

Pioneering Change

**Creating Home
Education Module**



to

Promote **E**xcellent **A**lternatives in **K**ansas
Nursing Homes

ABOUT THIS MODULE

This educational module is intended for use by nursing homes who wish to promote more social, non-traditional models of long-term care. The intent of this module is to assist organizations in implementing progressive, innovative approaches to care that should make a significant difference in the quality of care and the quality of life for those living and working in long-term care environments.

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Course Objectives:

1. To instill a better understanding of the important role environmental factors play in the development of community and culture of a nursing home.
2. To develop an appreciation for how fostering resident, family, and staff interactions and cooperation in decision making can improve relationships and quality of life.
3. To recognize the importance of structural redesign and innovation as a key component of culture change in nursing home care.
4. To consider how environmental culture change can improve relationships with the larger community.
5. To understand how all of these factors come together to create a more holistic and healthy nursing home environment.





Pretest

The pre- and post-tests included with this module are optional. The questions provide information about the materials to be covered and can be used for learning self-evaluation. At some future date, these tests may be used as a part of a continuing education requirement.

1. When considering how environments can affect quality of life and services in nursing homes, one needs to consider
 - A. How much staff interact with the family members of residents.
 - B. What kinds of meals to serve at lunch.
 - C. The color of carpet, the types of furnishings, and the layout of a building.
 - D. All of the above.

2. When planning building renovations the administration should
 - A. Keep the plans secret until the renovations begin to surprise the residents.
 - B. Hold numerous planning meetings and gather feedback from everyone who will be affected by the changes.
 - C. Hold one meeting to inform only residents, not their families or staff, about the changes that will be occurring.
 - D. Expect everyone affected by the changes to view the changes positively.

3. If animals are introduced into a nursing home, it is a good idea to
 - A. Bring in large dogs or highly energetic cats.
 - B. Prevent animals and residents from having direct contact with each other to avoid spreading infections.
 - C. Start with smaller, docile animals and introduce them to interested residents.
 - D. Permit animals to access any area of the nursing home regardless of residents' wishes.

4. The addition of plants to the nursing home environment
 - A. Needs to be done carefully to respect the needs of residents with allergies and to avoid introducing other potentially harmful plants.
 - B. Will always encourage insect infestations and inflame indoor allergies.
 - C. Should be done entirely by staff without involving residents in the selection or care of the plants.
 - D. Will make the nursing home appear less homelike.

5. The area that cannot be changed to create a more homelike atmosphere in nursing homes is
 - A. Bedrooms.
 - B. Dining areas.
 - C. Bathrooms.
 - D. None of the above.



6. Community perceptions about a nursing home
 - A. Do not affect the environment of the nursing home.
 - B. Are always accurate and unchangeable.
 - C. Have no effect on the number of residents living at the nursing home.
 - D. Can be altered by building positive community connections.

7. Allowing residents to work and relax outdoors
 - A. Encourages activity and can reduce depression.
 - B. Exposes residents to unavoidable risks and should never be permitted.
 - C. Has no effect on residents' activity levels or mental health.
 - D. Should be permitted only in cooler months when the risk of heat related illness is lower.

8. Lighting in a nursing home
 - A. Should always be very bright to ensure resident safety.
 - B. Has no effect on the environment of the nursing home.
 - C. Needs to strike a balance between functionality and enjoyable aesthetics.
 - D. Should be provided only by overhead fluorescents to give a professional atmosphere.

9. Centralized nursing stations
 - A. Create a homelike setting when residents, staff, and even visitors cluster around the station engaged in noisy conversation.
 - B. Give homes an institutionalized feel and can often create loud congregations of people where normal conversation is impossible.
 - C. Are the only way to give residents the secure feeling provided by knowing assistance is always easy to find and immediately available.
 - D. Are vital to maintaining order and medicinal support within nursing homes.

10. Carpeted floors, upholstered chairs, and other fabrics
 - A. Increase comfort, reduce noise, and create a homelike feel when used throughout a nursing home.
 - B. Always spread disease and need to be constantly disinfected.
 - C. Should be allowed only in residents' rooms.
 - D. Should follow a single color scheme to provide a professional atmosphere.

Answers can be found on page 36.

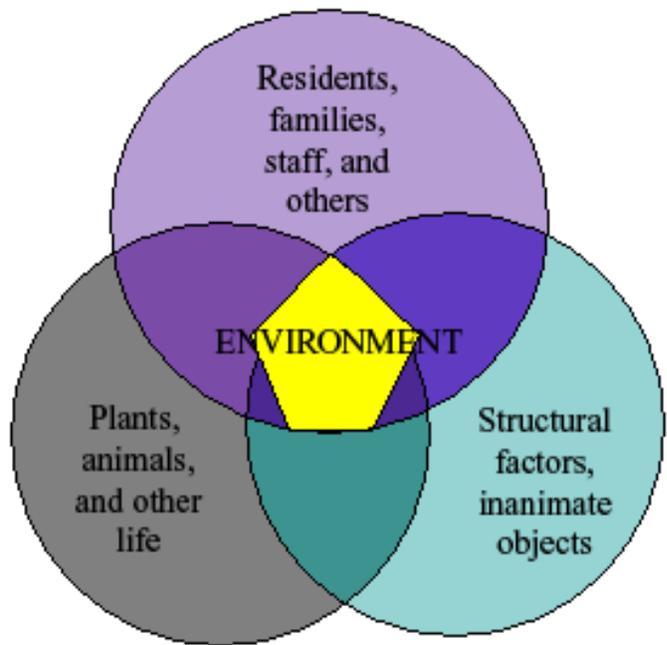


Creating Home

Introduction

Previous modules examined how human interactions can improve the overall culture and quality of life in nursing homes. In this module human interactions and behaviors will be considered within their overall environmental context. Nursing homes are interdependent, interconnected networks. The goal of a nursing home should be to make those environmental networks holistic, proactive, and mutually supportive communities of care. In order to do so, it is important to first understand how the term environment is used in this module.

The environment, quite simply, is everything that composes a given community. The environment includes the people, plants, animals, and nonliving things in that community. For our purposes, the environment consists of residents, their families, staff, nurses, administration, hallways, plants, animals, carpeting, bathrooms, lights, walls, and anything else that is found in a nursing home. All of these things come together to form the environment as is shown in this diagram.



Activity

This module breaks tradition with the layout of previous modules, just as nursing homes are breaking tradition in their approach to residents' care. Unlike previous modules, the activity for this section appears at the beginning instead of at the end. Before continuing, take some time to do this activity. Eventually it can be done with staff and residents as well.



innovations can help create and support a proactive network of caregivers working to meet residents' physical, emotional, spiritual, and intellectual needs. Those same innovations can also help build more positive relationships with the community outside the nursing home. In short, effective environmental management can transform a nursing home into a caring community.

This module examines several nursing homes that have (and are) adopting environmental modifications of varying types to improve the lives of their residents. It outlines how environmental change can help foster a greater sense of community within care homes and foster family involvement in care giving decisions. Further, it examines how to create structural designs that reinforce community and cooperation and how to modify existing spaces to increase their homelike feel and usability. In conclusion, it looks at how positive environmental changes within a home translate into improved relationships with the larger community a home serves. All of these innovations and examples, collectively, can help create a more holistic community.

Case Study

Looking back, Edna remembered how she'd often thought of Harbor Sunset Retirement Center as being "like a hospital" when she first arrived. For the first four years she lived there a centralized nurses' station sat in the

middle of the building's four long residential wings. This made her feel it was always easy to locate a nurse. When renovations and additions to the building began Edna had worried it would become more difficult to access direct care due to the removal of the central nurses' station.



Now that the initial renovations were complete, Edna realized the nurses were still there when she needed them even though they weren't constantly visible. She had grown to enjoy the smaller community spaces where residents could gather to talk with one another. It was easier to communicate without the noise and bustle of the old nurses' station. Something about not having the nurses' station in the middle of the resident community made life seem more normal.

When they renamed the home Seaside Village, it seemed to signal the beginning of a new community, not the end of a journey. Edna felt truly at home in the newly remodeled space. "A new home," she thought. "Yes, that's exactly what it feels like now."

NEW HOME



Discussion: Take some time to reflect on the following questions. You may wish to use them to begin a group discussion:

1. Where are the social centers in your nursing home?

2. If residents and staff are currently congregating at a nurses' station for social reasons, where might this interaction be encouraged if the station was removed?

3. How easy is it for residents to access help so they feel secure?

4. How could this sense of security be maintained if the central nurses' station was removed?



Activity: Understanding Environmental Interactions

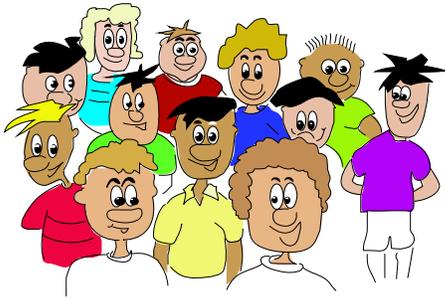
The following activity is very flexible. It can be done privately by administration and/or management to gain a better appreciation for how environmental factors influence one another. It can also be incorporated into brainstorming sessions with staff, residents, and family members by using a poster board or presentation easel to help them think about the nursing home in an environmental context. Positive environmental factors can be considered, discussed, and improved over time through feedback and cooperation.

Consider the following environmental factors. Under the appropriate headings, write the potential benefits and drawbacks of each issue. Think about how these factors can be improved. Some of the items listed may not be relevant to your particular nursing home. Might they provide some benefit to residents and/or staff if they were? Why or why not? Feel free to add other examples for consideration and discussion.

Environmental Factor	How can this factor potentially affect residents?	How can this factor affect residents' families?	How can this factor affect staff?	Who else might be affected by this factor? Why?
Room size(s)				
Carpet or wall colors				
Pictures				
Bathroom design				
Plants				
Animals				
Other:				



The Human Environment



Person-centered Care

Environmental interactions in nursing homes begin at the human level. Resident interactions with staff, staff interactions with residents and residents' families, and family involvement in the care of loved ones all have a tremendous impact on the care environment and the quality of life for residents. Families appreciate being involved and informed regarding the care of their relatives. Direct contact and interaction between staff and residents' families can reinforce staff perceptions of the importance of their role within a care home and build a family's trust in front line staff.

Relationships are the foundation of building healthy human environments within nursing homes. Nursing homes exist to meet the needs of residents and their families. Care providers should strive to enable residents to retain as

much of their home-life autonomy as possible. Residents are at the center of a nursing home community. An effective model that can be used as a guide for developing such a community is that of person-centered care. In person-centered care, staff members interact with residents based on the unique needs and preferences each resident brings into the nursing home environment (Boise & White, 2004). Residents are not viewed as passive participants in their care. Staff must listen to residents' concerns and be responsive to the needs they communicate. Resident control of living environments is maximized through both participation and autonomy.

Involving Family

Family members should be incorporated as much as possible into the caregiving role. They provide valuable feedback to staff and keep them better informed regarding individual resident's needs. Family members should be encouraged to act as an important part of the resident's social circle, providing an ongoing connection to the world outside the nursing home. Families also play an important role as advocates for residents (Boise & White, 2004).



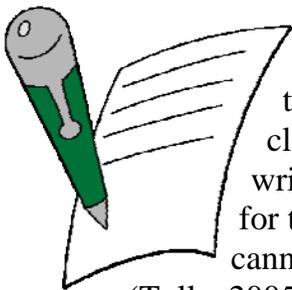
Research has shown that as residents approach the end of life, family members have distinct preferences about how care is provided. A recent study by the Institute of Montreal surveyed 203



respondents who had a family member die while in a nursing home. They were asked what kinds of involvement were important to them while the resident was nearing the end of life. Family members listed control of pain, along with maintenance of resident comfort and dignity, as very high. Family members said good communication with staff was important and they wanted to be kept informed as death approached. Interestingly, many respondents also preferred their family members die in the care home, as opposed to a hospital (Vohra et al., 2004).

Other research has added to the importance of relationship building between family and care providers. Developing proactive, quality relationships based on frequent contact, feedback, and trust is increasingly recognized as a vital component in family satisfaction and quality of service in nursing homes (Caron, Griffith, & Arcand, 2005).

In families where members have differing value systems, it is important to ensure residents have clearly designated, in writing, someone to speak for them in the event they cannot speak for themselves (Tolle, 2005).



Case Study

The Fairfield family was concerned. Their grandmother had been ill on Friday, and they had asked to be contacted about her condition over the weekend. Her son, Jack, left his cell phone number with the on duty CNA at the Readworth Retirement Community before the family members left for their cousin's wedding in an adjoining state. It was now Saturday evening and they still had not heard from anyone at the nursing home.

Jack thought that some one from Readworth would call him, so he hadn't brought their number with him. Irritated, he called information (which cost an additional fee on his cell phone) and got the care home's number. He then hung up and called the home. After a busy signal and a dropped call, Jack got through to the home.



His mother was fine. She had been ill in the morning but had recovered by noon. They said they had called his home but no one answered. Jack, frustrated, pointed out that he had given his cell number to an on duty CNA because the family was going to be out of town. The desk clerk apologized and claimed he hadn't been given the number.





Discussion:

Who was at fault in the preceding passage? _____

How might the nursing home ensure that staff are more sensitive to family requests? _____

How might the nursing home work to rebuild the trust in its relationship with the Fairfields after the incident? _____



There's No Place Like Home

The “nursing home” of today did not exist prior to the 1960s. The creation of Medicaid and Medicare mandated that persons with chronic diseases could not live indefinitely in hospitals. No one had any idea where these people should go, so someone decided that new homes would be created using a hospital design. While these homes were



meant to be residential in nature, they were developed using a medical model and became clones of hospitals. This is why older nursing homes little resemble “homes.”

Quality of life in nursing homes is heavily dependent on resident comfort. There are few things in life people enjoy less than going to a hospital. If a nursing home feels like a hospital, how comfortable can the residents possibly be? Hard floors, nurses’ stations, regimented cafeterias, bare walls, and equipment laden bathrooms can all take a psychological toll on a resident. Hospitals can instill a feeling of helplessness as patients must follow the facility’s established rules and the decisions made by their physicians; patients often feel they have little control over their lives (Allshouse 1993). If a nursing home feels like a hospital, it can send the same message to its residents. Nursing homes should feel like a home



first, a community second, and a place of physical health care somewhere down the line. The visibility of professional healthcare and its intrusiveness into the lives of residents should be minimized without diminishing its availability.

Plants and Animals Improve Quality of Life

Almost every home in the United States has a plant of some type. The presence of plants tends to have a soothing and calming effect on people.



Houseplants also improve the indoor environment by purifying the air of gases released by humans and synthetic materials while releasing more oxygen (Wolverton 1996). Plants can improve the aesthetics and quality of life in a nursing home as well. Indoor plants provide all residents easy access to plants and their benefits, so the Eden Alternative suggests that nursing homes focus on plants inside the home before focusing on outdoor gardens (Kreidler 2002). Care must be taken when nursing homes are selecting plants to use inside to avoid plants that trigger residents' allergies. More information about the use of plants in nursing homes will be provided in the next module about nursing home activities.

Animals can bring joy to residents' lives as residents interact with and care for the animals. Care must be taken to ensure that any animals brought into a home are well groomed and of a friendly disposition. Research suggests that it may be better to begin with smaller, less excitable dogs and/or cats than large, boisterous animals (Sampsell, 2003). A few residents may not enjoy animals or may have allergies, so any visitation by or adoption of animals at a nursing home should be done with residents' concerns and feedback in mind. Of course, animals introduced into the community should be free from any detectable, transmittable illnesses (Weinberg, Fuchs, Pals, and Call, 2004).

Some nursing homes have adopted the Eden Alternative, a program which includes integrating plants and animals into the home in addition to other culture change innovations. Other care homes utilize approaches that work for them. At Wesley Towers in Hutchinson, Kansas, the administration continues to integrate plants and animals into the community where appropriate. Among the home's permanent animal residents are birds in three aviaries. Other animals come as companions to human visitors of the home.



Occasionally, tensions have surfaced when nursing homes have initiated plans to include plants and/or animals without



significant resident feedback. Whether a care home incorporates them on its own, or decides to incorporate them as part of a pre-existing program like the Eden Alternative, the decision should be made with the full participation of residents, their families and staff. The goal is to build a better home for those being served. Decisions that alter the living environment within a home should be made by the people who live there. More information about pets and plants will be offered in the next module about nursing home activities.

Aesthetics Are Important

If a person went to a friend's home for dinner and saw linoleum flooring, plastic commercial grade chairs, and a cafeteria style folding table they probably wouldn't find the dining area very homelike. Choosing the appropriate furnishings, floor coverings, and décor can go a long way toward making your nursing home feel more comfortable.

Let's start with the most basic: fabrics. Many traditional care homes lack carpeting or large rugs because hard floors are viewed as more sanitary and easier to clean. However, hard floors transmit noise, generally feel cold, and give a nursing home an

inhuman, purely functional feel.

Although maintaining a clean and healthy environment is important, it shouldn't be done at the cost of resident comfort. Traditional materials could stain and retain bacteria and germs, but textiles have come a long way. There are a wide variety of furnishings and fabrics available that are easy to clean and can handle a great deal of use.

At Meadowlark Hills in Manhattan, Kansas new treated fabrics are widely used. These fabrics have been immersed in a formula that adheres to every fiber, making them impervious to spills, bodily fluids, or other hazards. These innovative new materials allow the home to incorporate comfortable, colorful carpeting and furnishings without sacrificing cleanliness. Residents are able to enjoy a variety of furnishings for recreation and relaxation, while staff and administration are saved much of the extensive care and replacement that accompanied older textiles (Lindstrom, 2004a).



*Photos courtesy of
Kent LaCombe*



Carpeting helps insulate rooms against excessive noise. It is also more comfortable and warmer than a hard floor. As in the case of furniture covering and fabrics, durable and easily maintained carpets are widely available for use in nursing homes. Some patterns and colors work better than others. If a floor covering contains a dark background with bright highlights, it can interfere with depth perception and balance (Lindstrom, 2004a).

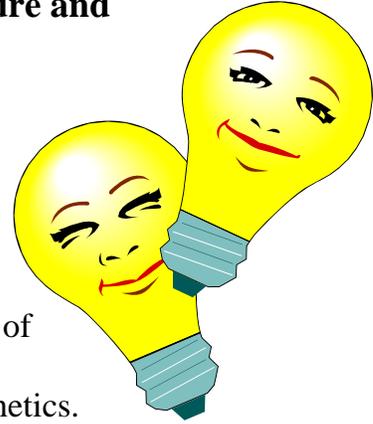
In addition to upholstered furnishings and floor coverings, functional hallways can be made more appealing through the addition of pictures, sculptures or statuary, or (depending on their location) windows. In the case of artwork, residents themselves can be



involved in the creation and display of works (Zinn, 2001). Particularly artistic residents could be encouraged to contribute or design workshops might be implemented for larger groups. As is the case with anyone's artwork, a resident's permission must be obtained before putting his or her work on public display.

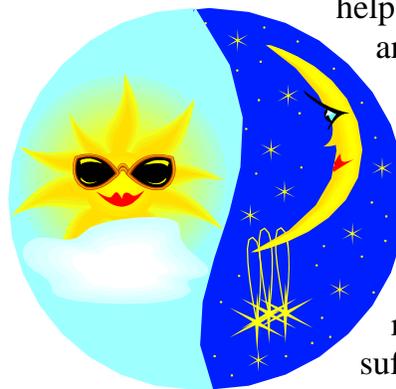
Visual Pleasure and Support

The appropriate use of lighting is an important building block of effective and enjoyable aesthetics.



Indirect lighting sources can help offset the institutional feel that can accompany fluorescents (Lindstrom, 2004a). At Wesley Towers in Hutchinson, Kansas, CEO Ray Vernon pointed out administration is constantly trying to “better use lighting, colors, and patterns” in their home (R.V., personal communication, May 10, 2005).

Balancing resident needs with effective lighting can be a challenge, but it is a rewarding one when effectively met. Adjusting shades throughout the day can



help reduce glare and excessive light in rooms with large or numerous windows in sunny areas. At night rooms require light sufficient for

residents to find their way to the bathroom but not so much light that it affects residents' ability to sleep. (Lindstrom, 2004a).



The following photograph demonstrates the importance of lighting. The bright glare created by the window at the end of this hall and the polished floor make it difficult for residents to see where they are going. This situation could be improved by putting curtains on the window or carpet on the floor; at the very least a less polished floor would soften the intensity of the glare.



Photo courtesy of Gayle Doll

In addition to effective use of lighting, other visual aids and enhancements such as pictures on or near doorways, knickknacks or specific colors near the entrances of residents' rooms can add to the aesthetic appeal of a home. These touches also enhance the perception of a space as a resident's private home area. Well manicured lawns, yard ornaments, or doorways at their individual family homes had likely communicated the uniqueness of each individual resident's life before he or she entered the nursing home. By the same token, allowing and encouraging residents to add personal touches to the entrance of their room in a nursing home can add that special sense.

Building Happier Residences: How Environments Can Promote Health While Strengthening a More Personal Sense of Home

Making Bathroom Functionality Comfortable

Some of the most challenging areas to give a homelike feel are the bathrooms in a nursing home. For homes with a shortage of storage space, bathrooms often double as utility closets. The presence of lifts, utility carts, and other equipment can give them the appearance of mechanized hospitals. Removing extra carts and supplies from a bathing area will cut down on resident interruptions and reduce noise. If bathroom areas must be used to store carts and other supplies, consider installing curtains or partitions to disguise them from view. Shower curtains that are at least three to four times larger than the space they are covering are able to better reduce excess sound (Calkins, 2005).



Photo Courtesy of Kent LaCombe



*Photos courtesy of
Kent LaCombe*



Consider replacing or offsetting gaudy informational signs with art prints and photographs for residents to enjoy while bathing. The use of color, towels, wallpaper, knickknack shelves and other visual innovations can also dramatically change the feel of a utilitarian wash room. Commercial towel warmers can make the drying process much more enjoyable (Calkins, 2005). It is important that furniture and other furnishings placed in the bathroom not be affected by moisture, since surveyors look for well-maintained washable surfaces. One idea is to use wicker furniture designed to be used outdoors; it is immune to moisture and easily cleaned (Moller & Renegar 2003).

Thus, introducing bathroom décor serves several purposes. The colors, feel, and layout of innovative additions improve aesthetics and provide visual enjoyment. The use of draperies or dividers disguises unused equipment until needed and gives the bathroom space a more human, less mechanical feel. Rugs or other floor

coverings protect wet feet from cold floors and reduce slipping. In short, a bathroom, while maintaining its functionality, special equipment, and accessibility options, can still be made to feel more comfortable and homelike for residents.

Shari McCabe, Executive Director of The Cedars, explains that the focus is on creating a “kinder, comforting atmosphere, instead of a clinical one” (S.M., personal communication, May 10, 2005). Bathing and restroom areas there have been given design themes, from the use of deep red curtains and wallpaper in one to bright aquatic fish and seashells in another.

PEAK-Ed staff discovered that many nursing homes have found the bathrooms to be areas where staff and residents can work together to design and decorate. This “project” helps those living and working in the household or neighborhood to feel ownership for their area. Sometimes the decoration of the bathrooms has turned into a competitive event with neighborhoods vying for the best design.



Redesigning Dining

Ray Vernon said it best when he stated dining should be “an experience and not an ordeal” (R.V., personal communication, May 10, 2005). Wesley Towers has evolved from three dining



areas to ten since 1995. The change has reduced noise during dining while increasing a sense of community and resident interaction in the smaller dining areas. Mr. Vernon concedes that initially there was some staff resistance. Some staff maintained that the single dining room provided a compact area to keep track of residents and distribute medicines. With time, however, staff recognized the benefits in resident comfort and community far outweigh the minor loss of administrative convenience.



Photo courtesy of Kent LaCombe

Residents may also resist the change to smaller dining rooms if they will miss eating with friends who will eat in other dining areas. Some nursing homes have considered the addition of bistros or restaurant-type dining where residents can reserve a time to leave their neighborhood to eat with a friend from another neighborhood. Residents should be involved in any decisions to change the dining facilities of the nursing home.

- ▶ Medicalodge East Healthcare uses restaurant-type dining where short order cooks make the food the residents order off the menu. The dietary staff take residents' orders and serve the food to them after it is prepared, just like they are eating in a café. This dining area is open from 6am to 7pm to enhance residents' choices.
- ▶ Medicalodge of Clay Center has created "The Soda Shoppe" which is open from 2-4pm Monday through Friday. Although it does not serve meals, "The Soda Shoppe" is a place for residents to gather, socialize and enjoy snack foods such as popcorn, fruit, flavored coffee and ice cream treats. The residents of the "Resident Council" were very influential in developing and implementing the idea, and every effort is made to supply residents with the foods they request.



*Photo Courtesy of
Medicalodge of Clay Center*



- ▶ The Cedars has also moved toward incorporating a greater number of dining areas of reduced size. Shari McCabe believes dining is the “basis for social interaction” among residents (S.M., personal communication, May 10, 2005). Comfortable, more intimate dining areas are more reflective of a healthy, social, homelike environment.

There are many options available for making the dining experience a more enjoyable affair. Carpeted dining rooms can reduce noise; although they may require some additional maintenance. Keep in mind, however, that the previously discussed advances in commercial fabrics have created products that can eliminate much of the extra labor. Bright colors can stimulate appetite but may conflict with resident preferences. Buffet style dining is easier to maintain and can provide a number of choices.

As reported in our original Pioneering Change booklet, many nursing homes have been able to record positive outcomes from dining changes. Presbyterian Manor in Parsons, Lakeview Village in Lenexa, and Schowalter Villa in Hesston all reported benefits such as reduced unplanned weight loss, less plate waste, reduced use of supplements and improved social interactions when they switched to buffet dining.

To offer more dining options a home with multiple dining areas might have some set up in buffet style and some not. Administrators should ensure that residents are involved in helping to decide changes. They should also make environmental design and change an issue for periodic discussion in the nursing home. For instance, if residents voted to have buffet dining as an option, it might be reviewed after a year or two and possibly changed or modified to continue to meet resident preferences. If a dining room doubles as a recreational area, residents might prefer more subdued colors instead of appetite stimulating reds or oranges. Movable color partitions could even be utilized to enhance whatever specific activity is taking place in a community room at a given time (Lindstrom, 2004a).



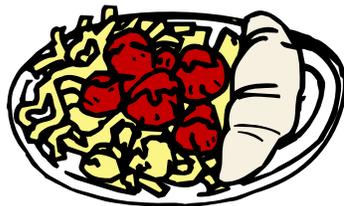
Opening kitchens to resident participation can act as an appetite stimulant as residents are exposed to the sights and smells of cooking food. Some homes are providing separate refrigerators for residents’ use where drinks and snacks can be stored. This encourages nourishment and hydration while supporting resident choice (Lindstrom, 2004a).



Photo courtesy of Kent LaCombe



Revolutionary new approaches to serving the food itself are also being implemented. For many residents, eating familiar foods can be a challenge because of problems swallowing, sensitive teeth and/or gums, or other oral health issues. Some facilities are experimenting with shaping pureed foods back into their original shapes. Presbyterian Manor in Wichita, Kansas is one such example. What might look like a plate of pasta and garlic bread is in fact a carefully pureed and shaped meal, retaining the same ingredients, look, and flavor in a form that is more easily consumed by an elderly resident (Lindstrom, 2004b).



Using Outdoor Spaces



Light activity and spending time outdoors can both help alleviate mild depression in the aging.

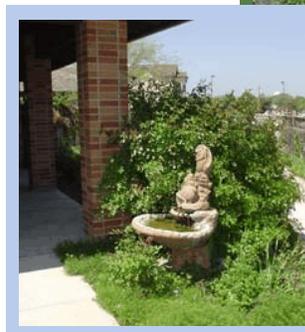
Suzanne Fitzsimmons, Associate Clinical Director at the Center For Positive Aging at Florida Gulf Coast University has linked depression in the aging to a lack of exposure to the sun (Lindstrom, 2004c).

Outdoor spaces can take on a number of styles or shapes. At Meadowlark Hills residential households each have a patio

with outdoor furniture, a grill, and a garden (Lindstrom, 2004c). Gardens and outdoor spaces can incorporate trees and shrubs to be cared for and pruned. Residents at Wesley Towers grow a number of vegetables and flowers in their outdoor spaces, which they work together to maintain.

A number of formats can be used for gardening areas. At Wesley Towers accessibility to space allows for large, cultivated areas to grow plants. At homes where outdoor spaces are more limited, vertical gardens can be implemented to utilize plants that grow upward or climb a fence or other structure.

Residents can enjoy a garden or similar outside space as a community. Even residents who prefer not to work in the garden can enjoy it as an observer. Easy accessibility and clear paths will encourage residents to engage in outdoor activities.



Photos courtesy of Kent LaCombe



Of course, it is important to be aware of safety factors as well. Pathways should be kept clear to avoid injuries. Residents should be encouraged not to spend too much time in the direct sun and should be provided with sunscreen when outside, especially during peak sun times. The best time for outdoor work is early morning, when the sun's rays are not as intense (Lindstrom, 2004c).



Case Study

At eighty-nine years of age, Jim found himself feeling tired during the day more frequently. He spent many hours napping or occasionally watching television in the community room. He usually used a wheelchair to get around Sunnyvale Regional Community Center where he lived. Then the Center embarked on outdoor renovations. New pathways were constructed and a large plot of soil was cultivated for residents to garden and enjoy.

Jim didn't feel much like gardening, but he enjoyed watching the other residents work in the garden and trim hedges. He often went outside to talk to them about when he



used to grow his own gardens. Soon, Jim found that he had more energy and that he looked forward to his outdoor excursions. He also spent more time in the community room socializing with other residents about the weather, politics, and, yes, gardening.

One day the Sunnyvale staff set up a demonstration of new, lightweight tools with extended reach that made trimming leaves and turning soil more accessible to residents who were physically weaker. Jim was amazed at how light the tools felt in his hands. He decided that the next time he went outside to chat he'd try his hand at a little weeding as well.

Discussion:

1. Jim was revitalized by rediscovering an old hobby. Do you know of residents who might experience similar benefits if they were reminded of something they once loved to do?
