

RESIDENTIAL CARE FOR ME

Using Human Centred Design to Co-create “Home”

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Driven by compassion and social justice, we are at the forefront of exceptional care and innovation.

Being Mortal

“Our most cruel failure in how we treat the sick and the aged is the failure to recognize that they **have priorities beyond merely being safe and living longer;** that the chance to shape one’s story is essential to sustaining meaning in life; **we have the opportunity to refashion our institutions, culture, and conversations to transform the possibilities for the last chapters of all of our lives.”**



Dr. Atul Gawande

Being Mortal: Medicine and What Matters in the End, 2014



Elder Care Program



Our Current Homes

BROCK FAHRNI	HOLY FAMILY	LANGARA	MOUNT ST. JOSEPH	YOUVILLE
<p>Current Res. Care Capacity 148</p>	<p>Current Res. Care Capacity 143</p>	<p>Current Res. Care Capacity 196</p>	<p>Current Res. Care Capacity 100</p>	<p>Current Res. Care Capacity 42</p>
<p>Year Constructed 1983</p>	<p>Year Constructed 1953</p>	<p>Year Constructed 1990</p>	<p>Year Constructed 1944 and 1976</p>	<p>Year Constructed 1969</p>
<p>Current Bed Distributions Primarily three and four bed rooms; limited private bathrooms; communal shower rooms</p>	<p>Current Bed Distributions Primarily three and four bed rooms; limited private bathrooms; communal shower rooms</p>	<p>Current Bed Distributions Primarily three and four bed rooms; limited private bathrooms; communal shower rooms</p>	<p>Current Bed Distributions Primarily three and four bed rooms; limited private bathrooms; communal shower rooms</p>	<p>Renovated 1980's Current Bed Distributions All single rooms; communal shower rooms</p>



Residential Care Homes



Providence
HEALTH CARE
How you want to be treated.



Background and Context

Current state of residential care

Complexity of residential care is reflected by:

- Highest proportion of people with dementia
- Younger populations
- Diverse cultural and ethnic backgrounds
- Increased co-morbidities
- Staffing levels have remained the same
- High demand for an incredibly diverse skill set of staff
- Aging physical environments
- Increased media attention around critical incidents/abuse
- Culture/society's view of residential care = institutionalized care



Aims of Residential Care for Me

To realize the vision of

Helping people find community, honouring their unique journeys

- To create “home” together with residents, family and staff
- To undertake the largest engagement process our organization has supported within residential care
- To use human centred design to truly understand the experience of residential care



Creating Hope

Grounded in our mission and values we are **pioneers** who embrace the idea of **transitions** and a good life for individuals within the community, including those with complex needs. We respect **individuality** and **dignity** while keeping residents and the environment safe, and creating a place where people want to live and work.



Residential Care for Me



Providence Health Care: Residential Care for Me

The Residential Care for Me project has been in action for many months. The project team has spent hours watching, listening and talking to residents, families and staff, as well as doing research on care homes around the world. Thank you for allowing us into your lives and sharing your experiences with us. A lot has been done but there is still a lot of work to do!

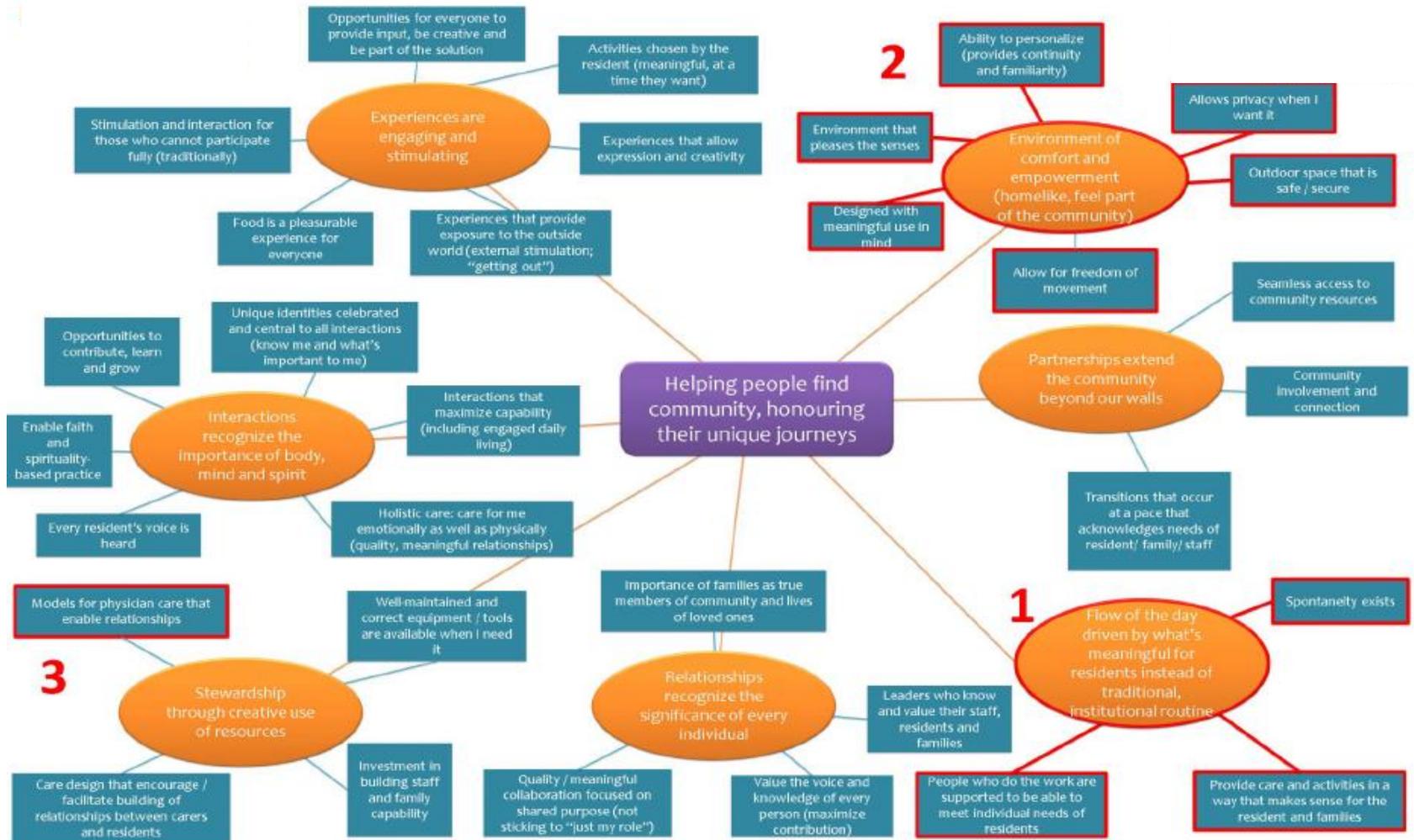
In January and February, we will spend more time talking to residents who took photos of things that were meaningful for them and will host staff focus groups at all sites. Following that, we will create a list of opportunities for improvement that we will tell you about. Then the fun begins!

Starting March, we will bring residents, families and staff together to think up crazy, wild, new ideas. Together, we will create the solutions that make sense for all of us. That includes you, YOU, the resident. YOU, the family. And YOU, the staff.

Thank you for your patience throughout this project. At any time, if you feel like you haven't heard from us in a while, please ask your Operations Leader for more information.



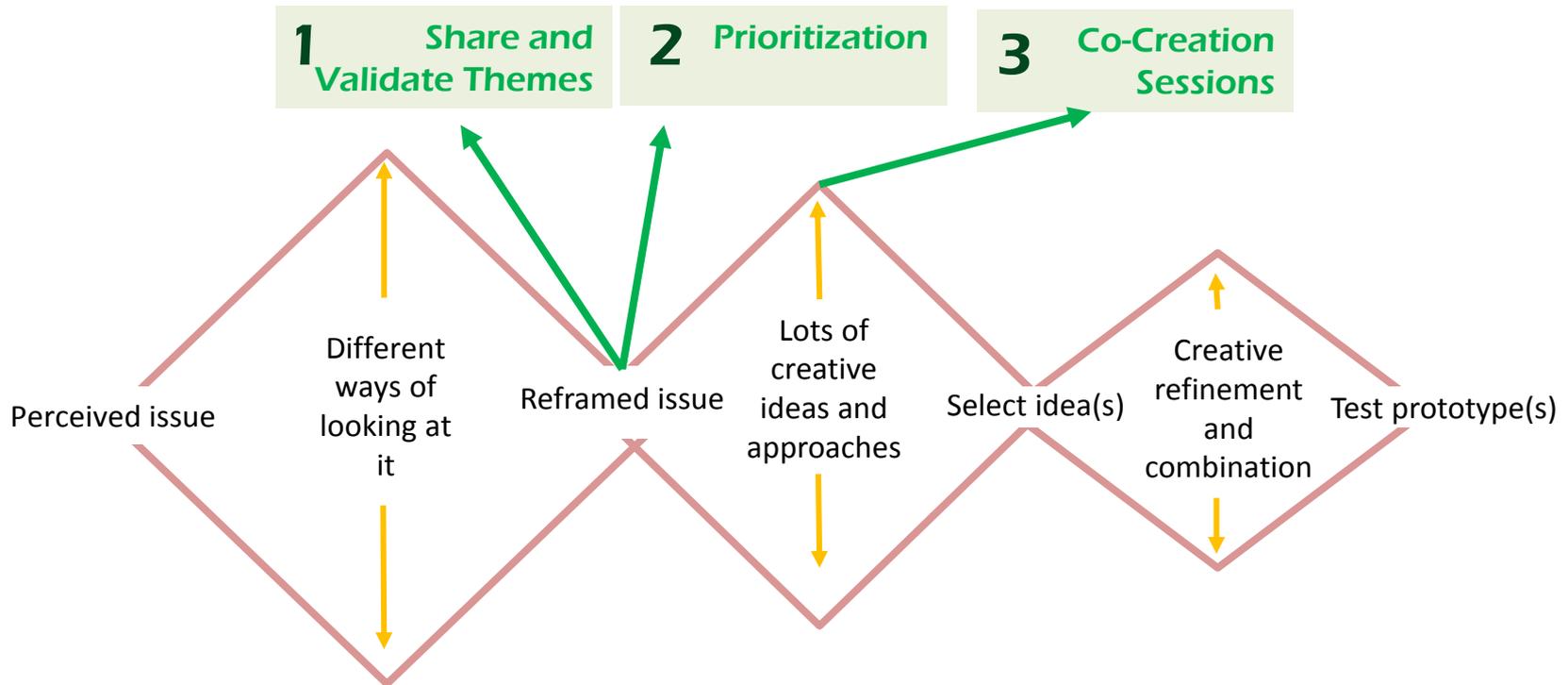
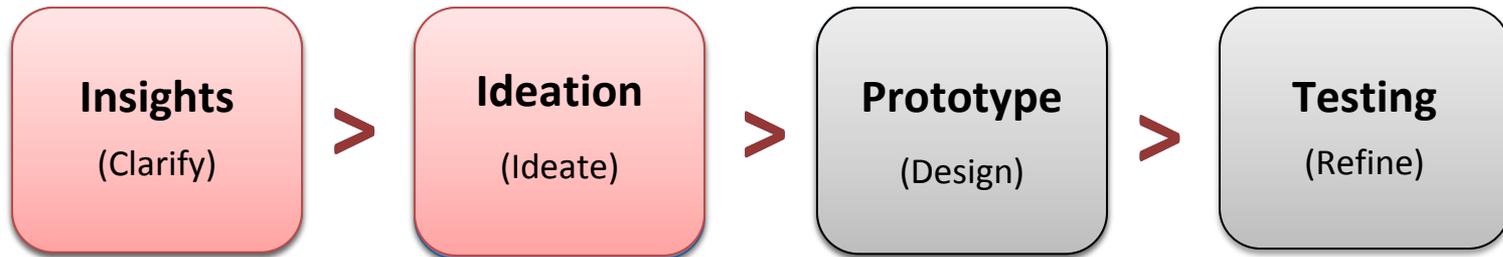
Residential Care for Me



Exploration Phase: Our Opportunities



Next Steps in Design Thinking





Assumptions

Don't assume that we know what the experience is like

- The resident's voice can get lost in the process
- Need to find ways to surface what is meaningful to them

Don't assume that we know what the answer is

The people closest to and including the resident are in the best position to inform the possible solutions



Paradigm Shift in Care of Vulnerable

Medical Model Focus

- Healing
- Symptom relief
- Extending Live

Social Model Focus

- Individual as social being
- Abilities of individual
- Dignity
- Quality of life
- Pain relief
- End of live

Holy Family “Flow of the Day” Focus

Process

- Created **open meetings** once per week
- Brainstormed ideas from staff, residents and family
- Chose one idea and tested the idea
- Discussed the impact on people and refined the idea
- Came back and did it all over again – prepared to fail miserably!

Opportunities

- No roadmap – uncharted territory
- Gaining momentum, interest and possibilities...
- Need the cynicism in order to identify the barriers (!)
- Focus: RCA Model and Food



Current Challenges

Breaking down the RCA routine of the day is ethically complex

- Meal times and physical environment (among other longstanding system constraints) make it challenging for staff to think creatively
- How do we help staff, residents and families recognize that they may be institutionalized
- How do we proceed with this work without pulling the rug out from under them



Vision for PHC Redevelopment



PHC Redevelopment

SPH Redevelopment

Residential Redevelopment



Brock
Fahrni

**St.
Vincent's
Heather**

Youville
Residence

PHC Redevelopment



Residential Care for Me



Providence Health Care: Residential Care for Me

Through excellent intentions and efforts, Providence Health Care has strived, and succeeded, for decades to provide compassionate residential care. There is no doubt, however, that we have been unable to provide the home-like environments and daily routines that resemble what most people desire from their home. To address this situation, PHC Residential Care embarked on a design thinking initiative called "Residential Care for Me" in the spring of 2014, prior to the start of Residential Redevelopment Clinical Planning.

Through the work of Residential Care for Me, we strive to achieve the vision of "helping people find community, honouring their unique journeys".

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Field Study, April 8 -23, 2016



Switzerland (Basel, Urdorf, Winterthur)



Germany (Stuttgart, Krefeld)



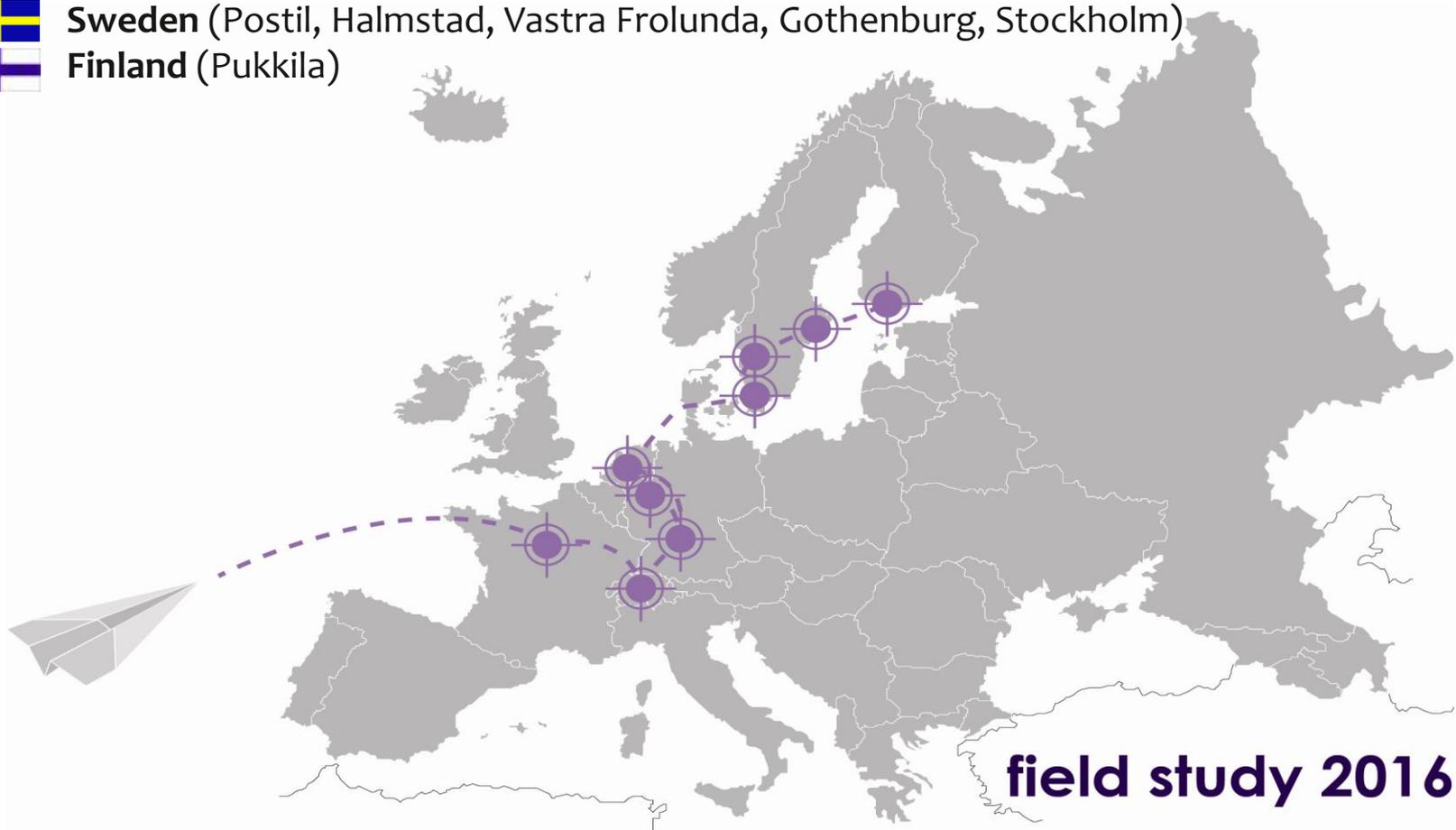
Netherlands (Oldenzaal, Weesp, Den Hague)



Sweden (Postil, Halmstad, Vastra Frolunda, Gothenburg, Stockholm)



Finland (Pukkila)





People

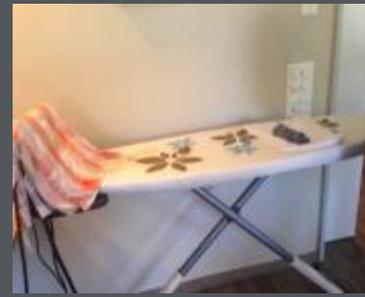
Common themes across 5 countries

- The shift to support seniors to stay at home for as long as possible has been the focus for well over 10 years
- Once in residential care, people are supported until the end of their life journey
- Pressure to avoid hospitalization of residents was strong (!)
- The two predominant groups of seniors living in residential care homes:
 - Somatique (people with significant medical complexity)
 - Demens (people with moderate to severe dementia)

The roles of staff have evolved

- RNs in residential care have evolved into a “Home Care: RN model”
- RCAs are empowered to take on greater responsibility and duties in homes
- Staff are guests in residential care
- Many staff refer to resident’s private rooms as “apartments”
- Ability to shift cultures and societal views on Risk and Safety along with Quality of Life
- Volunteers, volunteers, volunteers!







Care Experience

Residential care homes offered a variety of services for seniors

- Finland neighbourhood model: Community Centre, Adult Day Program, Assisted Living, Respite, Hospice, Medical “Hotel” models and Residential Care
- Several residential care homes offered (hub) services to seniors living in the community: home care teams based out of residential care, restaurants and activities to connect seniors living in isolation at home

Organizational knowledge about a person before they move into residential care

- Seniors had a chance to experience staff, care and the home before moving into residential care

Most successful homes were not afraid to take risks

- Residents were supported to be part of “normal” everyday life:
 - Ironing (!), cooking, cleaning, using stairs (!!), come and go

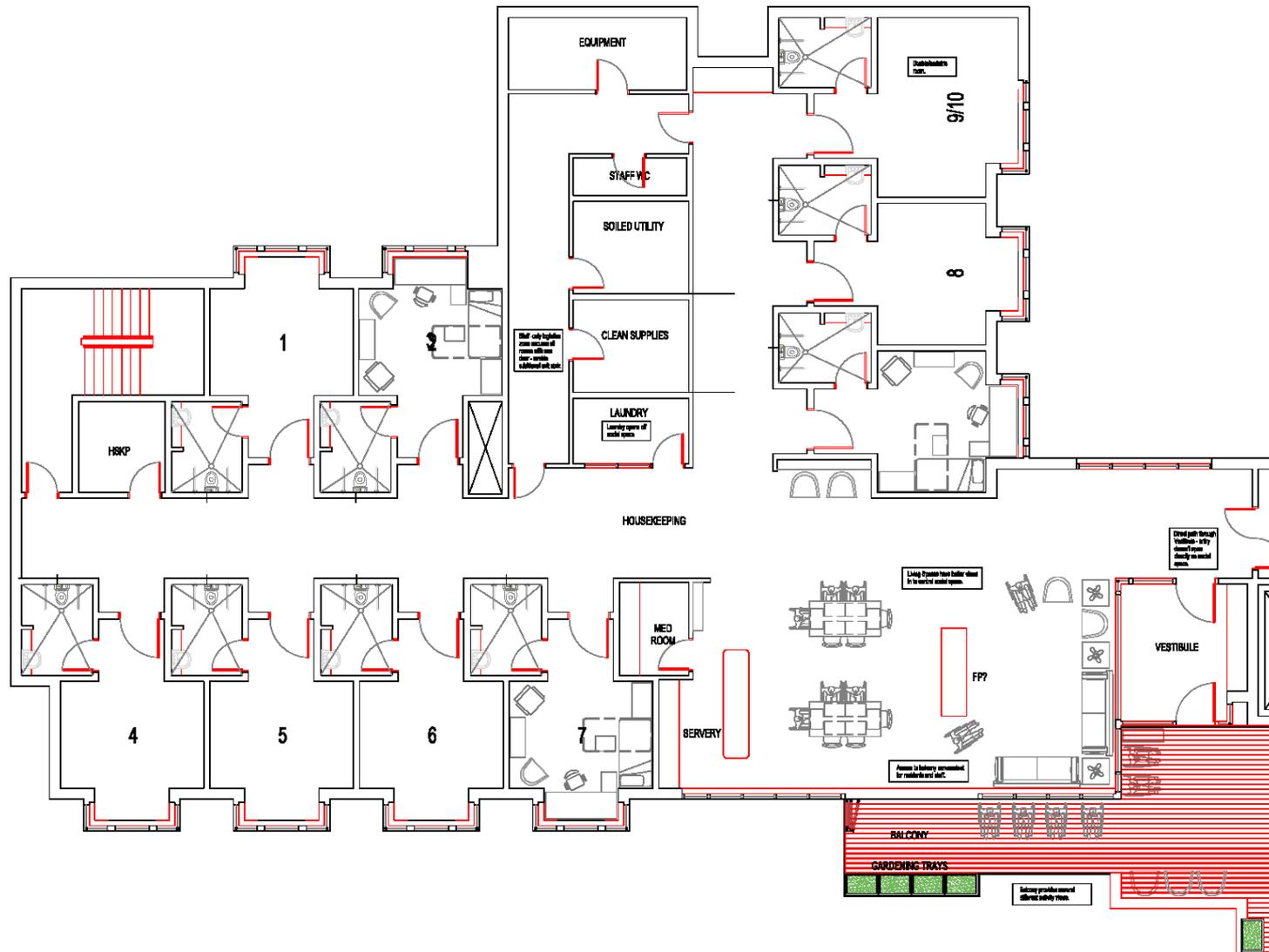


PHC Residential Redevelopment Conceptual Plan

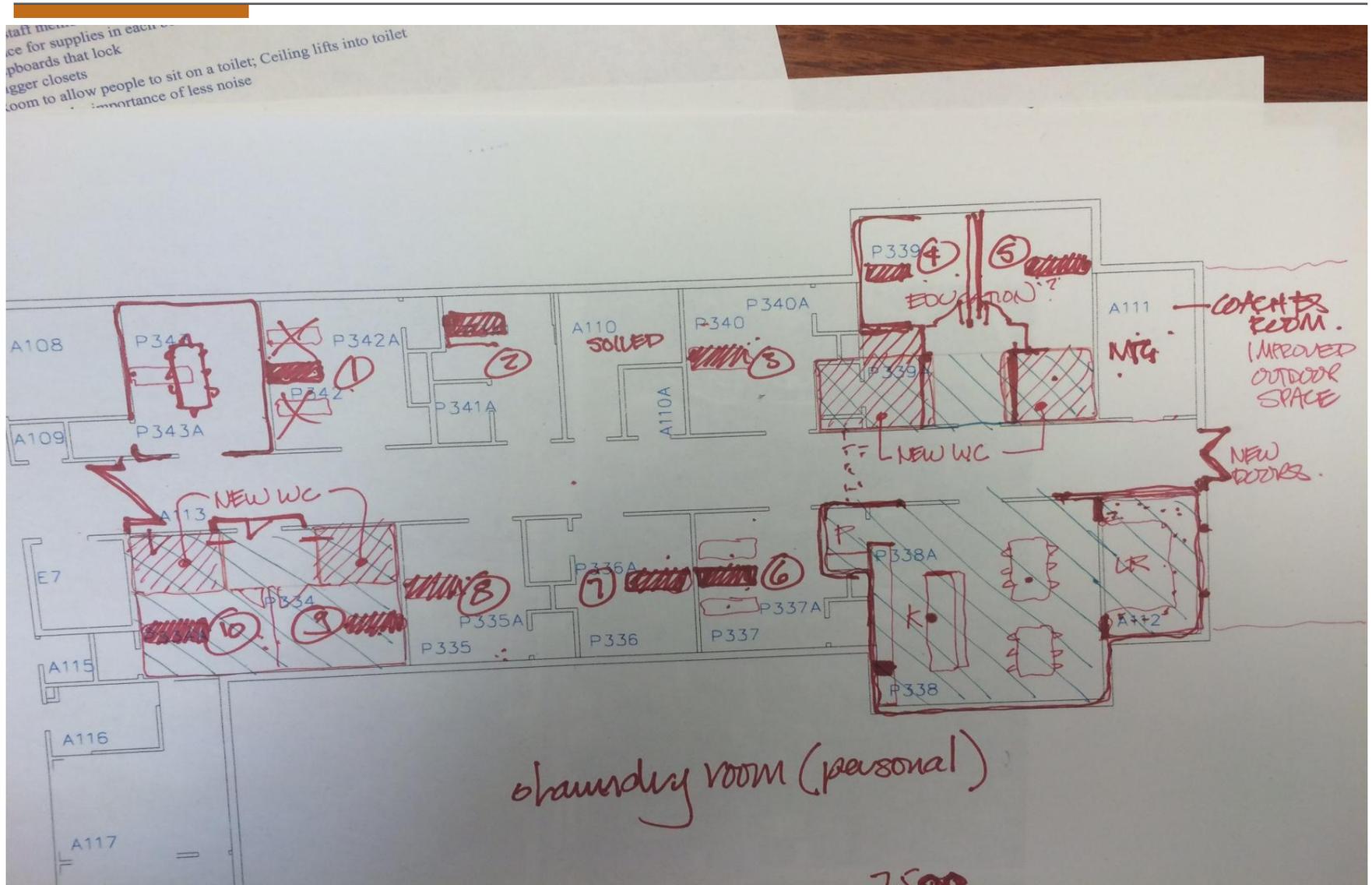
33rd Avenue and Heather Street



The House Concept



Holy Family Residence: Proposal

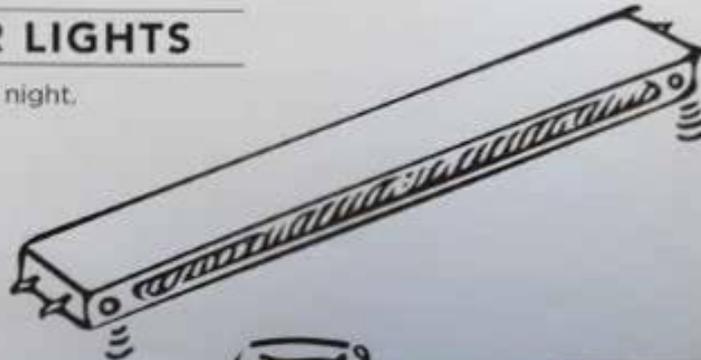


Brock Fahrni: Emily Carr Partnership

Lighting

MOTION SENSOR LIGHTS

Provide none-disturbing light at night.



would need to take into account tendency for visual confusion in some dementia persons.

Would this also be an alert that residents is up & would want to go to the washroom

Maybe disturbing if going on frequently.

Who is it for?
Staff, and Residents

Where is it Implem
Hallways under railing, w
under bed.

How do we Prototype?

Through storyboarded scenarios, possibly with purchased light kits and equipment

Timeline

This concept will be a easily implementable in the current Brock Farhni facility

rooms



Brock Fahrni: Lighting Project



Brock Fahrni: Environmental Design

Personalization

RESIDENT DOOR

Create homelike intervention by creating the illusion of a home front door



illuminated?

Waste of money that could go to our care or better food

Welcome sign is it a rug? full risk for resident

Wouldn't it be too confusing Full risk? How can residents open & close?

Love, love, love! Absolutely brilliant!

Me too! I Love it too.

doors aren't always closed.

floor encourages touch

Who is it for?
Residents

Where is it Implemented?
Doorways to Residents Rooms

How do we Prototype?
Through full scale mockups

Timeline
This concept will lead to easily implementable solutions as well as long term solutions



Brock Fahrni: Before and After



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How to Connect With Us

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