

Culture Change in Aging Services

By Michele Holleran

Culture change is a key trend in aging services, yet we are starting only now to find the common elements in many organizational culture change efforts.

In an academic sense, culture has been defined as “a pattern of shared basic assumptions that was learned by a group as it solves its problems of external adaptation and internal integration” (Schein, 2004). John Kotter, a leading authority on change at Harvard Business School, says there is an 8-step process of creating major change, beginning with establishing a sense of urgency and ending with anchoring new approaches in the culture.

Despite all the scholarly definitions and formulas, providers of aging services across the United States have put their own stamp on the meaning of culture change.

Culture Change Models

For Mississippi Methodist Services in Tupelo, as well as others, culture change has come in the form of adopting the Green House® model, or has expanded outward to a derivative called the Small House or “neighborhood” model. These models feature an open floor plan, an intimate group of residents (usually 10 or so) and universal care workers who cook, clean and attend to the daily living needs of elders. The Eden Alternative model, precursor of the Green House movement, focuses on creating a home-like atmosphere for residents and employees alike, where the emphasis is on honoring the individual. The basic idea is to rid nursing homes of institutional trappings and allow for personal choice, also known as person-centered care.

For Wellspring, LEAP, Pioneer Network and Planetree advocates, culture change is about creating new language, shifting empowerment from the executive ranks to the front line, and educating leaders about how to create environments where workers flourish through decision-making and creative choice for both employees and residents.

Robyn Stone, executive director of AAHSA’s Institute for the Future of Aging Services, advocates the use of long-term care settings as natural, living laboratories in which organizations and their employees freely experiment with notions of culture change to see what does and does not work, and then share evidence-based best practices with

others attempting culture change. In an article entitled “Selecting a Model or Choosing Your Own Culture” (Stone, 2003), she notes that “changing the nature of the work environment and interpersonal relationships takes time and is an evolving process,” and further observes that “many individuals, particularly those who have had a long tenure with the organization or who have been in a position of authority that is challenged by the new approach, will resist adoption of the model.”

Culture change pioneer Kurt Lewin (1948) identified three phases of change: unfreezing, moving and refreezing. More modern change gurus believe that the process is less linear than Lewin envisioned, but most agree that change begins with identification and a realization that something isn’t quite working. That was the impetus for Jackie Harris, CEO of Trinity Senior Living Communities in Michigan. Harris and her team introduced the “Sanctuary” model after her own daughter, during a summer internship at Trinity, pointed out that the Trinity nursing home model was in need of an overhaul. Harris and her team conceptualized a new version of long-term care based on the principles of self-directed care, intimate neighborhoods and a feeling of tranquility, serenity and peacefulness. The Trinity model includes physical amenities such as a hearth room featuring a cozy fireplace, a gourmet kitchen that produces fresh cookies daily, and a luxurious spa where residents can enjoy a soothing whirlpool massage and heated towels.

Partnering to Support Aging in Place

In California, the Eskaton demonstration home is revolutionizing the way seniors age. The concept recognizes that the vast majority of today’s seniors want to age in place, in their own homes. So Eskaton’s take on culture change involves partnering with home builders and technology companies to create universal design, unobtrusive monitoring systems and green principles so older adults are empowered to remain independent and delay or eliminate the need to leave their homes.

Culture change can also mean developing new community-based services and options for seniors based on expressed needs. For example, California-based Episcopal

Senior Communities has set up farmers' markets offering organic produce to 14 affordable housing sites in Northern California.

Shattering Old Paradigms

Culture change, at its heart, is about shattering old paradigms and encouraging people to think and behave in new ways. Many times it starts with a new vision for the future and getting individuals and teams throughout the organization to adopt new mindsets. The transformation of an organization requires employees to adopt a new view of its future, a future they need to regard as essential. Before employees can arrive at this deep conviction, they need to understand “why?” and “why now?” It is up to the organization's leaders to provide those answers.

In fact, it is hard for a wholesale culture change effort to survive unless top leaders are on board. As Schneider et al (1996) point out, “To communicate new values and beliefs requires changing tangibles, the thousands of things that define climate, that define daily life in an organization.”

Judy Brown, senior fellow at the University of Maryland, uses the analogy of an iceberg to describe the phenomenon of change and how it occurs. She believes that change, like an iceberg, looks on the surface like an event, a problem to be addressed and solved. For instance, in aging services the “event” might be the fact that more older Americans are delaying the decision to seek out assisted living or skilled nursing care, preferring instead to stay in their homes. Brown points out that while the “tip” of the iceberg is visible, the behaviors, structure and mindset of the organization largely reside “under the water.” Until these underlying patterns shift, no real culture change will happen. Often the leader must transform himself or herself first in order to transform the organization. The obvious question, Brown writes, is “How do we get to that depth?” In her book, *A Leader's Guide to Reflective Practice* (2007), she outlines 12 practices for getting below the waterline.

Culture and Values Scanning

The first step for many aging-services organizations in the culture change journey is to identify the current mindset of its members. To help with this identification process, the organization's leaders “take the temperature” of stakeholders through an organizational assessment, starting with a culture and values scan. Such research allows leaders to get a snapshot of how employees, residents, board mem-

bers and other invested individuals currently see things and to take quantitative and qualitative benchmarks of the current status.

Armed with this data, the leaders can design a visioning process that articulates where the organization wants to go in the future. The gap between the current status and the vision is the work required by culture change.

New Models Emerge

What have been some useful techniques employed by aging-services organizations to get from “here” to “there”? Techniques and models vary depending on the care setting.

For skilled nursing facilities, models such as Wellspring have had good success by creating a more home-like environment, engaging residents in decision making and choice about their care, and training staff through better orientation, career laddering, and reward and recognition programs. State governments' efforts to educate state surveyors and other regulators about the tenets of person-centered care have proven successful, according to recent research released by the Institute for the Future of Aging Services (IFAS).

In independent living communities, culture change has been enhanced through leadership development, the creation of shared visions, and innovative experimentation with wellness and new technologies. Some organizations have changed the way they work and do business by partnering with community organizations, as is the case of Ecumen in Minnesota, which has affiliated with a NORC (naturally occurring retirement community) in the Minneapolis area – one of an estimated 2,000 NORCs nationwide.

Yet another innovation, Boston's Beacon Hill Village, allows elders to purchase a membership providing access to a variety of concierge-style services such as rides to the grocery store, exercise programs, transportation services, meal preparation and housekeeping. The “village” concept is spreading to other cities, as well.

Home and community-based organizations such as Senior Independence in Ohio promote their own brand of culture change by finding creative ways to meet needs of seniors through “i-villages”, whereby services are offered to seniors living in congregate settings such as apartments and condos. Wellness programming and care provided

by a single home health aide serving several individuals in the same setting are among the offerings of the i-village model. I-Care, also based in Ohio, an initiative spawned by Masonic organizations, is a similar concept.

As self-help communities, or villages, become more commonplace, seniors can link with home care agencies and service providers that offer house repair, rides to doctor appointments and other services in exchange for monthly dues. An organization called Community Without Walls arranges for individual needs assessments and customized care plans. A different take on this model is a multi-generational cooperative, such as one based in Reston, Va., which encourages neighbors and volunteers to provide day care for children and home care for frail seniors.

Perhaps the most well-known model of community care is PACE, the Program of All-Inclusive Care for the Elderly, which began in San Francisco and has since expanded across the country.

Technology and Culture Change

Technology advancements are also contributing to culture change in aging services. AAHSA's Center for Aging Services Technologies (CAST) offers a vision for long-term care using integrated information technology that enhances the "health, safety and social connectedness of older people living in their homes" (*State of Technology in Aging Services: Summary*, 2008, p. 1).

Health and wellness technologies are the focus of CAST's work. These include an integrated system of electronic health records, safety technologies designed to reduce or detect falls and support those with dementia, and memory enhancement through physical and mental stimulation. Pennsylvania-based Kendal Corporation, for example, began offering Collage assessments in 2005 to determine the individual health status of its communities' residents, resulting in several wellness initiatives involving fitness, balance awareness and adaptation to change.

Quality First and Advancing Excellence

The continuous quality improvement (CQI) movement has sparked culture change in thousands of organizations since the 1990s. The aging-services version of CQI is Quality First, a culture change movement launched by AAHSA, the American Health Care Association and the Alliance for Quality Nursing Home Care in 2002.

Quality First offers a self-assessment tool consisting of 100 questions known as the Aging Services Provider Checklist, which relates to 10 key elements: commitment, governance and accountability, leading-edge care and services, community involvement, continuous quality improvement, human resources development, consumer-friendly information, consumer participation, research findings and education, and public trust and consumer confidence.

Advancing Excellence in America's Nursing Homes is a national campaign to improve quality of life for nursing home residents and staff through recruitment and retention, resident satisfaction and consistent staffing assignments. Advancing Excellence encourages the attainment of goals related to these three elements. More than 6,500 nursing homes participate in the program.

A Real and Profound Movement

Whatever model or orientation culture change takes in aging-services organizations, the movement is real and profound. An estimated one in three skilled nursing facilities is actively engaged in culture change, and countless other aging-services providers are redefining themselves at board retreats and in the halls of their communities daily.

Government agencies are getting into the act with "money follows the person" initiatives such as cash and counseling programs that allow relatives and neighbors to be paid as caregivers. There is also talk of creating tax-advantaged savings programs for elder-care needs, similar to the popular college savings plans in place today.

Bottom line, culture change is here to stay in aging services. Central to the movement is choice; a willingness to try new ideas; the building of solid, trusting relationships within and outside the walls of communities; and leadership development that teaches people to revisit their assumptions about how work gets done and how services are provided. In essence, culture is "how a place feels," whether that place is senior housing, a nursing home, a retirement community, or a virtual community.

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