
3. After this first meeting, attend stand up meeting on home to give the first overview of the new resident.
4. Have second meeting with resident and then set the third meeting.
5. Attend that days stand up meeting to give more overview of resident. Ask staff if they have noticed anything that the life enrichment needs to know.
6. Create the residents' interest sheet for inside of their closet.
7. Have final visit with new resident.
8. Attend stand up on home to give final overview of resident and put information on the grid.
9. Make two copies of My Story page. One copy turned into administrator, then given back to Life Enrichment to stay in their binder in office. One copy will stay in the resident chart.
10. Bring My Story page to next scheduled Neighborhood Council and give brief overview to the group.



**Follow up Questions: Drill down on the questions to get information on the Resident so that we can support them. (Example: If their day was watching TV... what types of shows and what times? If they exercised... enjoyed clubs... activities, etc.)**

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**My job is to help you enjoy the things that are a part of your routine... what is your goal?**

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**Show the resident our calendar and explain a few things that we have going on throughout the week, ask if they enjoy and of these? Ask the resident if you can come and escort them to those activities and also to the café and sit and eat with them at times and introduce them to other people, residents and staff.**

**List the activities that they enjoy:**

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**LAST: Ask the resident “Can I come back tomorrow and continue our conversation to find out more awesome things about you? What time do you prefer? \_\_\_\_\_**





**DAY 3:**

**Tell me a little more about your family. (Mom, Dad, Number of siblings)**

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**How did you meet your spouse:**

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**Number of Children:** \_\_\_\_\_

**Names of Children:** \_\_\_\_\_ **Lives in:** \_\_\_\_\_

**Information about Grandchildren:**

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**Where have you traveled:**

**Place:** \_\_\_\_\_ **When:** \_\_\_\_\_

**What did you do there:**

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**Where have you traveled:**

**Place:** \_\_\_\_\_ **When:** \_\_\_\_\_

**What did you do there:**

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**Where have you traveled:**

**Place:** \_\_\_\_\_ **When:** \_\_\_\_\_

**What did you do there:**

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***We are so proud of you because you are:***

(write out own or circle those personality traits)

A wonderful mother

A wonderful father

You are kind and thoughtful

You are loving

You are smart

You raised an outstanding family

Everyone that knows you loves you

You have helped so many people

You are a wonderful Christian example

You are Thankful

You are a good friend

You are loved

***We are so proud of what you do:***

List Past Achievements:

Educational experience:

Group/ Civic Volunteer service:

Church involvement:

Family achievement:

Hobbies:

## Chapter 3 / Session DVD

**Home work:**

**Chapter Four.....**

**Overview of concept and what will be accomplished.....**

**Dialogue for in house direct teaching.....**

**Forms can us to build and maintain home.....**

**I would like to begin the last session, Session Four by remembering what we have learned, what we have agreed to commit to and how all of this; which is the foundation of building home fits together in the daily life, weekly, monthly, quarterly and annual things that go into your home. First and foremost; we agree, value and we believe in Home. We realize that every one of us have a need to experience and make home for the quality of our life. We have all agreed that we are committed as household members on our home and sister home and the homes which means that we are dedicated to do our chores, our jobs on our home in a way that is going to support the home. We agree to support a designated household staff, which means we all agree to not only honor the residents on our home but to honor each other as caregivers no matter our job, by working together as a family and that we want to continue to grow together continually in our skills, knowledge of our jobs as well as building our home. Our daily life and work on the home is always building each other up in our relationships as we grow on our home with one another, our residents and their family.. The value and the word HOME is key and our designated household staff makes it work. This is the beginning foundation which is that we believe in our committed to create and maintain home.**

As we have stated throughout the journey toward making your home and maintaining your home, a home is built on a foundation which believe means there are three components that are over arching this organization for home and they are one: We believe in the right and values are right that everyone of us need a home, which means that we are committed as the household caregivers and designated staff on the home her sister home., And that we are going to fulfill our chores or jobs on the home in such a way that it supports are home where we work and we are residents live. Just as in our own homes, with our own families in which we all have chores and work together to make our home... It's important that you remember that same principle applies to the welcome home project. This means each member of the staff will fulfill the responsibilities that are needed or given in order for the home to succeed. So as caregivers we work together as a family of a designated household staff. All of us, the designated caregivers, the residence on our home the families at the residence on the home all understand the vision and commitment for home and how important it is in building a meaningful life, relationships and quality of life.

Two, the designated household staff and all of the homes support mentors, guides will maintain to work on the quality and professional standards as directed to the state and federal regulations, your own organizational policies all the while The overall umbrella is to focus on the home of the residents living there.

Second, because we do believe and are committed to the value of home for each and every person; our homes will consist of the same residents on our home of whom we care for and a designated household staff. That staff also includes The home mentor, the home nurse leader, the home life in Richmond guide, the homes other nurse administration support, the homes nutrition and environmental guides. Together as a household staff family we are committed and invest as part of the life of the home, support and invest in our home where we work together and we promote the life of the home with the residents,.

Third, with knowledge we work together to maintain the quality and professional standards as it is directed in the state and federal regulations, as well as your own organizations policies and procedures. We will maintain these standards on our homes with the focus of the residents living on our home, come first. in this process. This means that it is the duty of each member of the household staff to know their standards of care assigned to their particular chores or job on the home. It is the duty and responsibility of each of the household members to complete those chores or jobs on the home with consistency and responsibility to the role that they have on the home. Our household family and work of home bring meaning and rewards to all as we continue to fulfill the regulations and professional standards in our home.

Fourth, there are other parts of the foundation of the home that actually have a rhythm of where it fits into how the work is done on the home or how home is organized. I like to call this the heartbeat of the home . The rhythm of the home spot gives the liveliness for maintaining the home concept which before the home was typically I am more medical model and institutional concepts for people to live in. Let me caution you, if you are not careful to hold each other as a household designated staff accountable for each of Foundations of the home, you will slide back into a medical institutional model. So it's very important that you see these

foundations are essential as we look at how they are implemented in a rhythm of your organization, as a rhythm for your home. So we're going to look at how we're going to combine these foundations that we have already been through and how they sit in to the rhythm of the work that you were doing.

**given through the quality assurance program, the organizations standards and regulations with the vision and arching umbrella of home over all we do.**

**This is in regards to putting all the foundational elements of the home into how it is implemented and organized, for instance there are certain foundations that are understanding the rhythm of the home, it illustrates how maintaining the home is done through your organized work of the routines, purpose, meetings of the home.**

From the foundations that make home, we are going to look see exactly where they fit in to the work that you do on the home. The first in the rhythm of the work on the home are those things that occur daily. Imperative is the daily standup meeting. The standup meeting is very important. It is between the changing of the shifts and it is the first heartbeat of the home. There are three reasons this is so important.:

It is here in this meeting that every member of the designated household staff, Who are coming on to their particular work shift or who have already worked and are getting ready to leave for the day come together to communicate exactly what is happened on the home, what may need to occur with the new shift coming on. It is vital that open communication, as to why does occurred on the home and possibly what is going to be happen if their labs need to be drawn, if someone is got an appointment or if there is a celebration on the home coming up. It's vital that everyone on the home understands what is happening and that they are equally important no matter what their job or chore is to communicate with the other members of the home but they've served and also make sure that they clearly understand what is going on their home at this particular time.

Second, it's also very important to talk about special needs that have happened on the previous shift this need to be considered on upcoming shifts. For instance, needs in nutrition of a particular resident, or hydration, or pain management, or skin care, or falls and restorative, our life Enrichment; whatever special thing might have come up.. You can see the value the brings to the continuity of care as

well as giving confidence to the household staff of being able to put the resident first.

Third, it is at the standup meeting, that every member of the household staff participates in the exchanging of knowledge, information, observations on the home. Each member has unique opportunity due to their job to observe things on the home and can spread that information. Knowledge gives each member the information to build the confidence and assurance to do a job well and to empower the building of relationships on the home to all the designated household caregivers. In an institutional setting, with its bureaucracy, it is hard to spread the appropriate information that needs to happen on each home., But here we have an effective way through the standup meeting that builds and empowers each member of the household to do their job well on the home. This is where we grow through knowledge and empowerment in our careers on the home. **You will see your household staff bloom into leadership and pride in their work on the home as their voice, opinions, insights are shared and help bring about better results and a greater success on the home.**

Now, each home needs to maintain the format of the standup meeting. And that is by following the standup agenda. We provided a sample of what we like to use, but you may have your own format; you want to ensure that everyone consistently follows your format. The stand up agenda should include all three shifts documenting a twenty four hour period. Needs to be discussed in the notes that were discussed or assignments made. Standup meeting needs to have a facilitator whether it might be a nurse leader or a household charge nurse that is going to take this agenda , I will have notes on this and keep this in the standup notebook that is maintained in the household staff area. The standup notebook, with the documentation of the previous standup meetings as well as the current standup meeting is very important for mentors, nurse leaders and if someone has been off of work they can review what has happened while they have been gone. this is a record for staff of been off work on days off for vacation to be able to go back and review what happened on the home while I was gone. During the standup meeting, it's a perfect time to remind and hold the caregivers accountable to ensure that their documentation was completed before that they leave for the day.

The daily standup meeting must follow a consistent agenda of what is to be communicated and recorded. It is the importance of the agenda and each shift following this agenda and then keep it in a book: The standup notebook ;so that if someone has been gone they can go back and review. This is a record that can be reviewed by staff members to catch up if they have been on vacation or if they've been gone. This is a perfect time to remind everyone to make sure that their documentation is complete for the time that they have been at work on the home. As you look at the agenda that we have used as a sample, we have put two special things on our agenda to make sure that we communicate to all the members on our home, They are in very important to new members of the home whether there a new resident that has moved in that day or will be moving in the next day or it is a new caregiver that has joined our designated household staff . You can see how this rhythm of the home, the daily standup if it involves a new resident moving in or a new staff member then we all work together to do our part for that portion of the rhythm of the home. By communicating in the standup meeting about the new resident, the self-determination will be done the my story from the life in Richmond or there but it will be done and they will be put up on the grid. If the new member coming onto the home is a staff member, they will have been signed a peer mentor or a training buddy and will follow the orientation that you have set up. To add added support for the standups on the home, the nurse leader will typically be at one of the standup meetings for added support, accountability and even input into what is happening on the home.

The nurse leader my typically come between the morning shift, dayshift and the evening shift... And after that standup meeting it's important to look at the grid. Because the grid is what you watch everyday..., it represents what the resident wants, their choices of how they wish to live. The grid needs to remain updated because it's going to guide the staff and indicate the choices of the resident: as to when they want to get up go to the café have a bath and other life in Richmond or activities of daily living choices. The grid is going to show all of us caregivers how they want to enjoy their day and received their care.

There has to be a place where the household staff can maintain their work on the home and you may have a designated area where the grid is, and you can organize information in your staff room by: putting up with a bulletin boards that show us where to look for certain things, for example; one. there's a household safety matters. Two, family matters It might be a notice of a community celebration, the family is hosting a birthday celebration or the life enrichment activities plans.

Three, a bulletin board could be for memos on the announcements that come up... It's important to maintain the organization of the household stuff time because there may be time she would go another sister home and when you go on that staff room they're all maintained in the same manner. This is in the home right there for all of you to have the knowledge that you need to be able to do the work that is needed.

The daily rhythm of the home Includes the life enrichment, Which is all of our jobs to enjoy building relationships and the opportunities to create , share in meaningful experiences together, such as on the home are small gatherings that the residents and the staff have planned at the planning meeting.

Another very important part of the daily rhythm of the home is the café, the residence choose when they want to go to the café and what I want to order off the menu and they do this breakfast, lunch and dinner. Not only is the café a wonderful time of getting to exercise their independence by choosing what they want off the menu or a special but it's also a very special socialization time. Many older people of gone out to eat a lot and this is just a very normal atmosphere in which they have been a custom.

Of course throughout the day the activities of daily living that are required by the resident are carried out under the umbrella of their home and buy the designated house.

On our particular homes, the residents in the life enrichment guides have chosen to use the afternoons as a social event and so the residence from various homes all come together in an activity center to have a community event.

I think you can see as you look at the organization you have, that many of these things you already have going on a daily basis and now they will just be incorporated with the vision of home and how these are all part of the foundation to maintain home.

There are also a few of the foundations that we've already learned about that are done on a weekly basis, one of them is the weekly planning circle on the home and it is normally done between a shift change so that staff from several shifts, residence, the home support such as the mentors, guides, nurse leaders can all look at what is coming up next week as far as any birthdays, celebrations or whatever it is that they home caregivers and residents would like to see done. The weekly

planning circle is so important for building the relationships on the home, bringing meaning for opportunities and ways that we can enjoy life together. When we all work together, it makes for a happy home.

The other weekly rhythm of the home is the Neighborhood Council where all of the homes mentors, nurse leaders, guides come together to communicate and spread any information to the council or from the council back to the homes. It also is a time for accountability for the various foundations of the home such as the quality assurance program, the move-in program, care report, quality assurance improvement performance, the orientation and training of the household staff, just the evaluation of each home and that everything is being maintained so that we can continue to thrive on our homes.

Not just stop for a moment and allow yourself to reflect how logical and easy it will be to see the daily rhythms the weekly rhythms that your organization is doing so that you too will be able to maintain the home in its heartbeat with the rhythm. We're not asking you to create a lot of new meetings were asking you to take those elements in your organization and put with it the foundations of the home.

You may chose to put things such as in-service training and family care conferences into the Monthly work of the home. These are other requirements that you do already is the in-service and we have chosen rather than to do two separate in services to have one to our in-service. But your organization is unique and you will know what works best for you. It's very important that at each in-service, in addition to the regulatory topics that NACHA has their topic and that you discuss one of the home concepts.

There are also Quarterly requirements required in the regulations that will fit in this rhythm of the home.

We also have some wonderful Annual Celebrations on the Home that we do and I know you do as well. Think about your own life in the life of your family as to how much you enjoy when it's time to celebrate someone's birthday, get together for a holiday. The celebrations on the home really bring everyone together in a very special way. have done the same thing on Mother's Day's , Father's Day,, Easter or each home has their own Christmas celebration rather than being one just large In addition when members of our household are getting married, having babies, or resident couple is celebrating an anniversary Resident has a birthday these things are celebrated. We are celebrating one another, we are celebrating life

and we are celebrating opportunities to live life to its fullest. There are times annually there a big community events such as an annual trick-or-treat, a annual Easter egg hunt, and annual Thanksgiving dinner In which families are invited.

I hope that as we have gone through the foundations of the home and how you can see that your organization Marie have several elements put into place so that you're able to bring that home concepts and successfully maintain it. You should be able to see how all this fits together into the rhythm of the home; How each foundation of the home sits daily, weekly, monthly, annually.

I am so proud of you, I'm so proud of your organization. What you were doing is going to improve the quality of life for the residence, and the household caregivers on the home.

**It is so important to remember how special you are as a member of the home and how special each person is. I love this verse as for me and my house we will serve... It's not about me, it's not about you it's about we on our home and how each of us play a crucial role. I'm very proud of you I'm very proud of each of you I'm a proud of we the home.**

Dialog for session 4

**Session 4: Rhythm of the Home: maintaining the home through the organized work of the home & routines**

These foundations of the Home, today we are going to look at and review the Rhythm of the Home. How exactly the foundation of the home works in the daily life of the home, weekly, monthly, annual times during the year; where you should see these foundations at work in the Home.

Each member of our Home as household caregivers are the key to ensuring that we maintain the FOUNDATIONS of the HOME; that we are first upholding the value and right for this place to be the HOME of every resident as well as that we maintain the quality standards and organizational policies and procedures. Each member's voice, observation and ideas are what makes us able to achieve all the goals of Home and Quality Care simultaneously. We all must be on the same page, accomplishing the same vision and this is the time to work out any differences with how to accomplish all the FOUNDATIONS of the HOME organizationally.

This job as a designated caregiver is rewarding because not only do we have our set jobs/chores on this home but when we walk into our "place of employment," we are actually walking into people's HOMES and getting to help build this home daily. Be homemakers, promote life enrichment and make a difference in so many lives.

**Remember how our home is built upon a Foundation:**

**We believe in and value the right and need of everyone to have a Home**

We are committed as members of our household to do our chores ?jobs? in a way that support the Home.

We, as household care givers; work as a self-led team and family to grow together in our daily life/work on the home in friendship and service to our residents, each other and our residents family members.

We acknowledge and work to **maintain the quality** and professional standards as directed through state & federal regulations and the organizational policies & protocols on our Home with the focus on the resident living on the Home comes first in this process. Because we value Home; our Home will consist of the same resident we are for on the home and **designated household staff** as well as our Home?s mentor, nurse leader, life enrichment guide, environmental guide & nutritional guide.

It is the duty of all the household staff to know the standards of care and complete them consistently and with responsibility to our role on the Home

Our review of the Foundation shows how we organize the home and now maintain the home ; I call this the 'Rhythm of the Home; it is how things become and stay routine; where they just happen just like a heartbeat. The rhythm of the home is the heartbeat of the home that keeps the life blood running through the foundations to bring life to the home and all who live and work on the home.

This repetition of the reviewing the foundation, the routines will reinforce the monitoring, maintenance and accountability of keeping each foundation in the home strong. That is why I organized the home in a way that you place it into your routines. Each of the Foundations are either: a. ongoing b. daily, c. weekly, d. monthly, e. quarterly or f. annual.

1<sup>st</sup> Foundation: The designated staff and the Foundation of home training for all new employees: this is ONGOING \_\_\_\_\_ because we value Home; our Home will consist of the same resident we are for on the home and **designated household staff** as well as our Home?s mentor, nurse leader, life enrichment guide, environmental guide & nutritional guide.

2<sup>nd</sup>: the Home materials included in the Family & resident information and in the new employee orientation: this is ONGOING

3<sup>rd</sup>: the Learning Circle: this is ONGOING

4<sup>th</sup>: The household staff room/ area, self-determination form and grid

5<sup>th</sup> The **daily Stand up**

6<sup>th</sup> **Neighborhood Council: Weekly**

7<sup>th</sup> **Planning Circle: Weekly**

8<sup>th</sup> **Small gatherings, Community Events: Daily**

9<sup>th</sup>: **Move in process On going**

10<sup>th</sup> **In Service Training**

11<sup>th</sup>**Monthly Residents Council**

12<sup>th</sup>**Quarely Council: QAIP**

**Now you see the foundations and where they fit into the routines of the work of the home...**

**Let's take them by daily or weekly or monthly:  
(Everyone get this rhythm deep into you!!)**

## Daily rhythm of the Home:

### \* The **Stand-up Agenda**

\*the **documentation**: i.e. the **communication notebook**, as well as complete any other documentation required for the care done on the home such as treatments, MARS, ADL's , Restorative, Nursing documentation, Care plans, M.D.S.

### \*Café

### \*Grid

\***Staff room: Household safety matter bulletin board, household family matters bulletin board**

### \*Small gathering

The **daily Stand up meeting** between shift staff changing is very important to the heartbeat of the home: first, here every member of the household staff coming on or leaving communicates what has happened or going to happen on the home for this time frame. Second, it is also important in communicating the special needs of those residents living on the home such as: pain, skin, falls, restorative, nutrition, etc. Third, it is very important that everyone working on the home during this time, that everyone hears and participates in the knowledge of the Home because the "spreading of information and reports" brings information to the household member to build confidence and empowers them to do their job well on the home.

In the institutional setting it is hard to spread the information; but through the stand-up meetings and in-service business agenda it is easy to spread the information. This builds and empowers every member of the Home to do their jobs well on the Home

Each home needs to maintain the format of the Stand-up meeting and use the **Stand-up Agenda** having a facilitator conducting the stand up and making notes on the agenda to keep in the **Stand-up notebook**. This record can be reviewed and read at any time by staff members to catch up on the happening of the home. It is important for the mentor, guides, household staff who may have been gone to look back over and see what has been happening on the home.

During the stand-up meeting, remind the household staff to document on the **communication notebook**, as well as complete any other documentation required for the care done on the home such as treatments, MARS, ADL's , Restorative, Nursing documentation, Care plans, M.D.S.

The Agenda of the stand-up meeting has two other items that are important for new members of the home; whether those members are new residents living on the home or new care givers joining the household staff.

For the resident, the rhythm of the Home continues through the move in process with the Welcome Home Project packet. If a new resident is moving in, the Life Enrichment Guide will either bring the move in packet and ask for volunteer or they may take the packet to the new resident and family. The Life Enrichment Guide for the home will talk to the Family to set up a small gathering time on the home to do the ?Welcome Home Project Learning Circle.? The packet includes a welcome poster signed by the staff, a newsletter & brochure on the home, free café meal tickets for guests to eat with them and a complementary beauty salon visit and invitation to Welcome Home Project Dinner on last Thursday night of month.

For a new household member, beginning to work on the home, the rhythm of the Home continues through the Welcome Home Project Orientation program. In new staff member training: on Welcome Home Project; a Buddy household member will be assigned to go over the training checklist. They will also begin seeing the films for each of the first five days.

The stand-up meeting on the home continues on all three shifts changes. During the day and afternoon shifts, the Home Nurse leader as well as the Community and or Clinical Mentor will be at the stand-up meeting. Actually the Community Mentor will be on your home from thirty minutes before and after the shift of household care givers change. This brings added support to the home and ensures the flow of information as well as the home concept maintained.

After the stand-up meeting and the Household Nurse report, **the GRID** will guide each shift on what the resident has indicated they want to do. It represents their choices of how they want to live out their life and what they want to do.

Along with the Grid in the staff room, a **Bulletin Board** with **Household Safety matters** such as reports on skin, nutrition, restorative, pain, lifts, and baths: will be posted for your knowledge on your home. The more informed a staff member is, the great the confidence of the staff member. A Bulletin Board with **Household Family Matters** will have the week of Life Enrichment events on the home as well as in the Community Center. Any other notices of parties, celebrations will be there. A third Bulletin board is for notes/memos for staff such as policies, in-services.

The charts are secured on the home in the **household staff room** as well as all the notebooks for documentation such as ADLs, MAR, Restorative, Behaviors,..... My Story: Life Enrichment/self-determination. Each staff room is organized in the exact same manner so if you ask a member of another home to fill in for an absent member then it is easy to adjust.

Most homes have a morning small gathering on the home. Remember, it is all our job

to build relationships on the home and the enrichment of life on the home.

Residents chose when they want to go to the **Café** and where they want to sit/what they want

Throughout the day, ADL's are followed for quality care in the resident's day as they have indicated to us.

The afternoons on the Homes: some residents and staff have group events while others go to the Community Center for **Community wide events** such as Music programs, Bingo, etc. Each home has a weekly **Planning Circle** to plan what the residents want to do next week. Both shifts need to be at this important Home meeting as well as the Community Mentor/Community Clinical Mentor assigned, the Home Mentor, Nurse Leader, Life Enrichment guide & Environmental Guide, Housekeeping care giver.

The Community Mentor & Clinical Mentors have a quarterly schedule where they are a support to specific homes. You will also see the Community Mentor and or Clinical Mentor on the homes daily from 1:30-2:30 to be a support for the household staff on the home.

### **Weekly rhythm:**

\***Planning meeting**

\***Neighborhood council**

### **Monthly:**

\***Celebrations**

\***In-services**

Two hour **in-service training** and **business on the home agenda**

One of the most important heartbeats of the home. The in service time consists of a time of training on the Home concept, the Regulations required and the business of the Home. It is revolutionary because everyone sits in a learning circle and the household staff shares their observations, input, solutions for issues on the home. It bonds each member of the household staff. The in service time and the business session for the home is vital in spreading of information as well as sharing information, ideas and solutions for the home in a learning circle setting. The other purpose is to bond with all members and all shifts of the home and celebrate with food and fellowship during the break period. In our own families, usually when we get together we are eating and having fellowship. This casual time allows the members to laugh and enjoy each other.

**Quarterly:**

Quarterly Council & QAPI

**Annual: Celebrations on the Home:**

The Homes planning their own celebrations such as Mother's Day, Father's Day, Holiday on the Home: Christmas Celebration . These celebrations include the residents, their families and the household care givers.

**Community Celebrations (all Homes joining together):**

All the homes work together and participate in events such as Trick or Treat , Easter Egg Hunts for the children of the resident's family members or the household staff, a before Thanksgiving Day meal.

Let me caution you as a self-led household staff, if you are not careful to hold each other accountable for these Foundations of the Home, what happens is you will slip back into the institutional model. Therefore, it is very important to maintain the foundation of the home through the rhythm of home.

**Session 4 Dialog**

*I constantly want to congratulate you that you are home builders, that you maintain your quality of care and all of the standards of care and your operation all under the*

*umbrella of home. It may seem repetitious that I go over all the foundations of home and this particular session is so important. I want you to get this deep into you what your foundations are, because when you do that you'll be able to maintain it or you'll know when something needs to be worked on a little bit and you will have to work things, but we're going to try and pull everything together in a session that I like to call the rhythm of the home. It's what I called the routine of the home, it's going to look at each of the foundations and we're going to show how its daily, weekly, or monthly and to me it's like the whole heartbeat of the home. It's going to be what keeps the home maintained, the way the Rhythm the routine of these foundations are put into place.*

*The first is that we have a designated staff on a home and that they have the training that values home and has the foundation of the home. The second is the materials that we're going to use with the families and when they move in and the residents as well again in all the staff materials through HR. The third we've learned is the learning circles and how we're going to use it in our stand-up meetings or coming up with better ideas and how we do things at work or in our chores or services. It's going to be for planning and for enjoyment as well. The fourth is the household area which includes the self-determination form and includes the grid. The fifth is the stand-up meeting. The sixth is the neighborhood Council. The seventh is the planning Circle. The eighth is the small Gatherings, the community events. The ninth is the move in process. The tenth is in-service training. The eleventh is the monthly resident Council. The twelfth is the quarterly Council and QAPI.*

*So now that I'm driving these foundations deep into you with repetition; let's look at how each of these are part of the rhythm of the daily. Let's look at the things on the foundation that are daily. The daily rhythm of the home is naturally going to start with the stand-up meetings. It's going to involve that your documentation, your communication, all the required care planning, the nursing documentation, everything is done. It's going to include making sure your grids are up to date because that's a visual guide of all the care for each person as they choose it on the home. It's going to involve the daily Café. It's going to involve the daily small gathering. Let me just go a little bit more in detail: The stand-up meeting is going to be between shift changes it's very important to the heartbeat of the home. First, every member of the household, coming on or leaving communicates what has happened or going to happen on the home for this time frame. Second it's important in communicating special needs of the residents living on the home such as pain, skin, falls, restorative, nutrition, any emotional things. Third it's important that everyone working on the home during this time, everyone hears, participates in the knowledge of the home, because the spreading of this information and of reports, the bringing of information to all the household members builds confidence, it empowers them to do their job well. One of the things that I noticed, one of our great needs on the home when we started in 2004 was we had a real problem with communicating from offices down through the chain of command; the message would be distorted it would not get followed up. We had complaints of shifts communicating. I guarantee you if you will maintain this foundation of a stand-up meeting, it is going to change a lot of things.*

*Each home needs to maintain the format of the stand-up meeting and use the stand-up agenda. Now we have provided a sample and you may have your own agenda; that is wonderful, but it's important that the stand up agenda be maintained in your stand-*

*up notebook, because this is a record that can be reviewed and read at any time by your nurse leaders, by your mentors, and even by the designated home when they've been gone to see what happened on the home that will better help them. During the stand-up meeting remind the household staff: document. Documentary these things. The stand-up meeting has two very important items for all the members of the home. Whether those members are new residents moving on the home or New caregivers. The stand-up meeting on the home continues all three shifts during the day, afternoons, and again the home leader will be at one of those meetings. All of this brings together the added support to the home so that the flow of information and the Home concept is maintained.*

*After the stand up meeting, the household nurse report, the grid does need to be re-evaluated so that the staff can see accurately what the resident has indicated they want to do. It represents their choices on the home, how they want to live their life. Another daily is the small Gatherings on the home. Remember it's all of our jobs to build the relationships on the home and enrichment on her home, so join in on the small gathering and if time allows volunteer to be in charge of one. Of course the residents daily are going to choose when to go to the café, where they want to sit, and what they want to eat. Now I will tell you since we open the cafe somewhere between 2005, we always remind everyone you can sit where you want, but you know, they've developed some relationships and a lot of them like to sit in the same spot. But anyone moving in, we make sure you can sit wherever you want and you'll find that that's just something you constantly have to remind them of. Throughout the day of course, the activities of daily living for quality of care that have been indicated to us, will be taking place on the homes.*

*Now for the weekly portion of the foundation you're going to be seeing the rhythm of the neighborhood council, they meet every week. Each week there is a different report that again helps us get information from your homes to the council and from the council back on the home. The communication of home, the communication of things going on in your operation, will go so much more smoother under the organization in the foundation of the home. The second weekly thing is the planning meeting. Again I think you can start seeing the foundation of the home that's daily, the foundation of the home that's weekly, and there's also monthly foundations and that would be in- service training. We haven't really talked much about that but we're going to do a big breakout session today and you're going to evaluate just any topics we have regulatory topics we need to always have a home topic, maybe a long distance, a NAHCA topic. Things that are going on that your nurse leader or your mentor or your nutritionist may need to talk about or HR. Those are things that you constantly need to do a little bit of a learning circle and see ways that we can improve our in-service. We do in service different than we used to; I remember at least for 35 years it was just like a herd of cattle coming in to our biggest dining room and trying to speak and no one's really interested and then they leave. But we actually do our in-Services instead of twice a month, we do it once a month and we work together. We have a certain area that we come together and then we break out on the home. This you're going to have to figure out on your own and you will see how it works best, but we bring everyone together each month for in-service; we have an agenda, we break out at some point and talk about some of the things on our homes or will do breakout sessions to update things with our buddy on their self-determination or their story or we may do some skills testing. Again one of the most important heartbeats of the home is the in-service. This time consists of training the home concept, the regulatory requirements, different things about business on our homes that we want to discuss.*

*The quarterly foundation of the home is quality and we're all required to have the quality assurance and now the QAPI. So this is going to bring people from all the homes together in the composition that you've set forth and work on some project that you've identified that you want to make your home's quality of care better. I hope you can see that the foundation of the home fits into the existing work that you need to be doing, but the foundation of the home fits into a a pattern, a routine. Just like your heart is beating and keeping your body alive. This Rhythm of the home is the heart beat that keeps the home functioning the way it should. There's many checks and balances in the daily, in the weekly, in the monthly, and in the quarterly foundations of the home. Again, I'm so proud of you, I'm proud of your organization, I'm proud of your homes that you are the leaders in this nation and you're going to be leaders from now on because our care will change. The acuity is going to change, but everyone that comes through your door, your home, is going to need a place to call home. Under that umbrella of course is the care, is all of the regulations that you're going to do, that you are the heroes and just as you give of yourself sacrificially dedicated you will receive great joy and great satisfaction in return and I hope that reward will be just a great honor for you to know in your heart what you are accomplishing for all of our older people in this nation.*

## The rhythm of the home **BREAK Out Session**

### I. Training

1. Do you know the residents on our home? So important to know our residents, not just their meds, their diagnosis but what was their lifestyle, .

My Story can take on a life of its own, you can give to Families in a notebook (keep a master copy) put in a room and let people read, can add Cards or notes to it...

2. Have you completed your orientation checklist : Welcome Home Project “ Final session :  
Training Checklist Attachment:

3. Have you met your fellow staff members on the home? Would be nice to implement at in-service Welcoming new members at the same time recognizing those who have had an employment anniversary. The NACCA {Peer could help with tis)

4. Do you understand how neighborhood council works?

5.Can you explain the Daily, Weekly, Monthly, Quarterly rhythm of the home?

II.Talk about In service training:

When to have and agenda:

Discuss involving NACHA / Peer mentor training and Long Distance Learning

Talk about QAPI and what your facility is doing daily, weekly, Quarterly: what PIPs projects can do by each home and then together as entire facility/home.

“Welcome Home Project “ Final session : Training Checklist Attachment:

When we hire a caregiver, whether it is café, housekeeping, household staff nurse, an administrative nurse, anyone.

Everyone needs to have the following elements of Home put into their training and orientation. Most of you like us, have our own checklist for training each position so all you need to do is add these elements to the training:

The Peer mentors will influence the C.N.A. and C. M.A. Caregivers: their Buddy.

The Nurse leaders will do their home’s household nurse

Mentors and Guides will observe or direct those in other departments.

Items to add to your specific orientation & skills checklist for new staff:

1. When hire, give them your Home Brochure which explains your commitment to home, the designated households, the role of mentors, guides
2. Go over your café and procedure for café for ordering and serving
3. Explain difference of your home verse the institutional models
4. Place on the orientation :
  - a. I have met my mentor
  - b. I have met my home nurse leader
  - c. I have met my home life enrichment guide
  - d. I have met my nutrition
  - e. I have met my environmental
  - f. I have meet the residents on my home
  - g. I understand the stand-up meeting
  - h. I understand the self-determination , lifestyle and grid
  - i. I will be at the planning meeting on\_\_\_\_\_
  - j. I will be a the in-service on\_\_\_\_\_
  - k. I know where the community sites are: such as\_\_\_\_\_

When mentors and guides are introduced,

The Mentor can convey the commitment and value of home.

**The Nurse leader can reinforce the stand-up meeting; go over the staff room layout and organization, the designated staffing and the grid.**

**The Life Enrichment can reinforce the small gatherings, community sites and celebrations and how we all work to make our relationships and events on the home.**

**The Nutrition can emphasize the café procedures, the positive effects of nutrition, hydration as well as the socialization and its positive affect.**

**The environmental can focus on the home atmosphere as well as safety, privacy.**

**EVERYONE is involved on a home. It is a tremendous support to have each other. We need to be with the resident to make home, lifestyle choices happen.**

