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Person-Centered Care

Module I



Goals of Person Centered Care

By the end of the training, staff will be able to:

- define person centered care
- describe how person-centered care practices the values and mission of SCNH
- identify how their roles will be enhanced in a person-centered environment
- develop care practices that support person-centered care

Respect for Life

Dignity for every person

Compassion

Empathy

Loyalty

Pride

Cooperation





Learning Objectives of Module I

Staff will be able to:

- Name the six levels of the BASICS Hierarchy, and what each level fosters
- State one caregiver goal for each level of BASICS

Respect for Life
Dignity for every person
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Pride
Cooperation



What is Person-Centered Care?

1. Creating a home-like environment where residents, staff, family members and volunteers can achieve their highest potential.
2. Responding to the needs of the residents, staff, family members and volunteers on a timely basis.
3. Enhancing communication to allow for individuality of residents, staff, family members and volunteers.

Respect for Life

Dignity for every person

Compassion

Empathy

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Cooperation





• The SCNH Core Mission Values

- **Respect for life and dignity of every person**
- **Compassion/Empathy**
- **Loyalty**
- **Pride**
- **Cooperation**

Respect for Life
Dignity for every person
Compassion
Empathy
Loyalty
Pride
Cooperation

Suggestions From The Focus Groups:

We must explore:

- Choices and Options
- Communication
- Control Over One's Environment

in order to:

- Improve Morale

Respect for Life
Dignity for every person
Compassion
Empathy
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Pride
Cooperation



Biological
Feeling safe and physically comfortable

Interpersonal



Feeling valued as a person

Interpersonal



**Activities
of Daily Living**
Experiencing a feeling of control

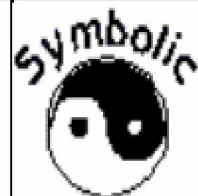


Experiencing optimal stimulation, living at highest possible level

Creative



Societal
Feeling unique among others



Experiencing pleasure and hopefulness

Symbolic

BASICS

<i>Need Satisfied</i>	<i>Fosters</i>
1. BIOLOGICAL: Basic needs for food, water, oxygen, safety, rest, human stimulation.	self-preservation: Being physically cared for and safe.
2. ACTIVITIES OF DAILY LIVING: Personal needs that support life style (eating, mobility, dressing, toileting, personal hygiene)	Self-dependence: Environmental makes provision to foster self dependence.
3. SOCIETAL: Need for unique personal identity.	Self-identity Environment provides for privacy, affiliation with groups, culture, family customs, education.
4. INTERPERSONAL: Need for connection with others	Self-esteem Environment fosters social role expression, supports inter-personal and social abilities, promotes social confidence as well as a caring atmosphere.
5. CREATIVE: Need for personal expression, problem solving opportunities.	Self-expression Environment supports independent activity, humor, creativity, and encourages use of talents and skills.
6. SYMBOLIC: Need for expression of beliefs, hopes, dreams, values and autonomy..	Self- Actualization Environment encourages hopefulness and self fulfillment and encourages the expression of the spiritual dimension.

Respect for Life
Dignity for every person

Compassion

Empathy
Loyalty







Pride

Cooperation



Caregiver Quality of Life

How do you care for each level of your needs on the BASICS hierarchy?
 What are your preferred ways of satisfying needs on each level of BASICS listed below?

 <p>Biological Feeling safe and physically comfortable</p>	
 <p>Activities of Daily Living Experiencing a feeling of control</p>	
 <p>Societal Feeling unique among others</p>	
 <p>Interpersonal Feeling valued as a person</p>	
 <p>Creative Experiencing optimal stimulation, living at highest possible level</p>	
 <p>Symbolic Experiencing pleasure and hopefulness</p>	

Pride

Cooperation

on

Quality of Life

Referring to BASICS.....

1. How have your needs changed as you get older?
2. Have you changed the ways in which you meet your needs?

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Quality of Life

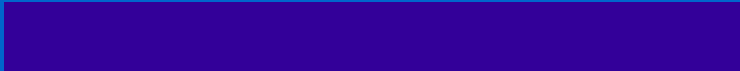
- If you were to go into a nursing facility, what would you like the staff to remember when caring for you?
- Which preferred ways of satisfying your needs (referring to the *BASICS* Hierarchy) would you like to continue in the nursing facility?
- How could staff support you to do this in the facility?
- What would you miss most if you were in a nursing facility?

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Person-Centered Care

Module II



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Module II Learning Objectives

- Participants will be able to list common Quality of Life goals.
- Participants will be able to define the concept of *Preferred View* and provide examples.
- Participants will be able to identify a source of frustration for themselves relative to their Preferred View.

Respect for Life
Dignity for every person
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Cooperation



Quality of Life Goals

- To feel safe
- To feel physically comfortable
- To experience a sense of control
- To feel valued as a person
- To experience optimal stimulation
- To experience pleasure, self-fulfillment and peace

Respect for Life

Dignity for every person

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Cooperation

Supporting Quality of Life

Goals for Every Level of BASICS		
Goals	Supports Quality of Life in Residents By	Supports Quality of Life in Staff By
To feel safe	Biological Level: meeting the need for the resident to feel protected and safe in his/her surroundings according to the resident's view of what makes him/her feel safe	Biological Level: addressing staff need to feel protected and safe in work environment according to their view of what makes them safe
To feel physically comfortable	Biological and ADL Levels: meeting the resident's personal needs, providing assistance and resources to support his/her physical comfort	Biological and ADL Levels: addressing staff need to have the materials, technology, and the knowledge to use them, that help to support residents' in their attempt to meet biological and ADL needs, as well as meet their own
To experience a sense of control	ADL and Societal Levels: meeting the need for the resident to have some meaningful participation in fulfilling his/her personal needs according to the resident's unique view, and at the level of his/her functional ability	ADL and Societal Levels: addressing staff need to have work that is meaningful and that is able to yield successes and in doing so confirm their individual contributions to the lives of residents and co-workers
To feel valued as a person	Interpersonal: meeting the needs for the resident to experience caring for others and being cared about as someone who is important to the community in which s/he lives	Interpersonal: addressing staff need to care for the needs of others, and to be cared about and valued themselves because they have chosen to do so, which makes them important in the community within and outside of the facility
To experience optimal stimulation	Creative: meeting the need for the resident to express him/herself using talents, skills and remaining abilities to the highest degree possible	Creative: addressing staff need to express him/herself by using talents, abilities and knowledge in caring for residents in creative ways, and by doing this, grow as a caregiver and to advance the quality of care, and to be recognized for these advances
To experience pleasure	Symbolic: meeting the need for self-fulfillment and joy in celebrating his/her fundamental value as a human being at whatever level	Symbolic: addressing the need for self-fulfillment, joy and recognition of one's fundamental value as a human being through the "I-Thou" nature of relationships with others at the work place that reflect important spiritual values that guide one's path in life

- Respect for Life
- Dignity for every person
- Compassion
- Empathy
- Loyalty
- Pride
- Cooperation





Preferred View

“People have strong preferences with regard to how they would like to behave, how they would like to see themselves, and how they would like to be seen by others.”

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Preferred View Has To Do With...

The qualities people want to have and to have noticed by others.

– For example:

- many nursing home staff wish to think of themselves as caring and skillful
- residents may wish to think of themselves as adults who are capable, independent, alert, oriented and cooperative

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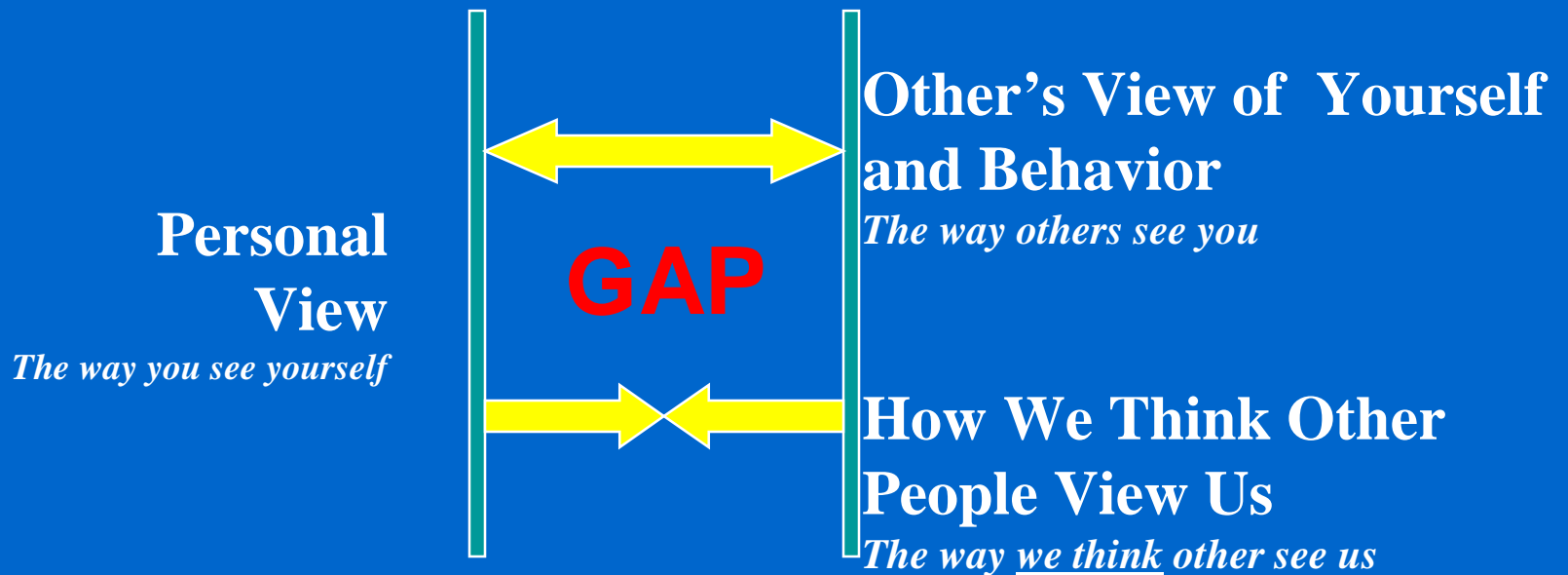
Exercise A: Preferred View Checklist-Staff

Preferred View Checklist - Staff		
Attributes	Settings	
	Family	Workplace
INDEPENDENT		
IN CONTROL		
TOUGH		
CAPABLE OF MANAGING MY OWN AFFAIRS		
SENSITIVE TO THE NEEDS OF OTHERS		
CARING FOR MY FAMILY		
CARING FOR MY FRIENDS		
SMART		
CLEVER		
COMPETENT		
POWERFUL		
RESILIENT		
DETERMINED		
HARD WORKING		
CONSCIENTIOUS		
ATHLETIC		
ABLE TO DEFEND SELF AND FAMILY		
LOYAL		
TRUSTWORTHY		
HONEST		
RESPONSIBLE		
GOOD		
KIND		
DECISIVE		
DISCIPLINED		
THOUGHTFUL		
WORTHY OF LOVE AND AFFECTION		
AMBITIOUS		
A GOOD WORKER		
SUCCESSFUL		
A LEADER		
RESOURCEFUL		
FLEXIBLE		
NURTURING		
ATTRACTIVE		
HELPFUL		
POPULAR		
CREATIVE		
DETAIL ORIENTED		
OTHER (LIST)		

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 Loyalty
 Pride
 Cooperation





The Preferred View and Frustration



The wider the GAP the greater the frustration

- Respect for Life
- Dignity for every person
- Compassion
- Empathy
- Loyalty
- Pride
- Cooperation

Goal Oriented Questions

Goal Oriented Questions Based on BASICS Hierarchy Model			
Dimension of Need	Caregiver Questions	Examples of Action to Help	Incorporating Residents' and Staffs' Preferred Views
	<p>What biological needs do the resident have which are essential for survival?</p> <p>What do we have to do to meet these needs?</p>	<ol style="list-style-type: none"> 1) Ensure that meals are prepared and delivered in a timely fashion. 2) Provide fluids and encourage resident to drink. 3) Encourage and/or assist resident to exercise e.g. walking. 	
	<p>How can we help the residents to meet their own personal needs?</p>	<ol style="list-style-type: none"> 1) Provide choices of clothing each day. 2) Assist with bathing. 3) Assist with walking 4) Assist with grooming, e.g. combing hair, brushing teeth 	

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Pride
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Goal Oriented Questions

Dimension of Need (BASICS)	Caregiver Questions	Examples of Action to Help	Incorporating Residents' and Staffs' Preferred Views (ADDITIONAL EXAMPLES)
Societal	What contacts does s/he need to ensure that sense of self as an individual among others is maintained?	<ol style="list-style-type: none"> 1. Celebrate birthday. 2. Provide quiet place to visit with family. 3. Assist with preparation to attend social group. 4. Call by preferred name. 	
Interpersonal	With whom should s/he interact to maintain self-esteem?	<ol style="list-style-type: none"> 1. Encourage the telling of personal history. 2. Introduce to others with similar interests, careers etc. 	<p>Respect for Life Dignity for every person Compassion Empathy Loyalty Pride Cooperation</p>





Goal Oriented Questions

Dimension of Need (BASICS)	Caregiver Questions	Examples of Action to Help	Incorporating Residents' and Staffs' Preferred Views (ADDITIONAL EXAMPLES)
Creative	<p>What activities of a creative or recreational type does s/he find meaningful?</p> <p>What are his/her usual problem solving/coping skills?</p>	<ol style="list-style-type: none"> 1. Provide opportunities for s/he to be creative. 2. Support successful problem-solving/coping skills. 	
Symbolic	<p>What else is there for him/her to achieve (self-fulfillment, peacefulness ?</p>	<p>Provide consistency and respect for beliefs.</p> <p>Maintain a hopeful attitude towards the ability to have a satisfying life.</p>	<p>Respect for Life Dignity for every person Compassion Empathy Loyalty Pride Cooperation</p>

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Person-Centered Care

Module III



Icebreaker: Thinking Outside the Box

Add one line to the below equation to make it true. You cannot use the *not equal* (\neq) symbol.

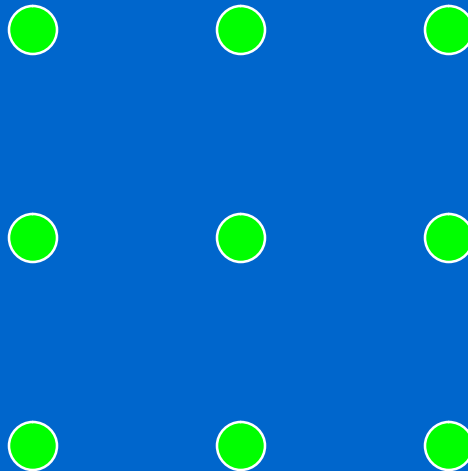
$$5 + 5 + 5 = 550$$

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Icebreaker: Thinking Outside the Box

Connect the following nine dots by drawing four straight continuous lines without lifting your pencil or retracing a line.



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Cooperation

Module III Learning Objectives

- Participants will explore possible changes in their job duties that would enhance a Person-Centered environment
- Participants will identify change(s) in practice at SCNH that will support Person-Centered Care

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Exercise 1

- Think about your current role and tasks and how you can improve them to foster Person Centered Care

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Cooperation

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Person-Centered Care

Module IV

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What is Care Planning?

Care Planning covers:

- **Continuity of care**
- **Accountability/Responsibility for care**
- **Provision of care in timely manner**
- **Caring with an objective in mind**
- **Communication**

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Module IV Learning Objectives

- Participants will identify change(s) in practice that will allow participation in the Care Planning process in an effort to support Person Centered Care

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Care Planning

- F295 – “The facility must develop a comprehensive care plan for each resident that includes measurable objectives and timetables to meet a resident’s medical, nursing, and mental and psychosocial needs that are identified in the comprehensive assessment. ...”

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Who should be involved in Care Planning?

- While the Care Planning meetings are attended by: Physician, Nurses, Dietician, Social Worker, Therapeutic Recreation Therapist, Rehabilitation Therapist,some of the information discussed could be provided by **EVERYONE**

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Case Study 1: The Caring Housekeeper

- Joe Smith, Housekeeper, knocked on Mrs. Downers room and after gaining permission entered.
- “Good Morning, Mrs. Downer. How are you today?” said Joe
- “Hi there” Mrs. Downer said wearily.
- “You sound a little down today, are you OK?” said Joe.
- “Thank God, I am still alive. But this pain in my back is killing me”, she said with tears in her eyes.

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Case Study 1: The Caring Housekeeper

- “I am sorry to hear that. Did you tell the nurse? Joe asked

- “Oh no, those poor girls have enough to do. Besides this pain wont go away. Age is the cause son. Enjoy your youth” Mrs. Downer said with a forced smile

- “The pain is so bad sometimes that I refuse to eat, or attend any activities” Mrs. Downer continues

- Joe left the room immediately and reported the matter to the Nurse-in-Charge

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Case Study 2: Under the Gun

- Ida hurriedly swiped her ID badge. The time-clock registered 8:33am. Ida walked briskly to her office.
- “Good Morning, Ms. Gunn, I am so sorry that I am late again.”
- “Good Morning Ida. I was hoping that you would have been here earlier to help with completing this project which is due in the offices of the Department of Health in less than one hour. This late coming has got to stop.”
- “Ms. Gunn I am sorry. I had to take my children to the babysitter and ...”
- “You are not the only mother here. You have a responsibility to be here promptly at 8:00am” said Ms. Gunn

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Case Study 2: Under the Gun

- Ida remained quiet and began working on the project. Ms. Gunn left for a meeting.
- “Good Morning Ida” Ms. Allerton, the Administrator said wearing a bright smile, “How are you?”
- “Good Morning Ms. Allerton, I am doing fine thank you.” Ida replied sadly
- Ms. Allerton continued: “You seem a bit down, is everything OK?.”
- “You see, Ms Allerton, I have been coming to work late some mornings because of baby-sitting problems. I have to take my children from the Bronx to Queens to my aunt as I am more comfortable with her and

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Case Study 2: Under the Gun

- besides I don't have to pay her. I leave home at 5:00am in the mornings when the kids are still asleep.”
- “Oh no, I am so sorry to hear that.” said Ms. Allerton. “Have you discussed this with Ms. Gunn? asked Ms. Allerton
- “No” said Ida
- “I will set up a meeting between yourself, Ms. Gunn and I, so we could look into this matter” Ms. Allerton said

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Case Study 3: How about Thanks?

- John, the Food Service worker carefully placed the final tray of food in preparation for serving employees their lunch.
- “Can’t they serve better food in this place? That beef looks overcooked and besides I like my chicken darker on the outside.” said Rachel, a nurse.
- “What would you like to have ... beef or chicken?” said John

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Case Study 3: How about Thanks?

- “You guys need to do better. It is a shame.”
the nurse continued
- “There is a line forming behind you, so you
need to decide what you want to have.” said
John, feeling very unappreciated for all the
hard work involved in preparing employees
lunch and besides in a kitchen that was
terribly hot.

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Case Study 3: How about Thanks?

“I don’t care about the line. You can’t force me to like that mess.” the nurse said angrily

“Hey Rachel, get off the line and go buy your lunch outside if you don’t like what’s there” said another employee

“If these people in Food Service were doing their work right, we would have better food.” the nurse continued

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Case Study 4: Beyond the Limit

- “Lord, please hold my tongue while I care for Mr. Hops today,” Alice the nurse’s aide prayed upon entering the resident’s room, who was known to be difficult. Mr. Hops was on the telephone.
- “I gotta go, my gal just walked in ... yeah to wash my a....” he commented to his party on the phone.
- “Mr. Hops, good morning” Alice said, feeling a bit hurt by what she overheard

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Case Study 4: Beyond the Limit

- “Just get me dressed, I need to get out of here. By the way, what took you so long gal. You people are so lazy?” said Mr. Hops rather disgruntled.
- “Mr. Hops, what would you like to wear today? asked Alice in calmer voice than even she expected.
- “A pants, shirt, socks, shoes God dam-it!” thundered Mr. Hops

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Case Study 4: Beyond the Limit

- Alice walked over to the closet and picked out a freshly laundered set of clothing. “Are these OK?” asked Alice.
- “What the hell ... are you stupid or something?” yelled Mr. Hops
- “Mr. Hops tell me what you want to wear and I will get it for you.” said Alice, now sounding annoyed

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Case Study 4: Beyond the Limit

- “You people... get out my way.” Mr. Hops said as he shoved Alice to the side
- “Mr. Hops, I don’t have to take this. Why did you shove me? You are so rude. I am happy with who I am as a CNA and as a person, apparently you are not happy with your condition.” said Alice. “Let me call the nurse’s attention to this situation.” Alice said as she walked away.

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Exercise

- Think about your current role and tasks and how you can contribute to the overall care of a resident, staff, family member or volunteer in a Person Centered Care environment

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