TRANSFORMING TRAUMA INTO TRIUMPH

My Home Life

An International Initiative that Promotes Quality of Life for Both Residents and Staff
Long-Term Care Facilities are in a State of...
Trauma is Created by Unrelenting Stress

Trauma results from a collection of accumulated strains, anxieties and burdens that leaders, frontline staff, residents and families experience. This collective stress results in trauma to the organizational system that is felt individually and collectively.
STRESSORS ON THE ADMINISTRATOR:

• Keeping the operations financially afloat
• Meeting everchanging regulatory requirements
  ▪ Balancing the needs of staff as they care for residents
• Pressure from families
• Turnover and workforce problems
• Accountability to owners or boards
• Managing conflict between staff members and tensions among staff, residents and families
The Costs Associated with Organizational Conflict

• 30% of a manager’s time
• 3-4% of absenteeism
• Turnover costs of up to 150% of employee’s salary
• 2.8 wasted hours of every staff member’s time
• $7,500 for every difficult conversation not had
The Stress on the Director of Nursing

- Meeting everchanging regulatory requirements
  - Daily staff call-ins
- The responsibility to assure that staff have the skills to manage increased acuity of residents
- Dealing with conflict among staff
- Pressure from Administrator to admit high care residents and having enough staff to appropriately care for them
  - The “care buck” stops with her

She carries the biggest burden and it trickles down to the whole team.
DEPARTMENT DIRECTORS

• Housekeeping, Maintenance, and Food Service feel like step-children to the nursing department
  - *It is hard to have their voices heard*
  - *Their stress emanates from the stress of other departments – it’s contagious*
• Social Work, Recreation and the Therapies often find themselves running interference to meet the needs of residents and families
  - *They provide informal mentoring to other departments to help them understand how to focus on quality of life for residents*
Who are Our Frontline Staff?

- Mostly women, many of whom are single, heads of household
  - $22,560 Average Annual Salary for a Certified Nursing Assistant
  - $36,230 Average Annual Salary for a Licensed Practical Nurse
    - $18,875 Average Annual Salary for a Housekeeper
  - $18,982 Average Annual Salary for a Food Service Worker
- In order to survive and support their families, most of them work two jobs, 16 hours per day
- Incredibly committed to their families and to the residents in their care
When staff are stressed due to:

- Workforce shortages
- Increased bullying
- Higher levels of favoritism

- Higher resident need
- Mandated overtime

The results can be devastating for everyone!
What Does Staff Want?

Key Research Findings Include:

Respectful treatment of all employees

Trust between employees and senior management

Residents tell us all the time, in many different forms, what is important to them.
Families Want Staff to See Their Loved Ones as Unique and Valued Individuals.
Families tell us that they want positive partnerships and relationships with the staff who care for their loved ones.
Self-aware leaders are key to decreasing stress and promoting positive relationships in the long-term care community.
My Home Life

Could Be the Recipe for Relationship Success
MY HOME LIFE UK

A collaborative initiative to promote quality of life for those living, dying, visiting and working in care homes for older people

- The My Home Life “approach” currently operates in England, Scotland, Northern Ireland and Wales, and has spread to Australia and Germany

- Developed in 2006 as a result of a commitment by National Care Forum (representing not-for-profit care homes in England) and Help the Aged (now known as Age UK, an older people’s charity), to support quality improvement in care homes

www.myhomelife.org.uk
**MY HOME LIFE UK**

- In the first phase of its development, Dr. Julienne Meyer CBE, Professor of Nursing at City, University of London, was commissioned to develop the vision for My Home Life with a number of key stakeholders across the UK.

- This vision was shared with over 18,000 care homes in the UK to create a swell of support for the relationship-based initiative.
There are four conceptual frameworks that encompass the My Home Life approach:

- Developing Best Practices Together
- Focusing on Relationships
- Being Appreciative
- Having Caring Conversations
Eight Best Practice Themes, in three focus areas, were developed to address what older people value and what works in care homes.

These eight themes are also thought to be relevant for family members and staff.
DEVELOPING
BEST
PRACTICES
TOGETHER

THREE
THEMES FOR
ENHANCING
QUALITY OF
LIFE IN CARE
HOMES

Personalization Theme

Navigation Theme

Transformation Theme
PERSONALIZATION THEME

Maintaining Identity (See who I am)
- Working creatively with people to maintain sense of personal identity and engage in meaningful activity

Shared Decision-Making (Involve me)
- Facilitating informed risk taking and the involvement of residents, families and staff in shared decision making in all aspects of home life

Creating Community (Connect with me)
- Optimizing relationships across all members of the care community and encouraging a sense of security, continuity, belonging, purpose, achievement and significance for all
Managing Transitions (Help me to adjust)
- Supporting people both to manage the loss and upheaval associated with going into a home and to move forward.

Improving Health and Healthcare (Enhance my health and wellbeing)
- Ensuring equitable and appropriate access to healthcare services and promoting health to optimize quality of life.

Creating Community (Connect with me)
- Valuing the living and dying in homes and helping to prepare for a “good death” with the support of others.
TRANSFORMATION THEME

Keeping the workforce “fit for purpose” (Enable me to develop)

- Identifying and meeting ever changing training needs within the staff and learning needs of the residents and families

Promoting a Positive Culture (Encourage me to flourish)

- Developing leadership, management and expertise to deliver a culture of care where nursing homes are seen as great places to live, die, visit and work
Focusing on Relationships

People Need

A Sense of Security → A Sense of Belonging → A Sense of Continuity

A Sense of Purpose → A Sense of Achievement → A Sense of Significance
**Being Appreciative**

- Pays attention to the best in us, not the worst; to our strengths not our weaknesses; to possibility thinking, not problem thinking
- Focuses on the core strengths of a situation or organization and use these strengths to reshape the future
- Focuses on doing more of what is already working
  - Is question based, asking curious and courageous questions that helps to acknowledge diverse views and influences how we and others act
- Recognizes the importance of storytelling as helpful to communication
Phases of Being Appreciative

Discover  Envision  Co-create  Embed
Caring Conversations Help Us to Better Engage with Residents, Families and Staff Members

- Celebrate
- Connect Emotionally
- Be Curious
- Collaborate
- Consider Other Perspectives
- Compromise
- Be Courageous
The Way it Works

• The program begins with a 4-day workshop

• The workshop is predominantly experiential and models relationship-centered care, i.e. the types of skills, behaviors, questions that leaders can use in their organizations

• The approach helps leaders experience the power of high-quality listening and engagement which assists in a more comprehensive way of arriving at conclusions and ideas
THE WAY IT WORKS

• The program is introduced and leaders are asked to discuss the critical issues that face their organizations.

• These tools and concepts are utilized to broaden dialogue and are used to reflect on how they could be adopted into everyday work.

• The program offers support to leaders but also remains action-orientated.

• It encourages attendees to actively participate in discussions and to experiment with the tools, ideas and approaches.
THE WAY IT WORKS

- Monthly Action Learning sessions follow the 4-day workshop, encouraging a continuous process of learning and reflection over a one-year time-frame using the tools provided during the workshop.
- Leaders work on real issues with the intention of achieving improvement and transformation in their organizations.
- These monthly sessions are utilized with the understanding that individuals learn best when they learn with and from each other, by working on real issues and reflecting on their own experiences.

www.myhomelife.org.uk
A Pilot Project

Bringing My Home Life to the U.S.
The My Home Life U.S. Pilot Project

Project Goal

To support a resident defined quality of life as well as staff satisfaction and retention through the implementation of the My Home Life vision and approach.
The My Home Life U.S. Pilot Project

Project Components

• 18-month project
• Four facilities
  • Working with Administrators and Department Leaders
• Four-day workshop facilitated by UK Founder
• Monthly action learning sets for one year
  • Pre and post research
RESEARCH PARTNER:
DUKE UNIVERSITY

• Principal Partners:

Eleanor S. McConnell, PhD, RN\textsuperscript{1-3} and Kirsten Corazzini, PhD, FGSA\textsuperscript{1,2,4}

• Expertise:
  • Development and evaluation of educational and quality improvement interventions to improve quality of care and quality of life
  • Culture change in nursing homes from resident, family and staff perspectives
  • Adaptive leadership in nursing homes to promote culture change
  • Person-directed care planning in nursing homes

\textsuperscript{1}Duke Center of Geriatric Nursing Excellence and \textsuperscript{2}Duke Center for the Study of Aging and Human Development \textsuperscript{3}Geriatric Research, Education and Clinical Center (GRECC) Durham VA, \textsuperscript{4}University of Maryland School of Nursing
NEXT STEPS

Your insights and feedback
My Home Life

Leader Satisfaction and Guidance Through Relationships

- Developing Best Practices Together
- Focusing on Relationships

- Being Appreciative
- Having Caring Conversations

- Staff Satisfaction and Retention
- Enhanced Resident Quality of Life
- Family Satisfaction